

Sustainable Investment in NSW Women's Health Centres for the Women's Health Program

Business Case October 2022

WOMEN'S HEALTH NSW INCORPORATED



We acknowledge

Women's Health NSW acknowledges the traditional custodians of the lands on which we live and work today. We pay respect to elders both past and present as well as to all other Aboriginal & Torres Strait Islander peoples. WHNSW supports the Uluru Statement from the Heart.

Produced by Women's Health NSW

This Business Case was made possible by an extensive collaborative effort of the 20 NSW Women's Health Centres and Women's Health NSW

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EXECUTIVE SUMMARY

The challenge facing NGO Women's Health Centres in NSW

The Women's Health Program is a unique, integrated primary health care service model for women delivered by a network of 20 community-based NGO Women's Health Centres across NSW. The program provides evidence-based interventions to address both physical and mental health needs, as well as the health impacts of domestic and family violence and sexual violence on women and children, and a range of social determinants of health. Each year, the Women's Health Program supports over 50,000 women of all ages, the majority from lower socio-economic backgrounds and other priority health populations.

The Women's Health Program grant provided by NSW Health - currently \$10.56 million per annum - has not seen a real increase since 1986, despite major economic and social changes, and structural adjustments in the health sector over this period. As a result, the funding structure and resourcing for the Women's Health Program currently reflects the expectations for a 1980's era community-based health service.

The Women's Health sector as a whole is no longer sustainable under current arrangements and has now reached a crisis point. Women's Health Centres are running unsustainable operating deficits, and are being forced to make skilled mental health, clinical and health education staff redundant and/or reduce services. Without additional investment, many Women's Health Centres will be forced to close, or substantially reduce services in the next 2 years.

This Business Case presents a detailed proposal for increased investment to ensure the sustainability of the Women's Health Program and the well-established, community-based Women's Health Centre infrastructure.

Rationale for Increased Investment

In Women's Health

Women in NSW continue to experience physical and mental health vulnerabilities at significantly higher rates than men across a wide range of indicators. Overall, women experience higher rates of psychological distress, poorer self-reported health status, higher rates of hospitalisation for self-harm, and are more likely to have multi-morbid chronic health conditions.

Women face a range of gender-based vulnerabilities, many connected with social determinants of health, that impact on their access to health services and overall health outcomes. They are also more likely to experience socioeconomic disadvantage as a result of income inequality and their disproportionate role as caregivers. Evidence shows that social determinants of health related to, and exacerbated by, socio-economic disadvantage are closely associated with poor mental and physical health in women.

Domestic and family violence and sexual violence also have a profound impact on women's health and well-being. In NSW, women are hospitalised following domestic and family violence at more than 7 times the rate of men. Recent analysis of Australian women also found that 51% of women in their late twenties, 34% of women in their early forties and 26% of women in their sixties to early seventies have experienced at least one type of sexual violence. The adverse physical and mental health impacts of trauma associated with domestic and family violence, and sexual violence are serious, long-lasting and complex, and continue even after the violence has ceased.

In the Women's Health Program and Women's Health Centres

Women's Health Centres provide a safe, private and women-focused setting, and the assurance of being treated or supported by female staff. This is crucial to enabling access to health services for many women and is recognised in the literature as a positive contributor to women's health outcomes. Services are trauma informed - focused on safety, trust, collaboration and empowerment - and person centred – flexible and strengths based, treating each client as an individual, rather than focusing solely on their health 'conditions'.

Key components of the Women's Health Program model include:

- Mental health and well-being services individual and group counselling, and therapeutic resilience work, social and emotional well-being and psychosocial support
- Physical health and well-being services chronic illness prevention and management, nutrition, complementary therapies and body work, reproductive and sexual health, cancer screening
- Integrated care and referral support to address the social determinants of health and the health effects of domestic and family violence and sexual violence
- Health education and health promotion to improve health literacy, promote healthy lifestyle choices and behaviours and equip women to participate in their own health care and well-being.

A 2017 report prepared for the Ministry of Health concluded that Women's Health Centres are 'providing a multitude of primary health and well-being services to a group of women who may have otherwise only received care and support via the acute system' and noted that the Women's Health Program contributes to reductions in the burden of disease associated with mental health, domestic and family violence, cancer and chronic disease.

This finding was supported by a survey of referrers to Women's Health Centres - two-thirds of respondents reported that 75% or more of their clients would be unable to access the services they require if the Centres were not available.

Over 40 years, Women's Health Centres have developed extensive infrastructure in the form of local knowledge, partnerships, connections and support. These networks allow for 'no-wrong door' service provision, facilitate effective integrated care, and maximise the impact of available funding by integrating the full range of Government and non-government support for clients. Community infrastructure, and the capacity to offer integrated 'no-wrong door' servicing, is highly valued by local communities and in all Government service commissioning efforts - and is difficult to replace.

Strategic Alignment with Government Priorities

The Women's Health Program model and approach provides access to much needed trauma-informed mental health services outside of the acute care environment, as well as treatment, preventative health and health education services to women across their lifespan. The program is closely aligned to key priorities across the spectrum of current NSW Government health strategies and frameworks including:

- improving access to community care outside hospitals
- strengthening service integration and co-ordination
- · addressing the social determinants of ill health
- preventative health: improving health education and literacy so that people stay well for longer
- improving service accessibility and outcomes for priority populations



Performance and Outcomes

Women's Health Centres have achieved strong performance against Women's Health Program targets and KPIs set by Local Health Districts. Over the last 3 years, 70% of Centres achieved overperformance against their KPI targets in 50% or more of the key outcomes focused KPIs, despite COVID disruptions.

The unique, holistic Women's Health Program model allows Centres to provide services to women presenting with a broad range of health issues, many of which fall at the intersection of health outcomes and social outcomes identified as Government policy priorities. However, effective intervention, support, education and prevention activities provided through the Women's Health Program to address key presenting health issues is the foundation for achieving the sustained, desired improvements in both health and social outcomes.

Across the sector, Women's Health Centres anticipate that the proposed additional investment, providing sustainable funding to support staff, servicing and infrastructure, will further increase both their capacity and effectiveness to deliver health outcomes.

Stakeholder and Community Support

Referrers

Stakeholder consultation with organisations and individuals who refer to Women's Health Centres indicates that these services are considered an essential part of local health service infrastructure.

- 69% of referrers indicated that three-quarters or more of their clients would not be able to access the services they need elsewhere if the local Women's Health Centre was not available
- 30% indicated that the Women's Health Centre was the only organisation in the local area providing the services that their clients needed
- 40% said that other providers in the area were already at capacity, or had extended waitlists

Representatives from NSW Government agencies who refer to Women's Health Centres rated the quality and appropriateness of service provided as 'Excellent' or 'Good', and two-thirds indicated that 75% or more of the clients they refer to Women's Health Centres would not be able to access the services that they need elsewhere.

All referrer comments highlighted the benefits of the unique Women's Health Program model, service quality, diversity and accessibility and integration with local service systems and communities.

Clients

Consistent themes in feedback from Women's Health Centre clients included:

- The service was more effective in meeting the client's needs than other services that they had accessed in the past with the trauma-informed approach noted as particularly crucial
- The service was effective in supporting recovery from complex trauma, particularly the health impacts of domestic and family violence and sexual violence
- The women-friendly space offered by the Women's Health Centre was important in creating a sense of safety for many clients
- Services and support provided to clients was effective in identifying and diverting clients from self-harm, helping them to leave abusive relationships, and to address and overcome addictions
- Addressing the health impacts of trauma supported clients' recovery and capacity to engage in family life and employment.

Proposed Investment & Benefits

Financial modelling undertaken for this Business Case, provides the first ever standardised and fully costed model for sustainable delivery of the Women's Health Program service model through Women's Health Centres. The model applies a unit-costing approach which focuses exclusively on the services, activity levels and infrastructure associated with delivering the Women's Health Program in each centre.

The cost-benefit analysis applied benefit value proxies to the major categories of presenting health issues identified for women attending Women's Health Centres: Physical/Medical Health, Emotional/Mental Health; Violence/Abuse. Selected benefit proxies are limited to direct costs to the NSW Government, associated with hospitalisations and other government support services

The most conservative estimate of benefits, applying a low 5% avoidance rate and a large 50% discount rate, indicates that the Women's Health Program will deliver \$33.9 million in savings to the NSW Government in 2022-23. Applying a sustainable rate of program funding to actual delivery in 2022-23, this equates to a minimum 78% return on investment.

Total avoided costs exclude the substantial and well-evidenced costs borne by individuals (women and children), communities, employers, and intergenerational impacts on children/family. These non-valued benefits are distributed more heavily towards disadvantaged groups, who make up the majority of Women's Health Centre clients.

Summary of Investment Scenarios

Projected levels of sustainable investment, which would ensure the continuity of the Women's Health Program, have been modelled under the three scenarios outlined below (costs and estimated savings are presented in 2023-24 dollars).

Scenario #	Goal	Description	Total Proposed Investment \$ (2023-24)	Estimated Costs Avoided \$ (2023-24)	Return on Investment % (2023-24)
1	Sustain activities, service levels and outcomes for the Women's Health Program which are currently contracted by Local Health Districts	Recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred. Represents the minimum level of Women's Health Program funding required by Women's Health Centres to remain viable and continue operating this program.	\$19.06 million	\$32.6 million	71%
2	Sustain activities, service levels and outcomes for the Women's Health Program which are currently being delivered by Women's Health Centres	The estimated level of Women's Health Program funding required by Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing – over and above targets – to meet community needs. Provides a strong indication of immediate and acute health needs in local communities and it is strongly recommended that the Ministry of Health consider funding the Women's Health Program at this level.	\$19.97 million	\$35.6 million	78%
3	Expand and enhance activities and service levels for the Women's Health Program to address unmet need, population growth and emerging local health issues identified by each Women's Health Centre	Proposed enhanced investment in the Women's Health Program to address emerging demographic trends and both acute and emerging needs seen by Women's Health Centres in local communities. Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable Women's Health Centres to sustainably expand service delivery in response to need.	\$30.86 million	\$56.4 million	83%

Outcomes framework for implementation

NSW Health's Commissioning for Better Value approach aims to shift the focus in health care from outputs to outcomes. The Women's Health sector recognises that consistent assessment of improvements in health outcomes is critical to demonstrating effectiveness and the ongoing value of services.

Women's Health Centres participated in a collaborative effort with the Ministry of Health to develop a standard outcome and reporting framework. Unfortunately, consistent roll out of this standard reporting framework across LHDs was hampered by the onset of COVID and, due to the nature of the core services provided and the resource limitations on current data capture in WHCs, and the performance indicators proposed were predominately output indicators.

However, despite COVID disruptions, the sector has made some progress in implementing both validated and non-validated tools to improve outcomes measurement.

As part of implementing the increased investment outlined in this business case, Women's Health Centres propose a new outcomes framework focusing on key presenting health issues, and standardised outcomes measurement tools. The proposed framework builds on previous collaborative work with the Ministry of Health. Sector-wide roll out of the standard outcomes framework would be led and supported by the peak body, Women's Health NSW.

Governance and Risk Management

Program Governance

Women's Health Centre CEO's/Managers/Coordinators have operational and financial responsibility for delivery and implementation of the Women's Health Program, with strategic oversight and governance provided by the board or management committee of each organisation.

Organisational Governance

All Women's Health Centres are registered with, and comply with the requirements of, the Australian Charities & Not-for-profits Commission (ACNC). All Women's Health Centres (and Women's Health NSW) are accredited health providers - some with commendation – and have completed multiple accreditation and review cycles. The 2017 review of Women's Health Centres conducted for the NSW Ministry of Health noted that this level of scrutiny is rare amongst non-government organisations.

Financial Management

The peak body, Women's Health NSW, provides ongoing support to the sector to maintain and strengthen financial management and governance standards. Sector wide approaches include: an induction program for new managers, ongoing training for managers and management committees, standardised policies and procedures, and a requirement for all organisations to maintain accreditation.

Staffing

Attraction and retention of skilled and qualified staff remains an issue across the NSW health sector. This proposal seeks to mitigate this by costing all professional staff at minimum SCHADS award pay grades and providing a contribution to staff training and professional supervision for Women's Health Program staff. Women's Health Centres also partner with Universities and RTOs to provide placements and promote employment opportunities in the sector.

Records Management and Cyber Security

In 2021, Women's Health NSW led a sector wide cyber security project including a critical risk assessment of each Women's Health Centre and roll-out of comprehensive policies and procedures, with accompanying training. Centres also took advantage of one-off Social Sector Support funding, provided by the NSW Government during COVID, to upgrade their IT infrastructure and security. This proposal incorporates an annual contribution to maintain IT resources and security infrastructure, based on a unit cost provision for staff funded under the Women's Health Program.



Conclusion

Women's Health Centres have been providing a unique model of integrated, accessible, community-based health care to women and children across NSW for more than 40 years.

This integrated model of health service provision, acknowledged by NSW Health as the optimal strategy, recognises that wellness relies on positive, connected, structural interventions that include adequate housing, equitable access to services, being able to contribute to the economy and being empowered to have self-agency.

The Women's Health Program and the work of the NGO Women's Health Centres has become an essential part of the NSW primary integrated health care system. The Centres' extensive relationships and networks in local communities, and demonstrated commitment to sector-wide collaboration, make them highly effective partners with government, non-government, business and community to enhance health, safety and well-being outcomes for women and girls across NSW.

After 36 years without a structural funding adjustment, Women's Health Centres urgently require additional investment to sustain their skilled workforce and continue providing a contemporary community-based health service for women.

Analysis indicates that investment in the Women's Health Program delivers a substantial minimum 71% return on investment to NSW Government in the form of health care and other savings.

The critical investment in the Women's Health Program presented in this business case will yield health, social and economic benefits for women and children in NSW for years to come.





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SUMMARY OF PROPOSAL COSTINGS

Scenario 1

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by Local Health Districts

Women's Health Centre	Current WHP Grant (2022-23) \$	Sustainable Funding (2022-23) \$	Proposed Funding 2023-24 \$	Proposed Funding 2024-25 \$	Proposed Funding 2025-26 \$
Albury - Women's Centre for Health & Wellbeing Albury- Wodonga	\$ 307,700	\$ 707,619	\$ 745,469	\$ 748,011	\$ 750,564
2. Bankstown Women's Health Centre	\$ 514,102	\$ 719,959	\$ 758,260	\$ 760,632	\$ 763,014
3. Blacktown Women's and Girls Health Centre	\$ 681,200	\$ 997,402	\$ 1,050,584	\$ 1,053,995	\$ 1,057,420
4. Blue Mountains Women's Health and Resource Centre	\$ 546,000	\$ 1,152,639	\$ 1,214,157	\$ 1,218,159	\$ 1,222,177
5. Central Coast Community Women's Health Centre	\$ 751,300	\$ 1,543,781	\$ 1,625,900	\$ 1,630,977	\$ 1,636,075
6. Central West Women's Health Centre	\$ 282,845	\$ 586,120	\$ 617,369	\$ 619,370	\$ 621,379
7. Coffs Harbour Women's Health Centre - GenHealth	\$ 427,525	\$ 1,019,834	\$ 1,073,685	\$ 1,076,629	\$ 1,079,586
8. Cumberland Women's Health Centre	\$ 438,300	\$ 741,156	\$ 780,711	\$ 783,282	\$ 785,864
9. Fairfield Women's Health Services (jointly auspiced by Bankstown & Liverpool)	\$ 408,996	\$ 788,927	\$ 830,997	\$ 833,700	\$ 836,414
10. Hunter Women's Centre	\$ 577,000	\$ 684,195	\$ 720,745	\$ 723,155	\$ 725,576
11. Illawarra Women's Health Centre	\$ 594,000	\$ 1,243,142	\$ 1,309,588	\$ 1,314,004	\$ 1,318,438
12. Leichhardt Women's Community Health Centre	\$ 863,200	\$ 1,161,210	\$ 1,223,211	\$ 1,227,269	\$ 1,231,344
13. Lismore and District Women's Health Centre	\$ 382,635	\$ 808,064	\$ 851,210	\$ 854,035	\$ 856,871
14. Liverpool Women's Health Centre	\$ 881,902	\$ 1,436,479	\$ 1,513,128	\$ 1,518,097	\$ 1,523,087
15. Penrith Women's Health Centre	\$ 607,306	\$ 910,719	\$ 959,228	\$ 962,289	\$ 965,364
16. Shoalhaven Women's Health Centre	\$ 323,700	\$ 595,414	\$ 627,130	\$ 629,134	\$ 631,145
17. Sydney Women's Counselling Centre (Specialist)	\$ 408,282	\$ 851,694	\$ 897,179	\$ 900,165	\$ 903,165
18. W.I.L.M.A Women's Health Centre	\$ 618,800	\$ 812,735	\$ 856,103	\$ 858,915	\$ 861,739
19. Wagga Women's Health Centre	\$ 404,081	\$ 650,704	\$ 685,423	\$ 687,671	\$ 689,929
20. Waminda - South Coast Women's Health and Welfare Aboriginal Corporation	\$ 279,500	\$ 327,525	\$ 344,640	\$ 345,401	\$ 346,165
21. Women's Health NSW	\$ 262,700	\$ 353,087	\$ 371,748	\$ 372,784	\$ 373,825
SCENARIO 1: TOTAL	\$ 10,561,074	\$ 18,092,405	\$ 19,056,465	\$ 19,117,675	\$ 19,179,142



Scenario 2

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by Women's Health Centres.

Women's Health Centre	Current WHP Grant (2022-23) \$	Sustainable Funding (2022-23) \$	Proposed Funding 2023-24 \$	Proposed Funding 2024-25 \$	Proposed Funding 2025-26 \$
1. Albury - Women's Centre for Health & Wellbeing Albury- Wodonga	\$ 307,700	\$ 747,329	\$ 787,311	\$ 790,005	\$ 792,710
2. Bankstown Women's Health Centre	\$ 514,102	\$ 761,186	\$ 801,700	\$ 804,227	\$ 806,764
3. Blacktown Women's and Girls Health Centre	\$ 681,200	\$ 1,187,813	\$ 1,251,227	\$ 1,255,370	\$ 1,259,530
4. Blue Mountains Women's Health and Resource Centre	\$ 546,000	\$ 1,189,494	\$ 1,252,992	\$ 1,257,135	\$ 1,261,296
5. Central Coast Community Women's Health Centre	\$ 751,300	\$ 1,607,519	\$ 1,693,050	\$ 1,698,359	\$ 1,703,690
6. Central West Women's Health Centre	\$ 282,845	\$ 631,042	\$ 664,706	\$ 666,882	\$ 669,066
7. Coffs Harbour Women's Health Centre - GenHealth	\$ 427,525	\$ 1,022,328	\$ 1,076,304	\$ 1,079,248	\$ 1,082,204
8. Cumberland Women's Health Centre	\$ 438,300	\$ 804,302	\$ 847,250	\$ 850,064	\$ 852,890
9. Fairfield Women's Health Services (jointly auspiced by Bankstown & Liverpool)	\$ 408,996	\$ 806,197	\$ 849,191	\$ 851,955	\$ 854,730
10. Hunter Women's Centre	\$ 577,000	\$ 844,715	\$ 889,896	\$ 892,929	\$ 895,975
11. Illawarra Women's Health Centre	\$ 594,000	\$ 1,268,459	\$ 1,336,248	\$ 1,340,745	\$ 1,345,261
12. Leichhardt Women's Community Health Centre	\$ 863,200	\$ 1,161,210	\$ 1,223,211	\$ 1,227,269	\$ 1,231,344
13. Lismore and District Women's Health Centre	\$ 382,635	\$ 820,061	\$ 863,842	\$ 866,703	\$ 869,576
14. Liverpool Women's Health Centre	\$ 881,902	\$ 1,502,283	\$ 1,582,484	\$ 1,587,722	\$ 1,592,982
15. Penrith Women's Health Centre	\$ 607,306	\$ 910,719	\$ 959,228	\$ 962,289	\$ 965,364
16. Shoalhaven Women's Health Centre	\$ 323,700	\$ 610,928	\$ 643,477	\$ 645,540	\$ 647,611
17. Sydney Women's Counselling Centre (Specialist)	\$ 408,282	\$ 910,969	\$ 959,637	\$ 962,849	\$ 966,074
18. W.I.L.M.A Women's Health Centre	\$ 618,800	\$ 841,118	\$ 886,010	\$ 888,930	\$ 891,863
19. Wagga Women's Health Centre	\$ 404,081	\$ 650,704	\$ 685,423	\$ 687,671	\$ 689,929
20. Waminda - South Coast Women's Health and Welfare Aboriginal Corporation	\$ 279,500	\$ 327,525	\$ 344,640	\$ 345,401	\$ 346,165
21. Women's Health NSW	\$ 262,700	\$ 353,087	\$ 371,748	\$ 372,784	\$ 373,825
SCENARIO 2: TOTAL	\$ 10,561,074	\$18,958,988	\$19,969,575	\$20,034,078	\$20,098,852



Scenario 3

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by each Women's Health Centre.

Women's Health Centre	Current WHP Grant (2022-23) \$	Sustainable Funding (2022-23) \$	Proposed Funding 2023-24 \$	Proposed Funding 2024-25 \$	Proposed Funding 2025-26 \$
1. Albury - Women's Centre for Health & Wellbeing Albury- Wodonga	\$ 307,700	\$ 1,153,201	\$ 1,214,963	\$ 1,219,188	\$ 1,223,430
2. Bankstown Women's Health Centre	\$ 514,102	\$ 1,268,969	\$ 1,336,763	\$ 1,341,238	\$ 1,345,732
3. Blacktown Women's and Girls Health Centre	\$ 681,200	\$ 1,187,813	\$ 1,251,227	\$ 1,255,370	\$ 1,259,530
4. Blue Mountains Women's Health and Resource Centre	\$ 546,000	\$ 1,540,904	\$ 1,623,265	\$ 1,628,740	\$ 1,634,237
5. Central Coast Community Women's Health Centre	\$ 751,300	\$ 2,503,280	\$ 2,636,929	\$ 2,645,667	\$ 2,654,441
6. Central West Women's Health Centre	\$ 282,845	\$ 1,141,976	\$ 1,202,898	\$ 1,206,836	\$ 1,210,790
7. Coffs Harbour Women's Health Centre - GenHealth	\$ 427,525	\$ 1,463,085	\$ 1,540,766	\$ 1,545,428	\$ 1,550,109
8. Cumberland Women's Health Centre	\$ 438,300	\$ 804,302	\$ 847,250	\$ 850,064	\$ 852,890
9. Fairfield Women's Health Services (jointly auspiced by Bankstown & Liverpool)	\$ 408,996	\$ 1,131,948	\$ 1,192,250	\$ 1,196,065	\$ 1,199,896
10. Hunter Women's Centre	\$ 577,000	\$ 844,715	\$ 889,896	\$ 892,929	\$ 895,975
11. Illawarra Women's Health Centre	\$ 594,000	\$ 3,975,002	\$ 4,187,477	\$ 4,201,609	\$ 4,215,802
12. Leichhardt Women's Community Health Centre	\$ 863,200	\$ 2,038,231	\$ 2,147,334	\$ 2,154,740	\$ 2,162,177
13. Lismore and District Women's Health Centre	\$ 382,635	\$ 1,036,435	\$ 1,091,781	\$ 1,095,411	\$ 1,099,056
14. Liverpool Women's Health Centre	\$ 881,902	\$ 2,027,596	\$ 2,135,820	\$ 2,142,869	\$ 2,149,947
15. Penrith Women's Health Centre	\$ 607,306	\$ 1,492,566	\$ 1,572,216	\$ 1,577,388	\$ 1,582,582
16. Shoalhaven Women's Health Centre	\$ 323,700	\$ 1,381,231	\$ 1,454,889	\$ 1,459,622	\$ 1,464,375
17. Sydney Women's Counselling Centre (Specialist)	\$ 408,282	\$ 1,639,421	\$ 1,727,217	\$ 1,733,215	\$ 1,739,239
18. W.I.L.M.A Women's Health Centre	\$ 618,800	\$ 1,055,093	\$ 1,111,430	\$ 1,115,120	\$ 1,118,824
19. Wagga Women's Health Centre	\$ 404,081	\$ 830,443	\$ 874,836	\$ 877,792	\$ 880,761
20. Waminda - South Coast Women's Health and Welfare Aboriginal Corporation	\$ 279,500	\$ 327,525	\$ 344,640	\$ 345,401	\$ 346,165
21. Women's Health NSW	\$ 262,700	\$ 450,044	\$ 473,939	\$ 475,375	\$ 476,818
SCENARIO 3: TOTAL	\$ 10,561,074	\$29,293,779	\$30,857,788	\$30,960,067	\$31,062,775



1. ALBURY-WODONGA WOMEN'S HEALTH CENTRE

NAME Women's Centre for Health and Wellbeing Albury-Wodonga

WOMEN'S CENTRE FOR HEALTH AND WELLBEING (ALBURY-WODONGA) INC is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1986, we believe that every woman has the right to feel empowered and to be successful. We believe that by supporting women to become the best versions of themselves, we are helping them to accelerate their lives.

ABN	85 476 895 526
WEBSITE	www.womenscentre.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/164c557e-39af-e811-a962-000d3ad24a0d/documents/
Local Health District	Murrumbidgee LHD
Primary LGA(s) Serviced	Albury LGA
NSW Electorate	Albury
Federal Electorate	Farrer
Site(s)	Albury

Local Population & Health Indicators

Albury LGA has experienced population growth in line with the state, but is expected to grow much more rapidly over the next decade. The LGA is relatively socio-economically disadvantaged, and has a higher proportion of one-parent families and women with three or more chronic and long-term health conditions than the NSW average. Domestic and family violence and sexual assault are a serious issue for women in the community, with rates of reported incidents and hospitalisations well in excess of the state average.

In the Murrumbidgee LHD, women experience relatively high levels of psychological distress, and the district sees high rates women presenting to emergency with mental health issues, as well as hospitalisations for intentional self-harm. More than two-thirds of women are overweight or obese.

Responding to Emerging and Unmet Needs

The Women's Centre for Health and Wellbeing Albury-Wodonga currently provides health services and support to approximately 800 women each year through the Women's Health Program.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and, Scenario 2 reflecting the level of services and activities currently being delivered to meet community needs.

The Centre reports that demand for their services has increased by 30% in the last year. Expanded investment in the program, envisaged in Scenario 3, would enable the Centre to expand its services to more women in the growing population and address key emerging and unmet needs. In particular, the Centre would seek to:

- Expand counselling capacity to address the current 3 to 4 month waitlist for counselling at the Centre;
- Provide additional specialist domestic and family violence and sexual assault counselling and therapeutic groups to women;
- Offer a dedicated integrated care and support capacity to the growing number of women presenting to the service with
 immediate and acute issues impacting on their health including homelessness, domestic and family violence, financial and
 legal issues and food security. Integrated care and support to address the social determinants of health is in high demand and
 this holistic support increases the effectiveness of other health interventions and improves overall outcomes for women;
- Provide a Nurse Practitioner within the Women's Health Centre to ensure women have access to critical preventative health
 care including cervical screening, reproductive health screening and menopause advice. This need is often going unmet due to
 the lack of GPs, female GPs and bulk-billing options in this regional area.



KEY INDICATORS	NSW	Albury LGA	Murrumbidgee LHD
Population & Growth			
2021 Population – Women	4,087,995	29,007	122,636
Recent Population Growth Women - 2011 to 2021	13.60%	13.30%	4.70%
Projected Population Growth Women - 2021 to 2031	9.70%	16.80%	5.30%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	971	
Aboriginal & Torres Strait Islander Women	3.40%	2.70%	
Women who Speak a Language other than English	25.70%	7.00%	
Women with Limited English Proficiency	5.00%	1.30%	
Women Earning <\$800 per week	50.00%	51.00%	
One Parent Families	15.80%	18.50%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	4.4%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		23.70%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		2,868.90
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		159.5
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		46.9
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	733.8	
Domestic Violence Related Assaults: 3 year change (2018-21)	3.1% increase	9.3% increase	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	121.7	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		66.80%
Adults - Min Daily Fruit Intake (2020)	40.30%		43.50%
Adults - Min Daily Vegetable Intake (2020)	5.90%		6.90%
Adults - Insufficient Physical Activity (2020)	38.30%		40.80%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Women's Centre for Health and Wellbeing Albury-Wodonga

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	51%	\$361,384	\$381,008	\$382,608	\$384,215
Management, Community Partnerships & Capacity Building	20%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	10%	\$71,847	\$75,748	\$76,066	\$76,386
Total Salaries & Wages	81%	\$574,147	\$605,324	\$607,866	\$610,419
Total Program & Operating Expenses	19%	\$133,472	\$140,145	\$140,145	\$140,145
SCENARIO 1: TOTAL SUSTAINABLE COST		\$707,619	\$745,469	\$748,011	\$750,564
Less:					
Current Women's Health Program Grant		\$307,700	\$323,085	\$323,085	\$323,085
SCENARIO 1: Additional Investment Required		\$399,919	\$422,384	\$424,926	\$427,479

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Women's Centre for Health and Wellbeing Albury-Wodonga

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	53%	\$395,572	\$417,052	\$418,803	\$420,562
Management, Community Partnerships & Capacity Building	19%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	10%	\$71,847	\$75,748	\$76,066	\$76,386
Total Salaries & Wages	81%	\$608,335	\$641,368	\$644,061	\$646,766
Total Program & Operating Expenses	19%	\$138,994	\$145,944	\$145,944	\$145,944
SCENARIO 2: TOTAL SUSTAINABLE COST		\$747,329	\$787,311	\$790,005	\$792,710
Less:					
Current Women's Health Program Grant		\$307,700	\$323,085	\$323,085	\$323,085
SCENARIO 2: Additional Investment Required		\$439,629	\$464,226	\$466,920	\$469,625

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Women's Centre for Health and Wellbeing Albury-Wodonga

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	58%	\$669,397	\$705,745	\$708,709	\$711,686
Management, Community Partnerships & Capacity Building	12%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	12%	\$143,694	\$151,497	\$152,133	\$152,772
Total Salaries & Wages	83%	\$954,007	\$1,005,809	\$1,010,034	\$1,014,276
Total Program & Operating Expenses	17%	\$199,194	\$209,154	\$209,154	\$209,154
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,153,201	\$1,214,963	\$1,219,188	\$1,223,430
Less:					
Current Women's Health Program Grant		\$307,700	\$323,085	\$323,085	\$323,085
SCENARIO 3: Additional Investment Required		\$845,501	\$891,878	\$896,103	\$900,345

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Women's Centre for Health and Wellbeing Albury-Wodonga

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	345	369	369
Trauma-Informed Counselling	700	800	1600
Emergency Assistance, Integrated Care & Referral	0	0	400
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	-
Complementary Therapy - Other	-	-	-
Therapeutic Groups	26	46	100
Health Education, Skills Development & Support Groups	53	96	196
Physical Activity & Wellness Groups	-	-	-
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	-
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	600
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- · reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



2. BANKSTOWN WOMEN'S HEALTH CENTRE

NAME Bankstown Women's Health Centre

BANKSTOWN WOMEN'S HEALTH CENTRE INC is an incorporated association and registered with the Australian Charities and Notfor-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1977, our mission is to have an empowered community which values and supports the health and wellbeing of women and their families. Our goal is to deliver meaningful and targeted services for women and their families to achieve positive health outcomes and sustainable wellbeing.

ABN	74 181 873 702
WEBSITE	https://www.bwhc.org.au/
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/b90d9164-38af-e811-a960-000d3ad24282/documents/
Local Health District	South Western Sydney LHD
Primary LGA(s) Serviced	Canterbury-Bankstown LGA
NSW Electorate(s)	Bankstown; Canterbury
Federal Electorate	Blaxland
Site(s)	Bankstown

Local Population & Health Indicators

Canterbury-Bankstown LGA makes up one-third of the South Western Sydney LHD and the population is expected to grow by almost 11% over the next decade. The LGA is relatively socioeconomically disadvantaged, and has a higher proportion of one parent families and women on low incomes than the state average. Canterbury-Bankstown is amongst the most culturally diverse LGAs in NSW; almost 15% of women have limited proficiency in spoken English, indicating the need for an interpreter or bi-lingual worker when attending health care services.

In the South Western Sydney LHD, 20.5% of women report high, or very high, levels of psychological distress. In addition, more than 57% of women are overweight or obese, and adults in the LHD have poorer levels of nutrition and physical activity compared with the rest of NSW.

Although reported rates of domestic and family violence are below average, evidence suggests that this is significantly under-reported in culturally diverse communities. In mid 2022, Bankstown Women's Health Centre undertook a community survey of 550 women in the Canterbury-Bankstown area to better understand domestic and family violence. Over 50% of respondents indicated that they would not report the violence. Analysis of the Centre's data also revealed that 90% of women who initially present to the centre with mental health and other socioeconomic issues, subsequently disclose domestic and family violence or other sexual violence.

Responding to Emerging and Unmet Needs

Bankstown Women's Health Centre currently provides health services and support to over 5000 women each year through the Women's Health Program. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and, Scenario 2 reflecting the level of services and activities currently being delivered to meet community needs.

Expanded investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services to more women in this culturally diverse and growing area and address key emerging and unmet needs. In particular, the Centre would seek to:

- Expand counselling capacity to reduce current extensive waitlists and reduce the number of women experiencing domestic and family violence related trauma who are currently being turned away;
- Provide a dedicated integrated care resource, focused on assisting women and children with immediate and acute issues
 impacting on their health including homelessness, domestic and family violence, financial and legal issues, and food security.
 Integrated care and support to address the social determinants of health is in high demand and this holistic support increases
 the effectiveness of other health interventions and improves overall health and wellbeing outcomes for women; and
- Expand its successful health education outreach activities to provide additional groups and information sessions for schools, local organisations and community centres.



KEY INDICATORS	NSW All	Canterbury- Bankstown LGA	South Western Sydney LHD
Population & Growth			
2021 Population - Women	4,087,995	184,997	551,905
Recent Population Growth Women - 2011 to 2021	13.60%	10.80%	19.60%
Projected Population Growth Women - 2021 to 2031	9.70%	10.80%	14.00%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	935	
Aboriginal & Torres Strait Islander Women	3.4%	0.80%	
Women who Speak a Language other than English	25.7%	60.5%	
Women with Limited English Proficiency	5.0%	14.7%	
Women Earning <\$800 per week	50.0%	55.0%	
One Parent Families	15.8%	18.70%	
Health Indicators			
Women with 3 or more long-term health conditions	3.3%*	2.5%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.4%		20.5%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,279.10
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		74.7
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		28.6
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	355.4	
Domestic Violence Related Assaults 3 year change (2018-21)	3.1% increase	1.8% increase	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	42.1	
Sexual Assault 3 year change (2018-21)	4.8% increase	5.4% decrease	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.8%		57.3%
Adults - Min Daily Fruit Intake (2020)	40.3%		37.7%
Adults - Min Daily Vegetable Intake (2020)	5.9%		2.2%
Adults - Insufficient Physical Activity (2020)	38.3%		47.5%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Bankstown Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	45%	\$322,921	\$340,456	\$341,886	\$343,322
Management, Community Partnerships & Capacity Building	20%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	10%	\$71,847	\$75,748	\$76,066	\$76,386
Total Salaries & Wages	74%	\$535,684	\$564,772	\$567,144	\$569,526
Total Program Costs & Operating Expenses	26%	\$184,275	\$193,488	\$193,488	\$193,488
SCENARIO 1: TOTAL SUSTAINABLE COST		\$719,959	\$758,260	\$760,632	\$763,014
Less:					
Current Women's Health Program Grant		\$514,102	\$539,807	\$539,807	\$539,807
SCENARIO 1: Additional Investment Required		\$205,857	\$218,453	\$220,825	\$223,207

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Bankstown Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	47%	\$357,913	\$377,348	\$378,932	\$380,524
Management, Community Partnerships & Capacity Building	19%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	9%	\$71,847	\$75,748	\$76,066	\$76,386
Total Salaries & Wages	75%	\$570,676	\$601,663	\$604,190	\$606,728
Total Program & Operating Expenses	25%	\$190,511	\$200,036	\$200,036	\$200,036
SCENARIO 2: TOTAL SUSTAINABLE COST		\$761,186	\$801,700	\$804,227	\$806,764
Less:					
Current Women's Health Program Grant		\$514,102	\$539,807	\$539,807	\$539,807
SCENARIO 2: Additional Investment Required		\$247,084	\$261,893	\$264,420	\$266,957

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Bankstown Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	63%	\$797,809	\$841,130	\$844,663	\$848,210
Management, Community Partnerships & Capacity Building	11%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	6%	\$71,847	\$75,748	\$76,066	\$76,386
Total Salaries & Wages	80%	\$1,010,572	\$1,065,446	\$1,069,921	\$1,074,414
Total Program & Operating Expenses	20%	\$258,398	\$271,318	\$271,318	\$271,318
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,268,969	\$1,336,763	\$1,341,238	\$1,345,732
Less:					
Current Women's Health Program Grant		\$514,102	\$539,807	\$539,807	\$539,807
SCENARIO 3: Additional Investment Required		\$754,867	\$796,956	\$801,431	\$805,925

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Bankstown Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	140	180	700
Trauma-Informed Counselling	280	361	1200
Emergency Assistance, Integrated Care & Referral	300	300	1000
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	-
Complementary Therapy - Other	-	-	-
Therapeutic Groups	-	-	-
Health Education, Skills Development & Support Groups	128	224	224
Physical Activity & Wellness Groups	120	120	240
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	344	344	344
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	204	140	140
Allied Health - Psychology	350	350	350
Allied Health - Other	100	100	100

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- · provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



3. BLACKTOWN WOMEN'S HEALTH CENTRE

NAME Blacktown Women's & Girls Health Centre Inc

BLACKTOWN WOMEN'S AND GIRLS HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1987, we are committed to providing a professional, affordable and holistic gender-informed service promoting health, wellbeing and empowerment for women, delivered in a caring, non-judgmental, respectful and safe environment.

ABN	98 059 698 895
WEBSITE	https://womensandgirls.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/fd349fed-39af-e811-a960-000d3ad24282/documents/
Local Health District	Western Sydney LHD
Primary LGA(s) Serviced	Blacktown LGA
NSW Electorate(s)	Blacktown; Prospect; Mount Druitt; Winston Hills
Federal Electorate(s)	Chifley; Greenway; McMahon
Site(s)	Blacktown

Local Population & Health Indicators

Blacktown LGA has experienced significant population, at almost double the NSW state average over the last decade. in line with the state, but is expected to grow much more rapidly over the next decade. The LGA is relatively socio-economically disadvantaged, and has a higher proportion of one-parent families than the NSW average. Reported rates of both domestic and family violence and sexual assault in Blacktown exceed the state average, with rates of sexual assault continuing to increase.

In the Western Sydney LHD, 19.6% of women report high, or very high, levels of psychological distress and more than 46% of adults do not engage in sufficient physical activity to maintain long-term health.

Responding to Emerging and Unmet Needs

Blacktown Women's and Girls Health Centre currently provides health services and support to over 2,500 women each year through the Women's Health Program.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and, Scenario 2 reflecting the level of services and activities currently being delivered to meet community needs.

The Centre has extensive community connections and has been recognised and awarded for excellence in community service and inclusive employment over many years. In 2022, the Executive Officer also received the NSW Woman of the Year (Blacktown) Award.

This Centre currently exceeds its Women's Health Program targets and meets community needs with support from its student placement program – a strong partnership with the University of Western Sydney - and ongoing efforts to attract donations. The level of investment proposed in both Scenarios 2 and 3 would enable the Centre to continue this current level of service delivery more sustainably, and ensure strong health outcomes for women.



KEY INDICATORS	NSW	Blacktown LGA	Western Sydney LHD
Population & Growth			
2021 Population – Women	4,087,995	198,905	564,641
Recent Population Growth Women - 2011 to 2021	13.60%	28.00%	22.90%
Projected Population Growth Women - 2021 to 2031	9.70%	8.10%	18.70%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	986	
Aboriginal & Torres Strait Islander Women	3.40%	2.80%	
Women who Speak a Language other than English	25.70%	41.70%	
Women with Limited English Proficiency	5.00%	5.80%	
Women Earning <\$800 per week	50.00%	48.00%	
One Parent Families	15.80%	16.50%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	2.8%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		19.60%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,099.10
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		78.5
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		35.3
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	562.7	
Domestic Violence Related Assaults: 3 year change (2018-21)	3.1% increase	stable	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	90.6	
Sexual Assault: 3 year change (2018-21)	4.8% increase	4.2% increase	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		48.10%
Adults - Min Daily Fruit Intake (2020)	40.30%		42.60%
Adults - Min Daily Vegetable Intake (2020)	5.90%		4.20%
Adults - Insufficient Physical Activity (2020)	38.30%		46.10%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Blacktown Women's and Girls Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	47%	\$467,405	\$492,785	\$494,855	\$496,933
Management, Community Partnerships & Capacity Building	13%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	17%	\$173,076	\$182,474	\$183,241	\$184,010
Total Salaries & Wages	77%	\$770,272	\$812,098	\$815,509	\$818,934
Total Program Costs & Operating Expenses	23%	\$227,130	\$238,486	\$238,486	\$238,486
SCENARIO 1: TOTAL SUSTAINABLE COST		\$997,402	\$1,050,584	\$1,053,995	\$1,057,420
Less:					
Current Women's Health Program Grant		\$681,200	\$715,260	\$715,260	\$715,260
SCENARIO 1: Additional Investment Required		\$316,202	\$335,324	\$338,735	\$342,160

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Blacktown Women's and Girls Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	53%	\$632,779	\$667,139	\$669,941	\$672,754
Management, Community Partnerships & Capacity Building	11%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	15%	\$173,076	\$182,474	\$183,241	\$184,010
Total Salaries & Wages	79%	\$935,646	\$986,451	\$990,595	\$994,755
Total Program & Operating Expenses	21%	\$252,167	\$264,775	\$264,775	\$264,775
SCENARIO 2: TOTAL SUSTAINABLE COST		\$1,187,813	\$1,251,227	\$1,255,370	\$1,259,530
Less:					
Current Women's Health Program Grant		\$681,200	\$715,260	\$715,260	\$715,260
SCENARIO 2: Additional Investment Required		\$506,613	\$535,967	\$540,110	\$544,270

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Blacktown Women's and Girls Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	53%	\$632,779	\$667,139	\$669,941	\$672,754
Management, Community Partnerships & Capacity Building	11%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	15%	\$173,076	\$182,474	\$183,241	\$184,010
Total Salaries & Wages	79%	\$935,646	\$986,451	\$990,595	\$994,755
Total Program & Operating Expenses	21%	\$252,167	\$264,775	\$264,775	\$264,775
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,187,813	\$1,251,227	\$1,255,370	\$1,259,530
Less:					
Current Women's Health Program Grant		\$681,200	\$715,260	\$715,260	\$715,260
SCENARIO 3: Additional Investment Required		\$506,613	\$535,967	\$540,110	\$544,270

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Blacktown Women's and Girls Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	600	984	984
Trauma-Informed Counselling	820	1356	1356
Emergency Assistance, Integrated Care & Referral	240	494	494
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	400	400	400
Complementary Therapy - Other	260	260	260
Therapeutic Groups	32	36	36
Health Education, Skills Development & Support Groups	60	60	60
Physical Activity & Wellness Groups	80	106	106
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	400	400	400
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	-
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



4. BLUE MOUNTAINS WOMEN'S HEALTH CENTRE

NAME Blue Mountains Women's Health and Resource Centre

BLUE MOUNTAINS WOMEN'S HEALTH AND RESOURCE CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1981, we exist to redress health disadvantages women face; and to create equitable access by promoting women's health, well-being, rights and dignity.

ABN	18 334 739 140
WEBSITE	https://www.bmwhrc.org
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/631f1149-39af-e811-a963-000d3ad24077/documents/
Local Health District	Nepean Blue Mountains LHD
Primary LGA(s) Serviced	Blue Mountains LGA; Lithgow LGA
NSW Electorate(s)	Blue Mountains; Bathurst
Federal Electorate(s)	Macquarie; Calare
Site(s)	Katoomba; Lithgow (outreach)

Local Population & Health Indicators

The Blue Mountains LGA, while overall relatively socioeconomically affluent, includes areas of higher disadvantage in the upper and-mid mountains suburbs of Katoomba, Mount Victoria, Blackheath and Lawson. Reported rates of sexual assault in the area are significantly above the state average and have remained high over the last three years. Due in part to the ageing population, 4.0% of women also report having 3 or more chronic and long-term health conditions.

The Lithgow LGA, also serviced by the Blue Mountains Women's Health Centre via outreach, has significant socioeconomic disadvantage. Almost 20% of families are headed by a sole parent and 56% of women are on low incomes. In addition, 5.5% of women have 3 or more chronic and long-term health conditions, well above the NSW average. Lithgow also has high rates of domestic and family violence and sexual assault, leading to hospitalisation of women. These rates have continued to increase significantly over the past three years, well in excess of the state average.

In the Nepean Blue Mountains LHD, 20.8% of women experience high, or very high, levels of psychological distress and almost two-thirds of women are overweight or obese.

Responding to Emerging and Unmet Needs

Blue Mountains Women's Health and Resource Centre currently provides health services and support to over 3000 women each year through the Women's Health Program. Based in the upper blue mountains, the Centre currently provides on-site mental health and clinical services to women in the Blue Mountains and outreach mental health and integrated care services to women in Lithgow.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and, Scenario 2 reflecting the level of services and activities currently being delivered to meet community needs.

Expanded investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services to more women, with a particular focus on the Lithgow area, where the level of unmet need is significant. In particular, the Centre would seek to

- Expand counselling and integrated care capacity to respond to the urgent need for mental health support, especially for
 women experiencing immediate crisis and ongoing trauma from the rapid growth in domestic and family violence and sexual
 assault; and
- Provide additional health screening, clinical and allied health services through the Well Women's Clinic to support the ageing
 population of women in the Blue Mountains, women with multiple health conditions, and those experiencing chronic pain
 resulting from trauma, mental health and other long-term illnesses.



KEY INDICATORS	NSW	Blue Mountains LGA	Lithgow LGA	Nepean Blue Mountains LHD
Population & Growth				
2021 Population – Women	4,087,995	40,258	10,313	200,533
Recent Population Growth Women - 2011 to 2021	13.60%	0.00%	0.00%	10.40%
Projected Population Growth Women - 2021 to 2031	9.70%	3.70%	3.30%	6.50%
Priority Groups				
SEIFA Index of Relative Socio-Economic Disadvantage	1001	1045	923	
Aboriginal & Torres Strait Islander Women	3.40%	2.30%	5.50%	
Women who Speak a Language other than English	25.70%	6.60%	4.10%	
Women with Limited English Proficiency	5.00%	0.50%	0.50%	
Women Earning <\$800 per week	50.00%	50.00%	56.00%	
One Parent Families	15.80%	14.90%	19.20%	
Health Indicators				
Women with 3 or more long-term health conditions	3.30%	4.0%	5.5%	
Mental Health				
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%			20.80%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3			1,379.30
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8			99.4
Domestic and Family Violence & Sexual Assault				
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6			41.2
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	272.7	692.5	
Domestic Violence Related Assaults: 3 year change (2018-21)	3.1% increase	stable	9.9% increase	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	102.3	176.6	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	14.6% increase	
Nutrition & Physical Activity				
Females - Overweight or Obese (2021)	51.80%			64.00%
Adults - Min Daily Fruit Intake (2020)	40.30%			32.70%
Adults - Min Daily Vegetable Intake (2020)	5.90%			6.30%
Adults - Insufficient Physical Activity (2020)	38.30%			39.50%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Blue Mountains Women's Health and Resource Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	52%	\$594,769	\$627,065	\$629,699	\$632,344
Management, Community Partnerships & Capacity Building	12%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	15%	\$168,016	\$177,139	\$177,883	\$178,630
Total Salaries & Wages	78%	\$903,701	\$952,772	\$956,774	\$960,792
Total Program Costs & Operating Expenses	22%	\$248,938	\$261,385	\$261,385	\$261,385
SCENARIO 1: TOTAL SUSTAINABLE COST		\$1,152,639	\$1,214,157	\$1,218,159	\$1,222,177
Less:					
Current Women's Health Program Grant		\$546,000	\$573,300	\$573,300	\$573,300
SCENARIO 1: Additional Investment Required		\$606,639	\$640,857	\$644,859	\$648,877

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Blue Mountains Women's Health and Resource Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	53%	\$626,730	\$660,762	\$663,537	\$666,324
Management, Community Partnerships & Capacity Building	12%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	14%	\$168,016	\$177,139	\$177,883	\$178,630
Total Salaries & Wages	79%	\$935,662	\$986,469	\$990,612	\$994,772
Total Program & Operating Expenses	21%	\$253,832	\$266,524	\$266,524	\$266,524
SCENARIO 2: TOTAL SUSTAINABLE COST		\$1,189,494	\$1,252,992	\$1,257,135	\$1,261,296
Less:					
Current Women's Health Program Grant		\$546,000	\$573,300	\$573,300	\$573,300
SCENARIO 2: Additional Investment Required		\$643,494	\$679,692	\$683,835	\$687,996

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Blue Mountains Women's Health and Resource Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	54%	\$830,895	\$876,013	\$879,692	\$883,387
Management, Community Partnerships & Capacity Building	9%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	17%	\$264,531	\$278,895	\$280,066	\$281,243
Total Salaries & Wages	80%	\$1,236,342	\$1,303,475	\$1,308,950	\$1,314,447
Total Program & Operating Expenses	20%	\$304,562	\$319,790	\$319,790	\$319,790
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,540,904	\$1,623,265	\$1,628,740	\$1,634,237
Less:					
Current Women's Health Program Grant		\$546,000	\$573,300	\$573,300	\$573,300
SCENARIO 3: Additional Investment Required		\$994,904	\$1,049,965	\$1,055,440	\$1,060,937

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Blue Mountains Women's Health and Resource Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	138	160	540
Trauma-Informed Counselling	547	700	1200
Emergency Assistance, Integrated Care & Referral	150	150	550
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	465	500	500
Complementary Therapy - Other	465	500	500
Therapeutic Groups	72	72	72
Health Education, Skills Development & Support Groups	72	72	72
Physical Activity & Wellness Groups	750	750	750
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	1000	1000	1200
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	500	500	800
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	660

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



CENTRAL COAST WOMEN'S HEALTH CENTRE

NAME Central Coast Community Women's Health Centre Ltd

CENTRAL COAST COMMUMITY WOMEN'S HEALTH CENTRE LTD is a company limited by guarantee and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1976, the organisation aims to empower women, hear their stories, acknowledge their real, lived experiences and help them achieve improved outcomes. We provide holistic health care and support to women - including physical, psychological, emotional and social needs. We help to empower and build capacity of a diverse range of women to make their own decisions about their health and lives. We also advocate to the attention of the wider community and decision makers on issues affecting women's health and partner with other local organisations to provide activities that are useful and accessible to women.

ABN	82 001 330 472
ACN	001 330 472
WEBSITE	www.cccwhc.com.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/91c15b17-2caf-e811-a962-000d3ad24a0d/profile
Local Health District	Central Coast LHD
Primary LGA(s) Serviced	Central Coast Council
NSW Electorate(s)	Gosford; Wyong; The Entrance
Federal Electorate(s)	Dobell, Robertson
Site(s)	Wyoming, Wyong and Woy Woy

Local Population & Health Indicators

The Central Coast LGA makes up over 97% of the Central Coast LHD. The area is relatively socioeconomically disadvantaged, and has a higher proportion of both one-parent families and women on low incomes than the state average. Almost 5% of women have three of more chronic and long-term health conditions and more than one-quarter of women report high, or very high, levels of psychological distress. Rates of domestic and family violence remain above the NSW average, along with rates of sexual assault which have increased by 8.8% over the last three years. These indicators are reflected in high rates of mental health emergency presentations and hospitalisation of women for intentional self-harm and violence.

Responding to Emerging and Unmet Needs

Central Coast Community Women's Health Centre currently provides health services and support to over 4500 women each year through the Women's Health Program. Operating across three sites in Wyoming, Wyong and Woy Woy, the Centre provides a full suite of women's health services including a Well Women's Clinic.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Expanded investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Significantly expand generalist counselling capacity across all three locations and reduce the current 4 to 6 week waitlist;
- Provide specialist counselling for women with complex needs associated with childhood sexual abuse, drug and alcohol
 misuse, supported by financial counselling;
- Offer additional, dedicated emergency assistance and integrated care across all three locations to support women and
 children with immediate and acute issues impacting on their health such as homelessness, domestic and family violence,
 financial and legal issues, and food security. Holistic support to address the social determinants of health increases the
 effectiveness of other health interventions and is urgently needed, with 2 women per day currently being turned away;
- Provide additional therapeutic, health education and skills development groups to support women with recovery from
 domestic and family violence trauma, mental health, managing menopause, and maintaining overall health; and
- Offer additional clinical consultations through the Well Women's Clinic and provide bulk billed, outreach cervical and STD screening clinics to women in vulnerable communities.



KEY INDICATORS	NSW	Central Coast LGA	Central Coast LHD
Population & Growth			
2021 Population – Women	4,087,995	178,618	183,082
Recent Population Growth Women - 2011 to 2021	13.60%	8.00%	7.00%
Projected Population Growth Women - 2021 to 2031	9.70%	8.30%	8.00%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	989	
Aboriginal & Torres Strait Islander Women	3.40%	3.70%	
Women who Speak a Language other than English	25.70%	6.40%	
Women with Limited English Proficiency	5.00%	0.80%	
Women Earning <\$800 per week	50.00%	54.00%	
One Parent Families	15.80%	19.20%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	4.9%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		25.70%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,900.20
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		139.2
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		42.5
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	415.8	
Domestic Violence Related Assaults: 3 year change (2018-21)	3.1% increase	stable	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	114.8	
Sexual Assault: 3 year change (2018-21)	4.8% increase	8.8% increase	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		59.00%
Adults - Min Daily Fruit Intake (2020)	40.30%		32.80%
Adults - Min Daily Vegetable Intake (2020)	5.90%		6.80%
Adults - Insufficient Physical Activity (2020)	38.30%		40.30%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Central Coast Community Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	48%	\$741,103	\$781,344	\$784,626	\$787,922
Management, Community Partnerships & Capacity Building	9%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	17%	\$264,531	\$278,895	\$280,066	\$281,243
Total Salaries & Wages	74%	\$1,146,549	\$1,208,807	\$1,213,884	\$1,218,982
Total Program Costs & Operating Expenses	26%	\$397,232	\$417,093	\$417,093	\$417,093
SCENARIO 1: TOTAL SUSTAINABLE COST		\$1,543,781	\$1,625,900	\$1,630,977	\$1,636,075
Less:					
Current Women's Health Program Grant		\$751,300	\$788,865	\$788,865	\$788,865
SCENARIO 1: Additional Investment Required		\$792,481	\$837,035	\$842,112	\$847,210

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Central Coast Community Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	49%	\$793,480	\$836,566	\$840,079	\$843,608
Management, Community Partnerships & Capacity Building	9%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	16%	\$264,531	\$278,895	\$280,066	\$281,243
Total Salaries & Wages	75%	\$1,198,926	\$1,264,028	\$1,269,337	\$1,274,668
Total Program & Operating Expenses	25%	\$408,592	\$429,022	\$429,022	\$429,022
SCENARIO 2: TOTAL SUSTAINABLE COST		\$1,607,519	\$1,693,050	\$1,698,359	\$1,703,690
Less:					
Current Women's Health Program Grant		\$751,300	\$788,865	\$788,865	\$788,865
SCENARIO 2: Additional Investment Required		\$856,219	\$904,185	\$909,494	\$914,825

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Central Coast Community Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	59%	\$1,465,492	\$1,545,068	\$1,551,557	\$1,558,074
Management, Community Partnerships & Capacity Building	6%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	15%	\$366,857	\$386,777	\$388,401	\$390,033
Total Salaries & Wages	79%	\$1,973,264	\$2,080,413	\$2,089,150	\$2,097,925
Total Program & Operating Expenses	21%	\$530,016	\$556,516	\$556,516	\$556,516
SCENARIO 3: TOTAL SUSTAINABLE COST		\$2,503,280	\$2,636,929	\$2,645,667	\$2,654,441
Less:					
Current Women's Health Program Grant		\$751,300	\$788,865	\$788,865	\$788,865
SCENARIO 3: Additional Investment Required		\$1,751,980	\$1,848,064	\$1,856,802	\$1,865,576

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Central Coast Community Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	400	400	550
Trauma-Informed Counselling	900	900	2500
Emergency Assistance, Integrated Care & Referral	300	300	1650
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	150	150	150
Complementary Therapy - Other	-	-	-
Therapeutic Groups	96	126	126
Health Education, Skills Development & Support Groups	80	148	300
Physical Activity & Wellness Groups	256	512	512
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	2000	2000	2400
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	240	240	240
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



6. CENTRAL WEST WOMEN'S HEALTH CENTRE

NAME Central West Women's Health Centre Incorporated

CENTRAL WEST WOMEN'S HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-forprofits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1986, we provide a unique, holistic women-centred preventative and treatment approach to health and well-being. We empower women and children of all ages, cultures, sexual orientation and gender identity to make informed choices throughout their lives.

ABN	28 614 767 988
WEBSITE	https://cwwhc.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/f6d308ae-38af-e811-a961-000d3ad24182/documents/
Local Health District	Western NSW LHD
Primary LGA(s) Serviced	Bathurst Regional LGA
NSW Electorate	Bathurst
Federal Electorate	Calare
Site(s)	Kelso

Local Population & Health Indicators

The Bathurst Regional LGA population is projected to grow by almost 16% over the next decade. Women in the LGA experience domestic and family violence at a rate almost double that of the NSW average, which has continued to increase at an alarming rate over the past three years. Reported incidents of sexual assault in the area are also significant and have remained high.

Whilst reported rates of psychological distress amongst women in the Western NSW LHD are below average, the district sees high rates of women presenting to emergency for mental health issues, as well as hospitalisations for intentional self-harm, suggesting significant and hidden rates of mental health issues. In addition, rates of hospitalisation for women as a result of domestic and family violence are more than double the state average.

Other key indicators of women's health show that 4.2% of women in Bathurst have three of more chronic, long-term health conditions and more than 63% of women in the LHD are overweight or obese.

Responding to Emerging and Unmet Needs

Central West Women's Health Centre currently provides health services and support to over 2500 women each year through the Women's Health Program. The Centre is the only organisation providing no cost services for disadvantaged women, children and young people in the area and there are few options for making referrals in this regional area.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Expanded investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Expand counselling capacity to address the high demand from women, including young women who are experiencing trauma
 related to domestic and family violence and sexual assault;
- Provide a dedicated emergency assistance and integrated care resource to support women and children with immediate and
 acute issues impacting on their health such as homelessness, domestic and family violence, financial and legal issues, and
 food security. Integrated care and support to address the social determinants of health is in high demand and this holistic
 support increases the effectiveness of other health interventions and improves overall health outcomes for women;
- Provide additional therapeutic, health education, skills development and physical activity groups to support women with recovery from domestic and family violence trauma, mental health, managing menopause, and maintaining overall health; and
- Offer clinical consultations through a Well Women's Clinic to help address the current average 6 week wait for access to a female GP in the area.



KEY INDICATORS	NSW	Bathurst Regional LGA	Western NSW LHD
Population & Growth			
2021 Population – Women	4,087,995	21,705	142,023
Recent Population Growth Women - 2011 to 2021	13.60%	9.20%	5.10%
Projected Population Growth Women - 2021 to 2031	9.70%	15.70%	5.70%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	986	
Aboriginal & Torres Strait Islander Women	3.40%	5.20%	
Women who Speak a Language other than English	25.70%	4.20%	
Women with Limited English Proficiency	5.00%	0.50%	
Women Earning <\$800 per week	50.00%	49.00%	
One Parent Families	15.80%	18.50%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	4.2%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		13.80%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		2,722.40
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		147.9
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		73.3
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	754.6	
Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	11.6% increase	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	140.9	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		63.20%
Adults - Min Daily Fruit Intake (2020)	40.30%		43.90%
Adults - Min Daily Vegetable Intake (2020)	5.90%		4.20%
Adults - Insufficient Physical Activity (2020)	38.30%		39.70%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Central West Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	41%	\$238,011	\$250,935	\$251,989	\$253,048
Management, Community Partnerships & Capacity Building	24%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	12%	\$72,954	\$76,915	\$77,238	\$77,562
Total Salaries & Wages	77%	\$451,881	\$476,418	\$478,419	\$480,428
Total Program Costs & Operating Expenses	23%	\$134,239	\$140,951	\$140,951	\$140,951
SCENARIO 1: TOTAL SUSTAINABLE COST		\$586,120	\$617,369	\$619,370	\$621,379
Less:					
Current Women's Health Program Grant		\$282,845	\$296,987	\$296,987	\$296,987
SCENARIO 1: Additional Investment Required		\$303,275	\$320,382	\$322,383	\$324,392

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Central West Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	44%	\$277,389	\$292,451	\$293,679	\$294,913
Management, Community Partnerships & Capacity Building	22%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	12%	\$72,954	\$76,915	\$77,238	\$77,562
Total Salaries & Wages	78%	\$491,258	\$517,934	\$520,109	\$522,293
Total Program & Operating Expenses	22%	\$139,784	\$146,773	\$146,773	\$146,773
SCENARIO 2: TOTAL SUSTAINABLE COST		\$631,042	\$664,706	\$666,882	\$669,066
Less:					
Current Women's Health Program Grant		\$282,845	\$296,987	\$296,987	\$296,987
SCENARIO 2: Additional Investment Required		\$348,197	\$367,719	\$369,894	\$372,079

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Central West Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	54%	\$620,076	\$653,746	\$656,492	\$659,249
Management, Community Partnerships & Capacity Building	12%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	11%	\$128,225	\$135,188	\$135,756	\$136,326
Total Salaries & Wages	78%	\$889,217	\$937,501	\$941,439	\$945,393
Total Program & Operating Expenses	22%	\$252,759	\$265,397	\$265,397	\$265,397
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,141,976	\$1,202,898	\$1,206,836	\$1,210,790
Less:					
Current Women's Health Program Grant		\$282,845	\$296,987	\$296,987	\$296,987
SCENARIO 3: Additional Investment Required		\$859,131	\$905,911	\$909,848	\$913,802

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Central West Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	45	45	250
Trauma-Informed Counselling	360	641	1800
Emergency Assistance, Integrated Care & Referral	26	26	240
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	110	110	200
Complementary Therapy - Other	-	-	-
Therapeutic Groups	55	55	200
Health Education, Skills Development & Support Groups	-	-	500
Physical Activity & Wellness Groups	128	128	256
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	1000
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	700
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	200

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



7. COFFS HARBOUR WOMEN'S HEALTH CENTRE

NAME GenHealth Incorporated t/a Coffs Harbour Women's Health Centre

GENHEALTH INCORPORATED T/A COFFS HARBOUR WOMEN'S HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Our focus is on providing services that are sensitive to the needs of women with complex health and social needs across their lifespan

ABN	73 738 289 843
WEBSITE	https://genhealth.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/48a7e623-38af-e811-a963-000d3ad24077/documents/
Local Health District	Mid-North Coast LHD
Primary LGA Serviced	Coffs Harbour LGA
NSW Electorate	Coffs Harbour
Federal Electorate	Cowper
Site	Coffs Harbour

Local Population & Health Indicators

The Coffs Harbour LGA is relatively socioeconomically disadvantaged, with an above average proportion of one parent families and women on low incomes. 4.7% of women in the LGA also have three or more chronic and long-term health conditions. Reported rates of domestic and family violence remain well above the state average, along with incidents of sexual assault which are more than double the NSW average. Women in this LHD are hospitalised as a result of domestic and family violence at more than twice the average rate.

Although women in the Mid-North Coast LHD report lower levels of psychological distress than the state average, rates of both mental health emergency presentations and intentional self-harm hospitalisations of women are well in excess of the NSW average. These figures suggest significant rates of hidden and under-reported mental illness and psychological distress amongst women.

Responding to Emerging and Unmet Needs

GenHealth, the Coffs Harbour Women's Health Centre currently provides health services to approximately 4000 women each year through the Women's Health Program. The Centre has traditionally focused predominantly on providing clinical health services to meet the significant, and otherwise unmet need for specialist bulk billed women's health practitioners in the area.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Expanded investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand the range of services that it provides and offer a more comprehensive service model. In particular, the Centre would seek to:

- Offer counselling services to more effectively address the needs of women presenting to the centre with complex physical, sexual, emotional and psychological needs associated with domestic and family violence; high demand from women, including young women who are experiencing trauma related to domestic and family violence and sexual assault;
- Provide dedicated intake and assessment and integrated care resources to support women and children with immediate and acute issues impacting on their health. This would significantly enhance the effectiveness of care planning and the capacity to manage case conferencing to support women with complex health needs;
- Introduce a range of therapeutic, health education, skills development and physical activity groups to support women with recovery from domestic and family violence trauma, mental health, managing menopause, and maintaining overall health; and
- Expand on successful pilots of peer-led therapeutic group models to support women recovering from domestic and family violence related trauma and other serious health issues.



Population & Growth			LHD
- Parameter 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
2021 Population – Women	4,087,995	40,746	116,092
Recent Population Growth Women - 2011 to 2021	13.60%	10.90%	10.20%
Projected Population Growth Women - 2021 to 2031	9.70%	6.20%	7.20%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	967	
Aboriginal & Torres Strait Islander Women	3.40%	5.00%	
Nomen who Speak a Language other than English	25.70%	7.90%	
Nomen with Limited English Proficiency	5.00%	1.50%	
Vomen Earning <\$800 per week	50.00%	54.00%	
One Parent Families	15.80%	18.70%	
Health Indicators			
Nomen with 3 or more long-term health conditions	3.30%	4.7%	
Mental Health			
Nomen Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		18.30%
Mental Health Related Emergency Presentations Females ate per 100,000 population (2020-21)	1607.3		2,218.60
ntentional Self Harm Hospitalisations Females ate per 100,000 population (2019-20)	109.8		171.4
Oomestic and Family Violence & Sexual Assault			
nterpersonal Violence Related Hospitalisations of Females ate per 100,000 population (2019-20)	35.6		71.1
Domestic Violence Related Assaults eported incidents per 100,000 population (2021)	393.4	662	
Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	stable	
Sexual Assault eported incidents per 100,000 population (2021)	89.2	194.5	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		51.60%
Adults - Min Daily Fruit Intake (2020)	40.30%		49.80%
Adults - Min Daily Vegetable Intake (2020)	5.90%		5.40%
Adults - Insufficient Physical Activity (2020)	38.30%		38.20%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 – GenHealth (Coffs Harbour Women's Health Centre)

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	30%	\$308,430	\$325,178	\$326,543	\$327,915
Management, Community Partnerships & Capacity Building	14%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	21%	\$215,541	\$227,245	\$228,199	\$229,158
Total Salaries & Wages	65%	\$664,887	\$700,990	\$703,934	\$706,891
Total Program Costs & Operating Expenses	35%	\$354,947	\$372,695	\$372,695	\$372,695
SCENARIO 1: TOTAL SUSTAINABLE COST		\$1,019,834	\$1,073,685	\$1,076,629	\$1,079,586
Less:					
Current Women's Health Program Grant		\$427,525	\$448,901	\$448,901	\$448,901
SCENARIO 1: Additional Investment Required		\$592,309	\$624,784	\$627,728	\$630,684

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - GenHealth (Coffs Harbour Women's Health Centre)

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	30%	\$308,430	\$325,178	\$326,543	\$327,915
Management, Community Partnerships & Capacity Building	14%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	21%	\$215,541	\$227,245	\$228,199	\$229,158
Total Salaries & Wages	65%	\$664,887	\$700,990	\$703,934	\$706,891
Total Program & Operating Expenses	35%	\$357,442	\$375,314	\$375,314	\$375,314
SCENARIO 2: TOTAL SUSTAINABLE COST		\$1,022,328	\$1,076,304	\$1,079,248	\$1,082,204
Less:					
Current Women's Health Program Grant		\$427,525	\$448,901	\$448,901	\$448,901
SCENARIO 2: Additional Investment Required		\$594,803	\$627,403	\$630,347	\$633,303

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - GenHealth (Coffs Harbour Women's Health Centre)

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	40%	\$592,382	\$624,549	\$627,172	\$629,806
Management, Community Partnerships & Capacity Building	10%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	22%	\$319,444	\$336,790	\$338,205	\$339,625
Total Salaries & Wages	72%	\$1,052,743	\$1,109,906	\$1,114,568	\$1,119,249
Total Program & Operating Expenses	28%	\$410,343	\$430,860	\$430,860	\$430,860
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,463,085	\$1,540,766	\$1,545,428	\$1,550,109
Less:					
Current Women's Health Program Grant		\$427,525	\$448,901	\$448,901	\$448,901
SCENARIO 3: Additional Investment Required		\$1,035,560	\$1,091,865	\$1,096,526	\$1,101,208

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

GenHealth (Coffs Harbour Women's Health Centre)

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	-	-	300
Trauma-Informed Counselling	-	-	500
Emergency Assistance, Integrated Care & Referral	-	-	200
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	-
Complementary Therapy - Other	-	-	-
Therapeutic Groups	-	-	100
Health Education, Skills Development & Support Groups	-	-	0
Physical Activity & Wellness Groups	-	-	100
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	5800	5888	5888
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	625	625	625
Allied Health - Psychology	600	600	600
Allied Health - Other	550	550	550

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- · provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



8. CUMBERLAND WOMEN'S HEALTH CENTRE

NAME Cumberland Women's Health Centre

CUMBERLAND WOMEN'S HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1988, we are committed to providing professional, affordable and holistic gender informed services that promote the health, wellbeing and empowerment of women.

ABN	85 240 770 606
WEBSITE	https://cwhc.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/d7db0355-39af-e811-a963-000d3ad24077/documents/
Local Health District	Western Sydney LHD
Primary LGA(s) Serviced	Cumberland LGA
NSW Electorate(s)	Granville, Auburn, Parramatta
Federal Electorate(s)	McMahon, Parramatta, Blaxland
Site(s)	Harris Park

Local Population & Health Indicators

Cumberland LGA has seen 16.6% population growth over the last decade, and this is projected to continue. The LGA is relatively socioeconomically disadvantaged, and has a higher proportion of one parent families and women on low incomes than the state average. Cumberland is also one of the most culturally diverse LGAs in NSW; more than 65% of women speak a language other than English and over 15% of women have limited proficiency in spoken English, indicating the need for an interpreter or bi-lingual worker when attending health care services.

In the Western Sydney LHD, 19.6% of women report high, or very high, levels of psychological distress and more than 46% of adults do not engage in sufficient physical activity to maintain long-term health.

Although reported rates of domestic and family violence are below average, evidence suggests that this is significantly under-reported in culturally diverse communities. For example, in mid-2022, the Bankstown Women's Health Centre undertook a community survey of 550 women in the Canterbury-Bankstown LGA (a similarly highly culturally diverse area) to better understand domestic and family violence. Over 50% of respondents indicated that they would not report the violence. Analysis of the Centre's data also revealed that 90% of women who initially present to the centre with mental health and other socioeconomic issues, subsequently disclose domestic and family violence or other sexual violence.

Responding to Emerging and Unmet Needs

Cumberland Women's Health Centre currently provides health services and support to over 1,100 women each year through the Women's Health Program.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and, Scenario 2 reflecting the level of services and activities currently being delivered to meet community needs.

The Centre has extensive community connections and a team of bi-lingual staff who are known and trusted by the women and organisations in this culturally diverse community. The level of investment proposed in both Scenarios 2 and 3 would enable the Centre to continue its current level of service delivery more sustainably, and ensure strong health outcomes for women.



KEY INDICATORS	NSW	Cumberland LGA	Western Sydney LHD
Population & Growth			
2021 Population – Women	4,087,995	113,938	564,641
Recent Population Growth Women - 2011 to 2021	13.60%	16.60%	22.90%
Projected Population Growth Women - 2021 to 2031	9.70%	17.50%	18.70%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	929	
Aboriginal & Torres Strait Islander Women	3.40%	0.70%	
Women who Speak a Language other than English	25.70%	65.10%	
Women with Limited English Proficiency	5.00%	15.60%	
Women Earning <\$800 per week	50.00%	54.00%	
One Parent Families	15.80%	16.10%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	2.2%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		19.60%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,099.10
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		78.5
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		35.3
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	358.9	
Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	stable	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	51.9	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		48.10%
Adults - Min Daily Fruit Intake (2020)	40.30%		42.60%
Adults - Min Daily Vegetable Intake (2020)	5.90%		4.20%
Adults - Insufficient Physical Activity (2020)	38.30%		46.10%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Cumberland Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	51%	\$375,682	\$396,081	\$397,745	\$399,415
Management, Community Partnerships & Capacity Building	19%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	9%	\$64,113	\$67,594	\$67,878	\$68,163
Total Salaries & Wages	78%	\$580,710	\$612,243	\$614,814	\$617,396
Total Program Costs & Operating Expenses	22%	\$160,446	\$168,468	\$168,468	\$168,468
SCENARIO 1: TOTAL SUSTAINABLE COST		\$741,156	\$780,711	\$783,282	\$785,864
Less:					
Current Women's Health Program Grant		\$438,300	\$460,215	\$460,215	\$460,215
SCENARIO 1: Additional Investment Required		\$302,856	\$320,496	\$323,067	\$325,649

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Cumberland Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	54%	\$430,531	\$453,909	\$455,816	\$457,730
Management, Community Partnerships & Capacity Building	18%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	8%	\$64,113	\$67,594	\$67,878	\$68,163
Total Salaries & Wages	79%	\$635,560	\$670,071	\$672,885	\$675,711
Total Program & Operating Expenses	21%	\$168,742	\$177,179	\$177,179	\$177,179
SCENARIO 2: TOTAL SUSTAINABLE COST		\$804,302	\$847,250	\$850,064	\$852,890
Less:					
Current Women's Health Program Grant		\$438,300	\$460,215	\$460,215	\$460,215
SCENARIO 2: Additional Investment Required		\$366,002	\$387,035	\$389,849	\$392,675

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Cumberland Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	54%	\$430,531	\$453,909	\$455,816	\$457,730
Management, Community Partnerships & Capacity Building	18%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	8%	\$64,113	\$67,594	\$67,878	\$68,163
Total Salaries & Wages	79%	\$635,560	\$670,071	\$672,885	\$675,711
Total Program & Operating Expenses	21%	\$168,742	\$177,179	\$177,179	\$177,179
SCENARIO 3: TOTAL SUSTAINABLE COST		\$804,302	\$847,250	\$850,064	\$852,890
Less:					
Current Women's Health Program Grant		\$438,300	\$460,215	\$460,215	\$460,215
SCENARIO 3: Additional Investment Required		\$366,002	\$387,035	\$389,849	\$392,675

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Cumberland Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	400	528	528
Trauma-Informed Counselling	320	555	555
Emergency Assistance, Integrated Care & Referral	280	290	290
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	100	100	100
Complementary Therapy - Other	-	-	-
Therapeutic Groups	80	80	80
Health Education, Skills Development & Support Groups	20	20	20
Physical Activity & Wellness Groups	64	64	64
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	-
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	-
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- · provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



9. FAIRFIELD WOMEN'S HEALTH CENTRE

NAME Fairfield Women's Health Centre

FAIRFIELD WOMEN'S HEALTH CENTRE is auspiced through a joint venture of the Bankstown and Liverpool Women's Health Centres and guided by a Steering Committee. Focused on women from culturally and linguistically diverse backgrounds, the Centre empowers women and addresses individual health needs using inclusive, preventative, trauma-informed and culturally-appropriate practices.

ABN	Not separately registered
WEBSITE	https://fwhs.com.au/
FINANCIAL REPORTS	See Financial Reports for Bankstown Women's Health Centre and Liverpool Women's Health Centre
Local Health District	South Western Sydney LHD
Primary LGA(s) Serviced	Fairfield LGA
NSW Electorate	Fairfield
Federal Electorate(s)	Fowler, McMahon
Site(s)	Cabramatta

Local Population & Health Indicators

Fairfield LGA is one of the most socioeconomically disadvantaged LGAs in Greater Sydney. Over 60% of women are on low incomes and 23% of families are headed by a sole parent. The LGA is also the most culturally diverse in NSW; over 70% of women speak a language other than English and almost one-quarter have limited proficiency in spoken English, indicating the need for an interpreter or bi-lingual worker when attending health care services. In the South Western Sydney LHD, 20.5% of women report high, or very high, levels of psychological distress and more than 57% are overweight or obese. Adults in the LHD have poorer overall levels of nutrition and physical activity compared with the rest of NSW.

Although reported rates of domestic and family violence are below average, evidence suggests that this is significantly under-reported in culturally diverse communities. For example, in mid-2022, the Bankstown Women's Health Centre undertook a community survey of 550 women in the Canterbury-Bankstown LGA (a similarly culturally diverse area) to better understand domestic and family violence. Over 50% of respondents indicated that they would not report the violence. Analysis of the Centre's data also revealed that 90% of women who initially present to the centre with mental health and other socioeconomic issues, subsequently disclose domestic and family violence or other sexual violence.

Responding to Emerging and Unmet Needs

Fairfield Women's Health Centre currently provides individual health services and support to over 400 women each year through the Women's Health Program, with many more participating in health education and support groups and other health-focused community activities. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Expanded investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand the range of services that it provides to women this culturally diverse community. In particular, the Centre would seek to:

- Significantly expand culturally appropriate counselling services to address the needs of growing numbers of women
 presenting to the centre with trauma related to domestic and family violence;
- Enhance its emergency assistance and integrated care capacity to support women and children with immediate and acute issues impacting on their health including homelessness, domestic and family violence, financial and legal issues and food security. Integrated care and support to address the social determinants of health is in high demand and this holistic support increases the effectiveness of other health interventions and improves overall outcomes for women;
- · Expand its highly successful suite of therapeutic, health education and support and physical activity groups; and
- Provide access to massage and other complementary therapy for women experiencing chronic pain related to trauma, mental health issues and other long-term health conditions;
- Expand nursing capacity in the Well Women's Clinic to provide additional health and reproductive screening.



2021 Population – Women	KEY INDICATORS	NSW	Fairfield LGA	South Western Sydney LHD
Recent Population Growth Women - 2011 to 2021 13.60% 6.40% 19.60%	Population & Growth			
Projected Population Growth Women - 2021 to 2031 9.70% 6.70% 14.00% Priority Groups SEIFA Index of Relative Socio-Economic Disadvantage 1001 8.56 Aboriginal & Torres Strait Islander Women 3.40% 0.70% Women who Speak a Language other than English 25.70% 71.90% Women with Limited English Proficiency 5.00% 24.80% Women with Limited English Proficiency 5.00% 61.00% One Parent Families 15.80% 23.00% Wemen With 3 or more long-term health conditions 3.30% 2.8% Mental Health Indicators Women with 3 or more long-term health conditions 3.30% 2.8% Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Yegetable Intake (2020) 5.90% 1001 101 102 103 104 105 105 105 106 107 107 107 107 108 109 109 109 109 109 109 109	2021 Population – Women	4,087,995	105,605	551,905
Priority Groups SEIFA Index of Relative Socio-Economic Disadvantage 1001 856	Recent Population Growth Women - 2011 to 2021	13.60%	6.40%	19.60%
SEIFA Index of Relative Socio-Economic Disadvantage 1001 856	Projected Population Growth Women - 2021 to 2031	9.70%	6.70%	14.00%
Aboriginal & Torres Strait Islander Women 3.40% 0.70% Women who Speak a Language other than English 25.70% 71.90% Women with Limited English Proficiency 5.00% 24.80% Women Earning <\$800 per week 50.00% 61.00% One Parent Families 15.80% 23.00% Health Indicators Women with 3 or more long-term health conditions 3.30% 2.8% Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) 51.80% 57.30% Adults - Min Daily Vegetable Intake (2020) 5.90%	Priority Groups			
Women who Speak a Language other than English 25.70% 71.90% Women with Limited English Proficiency 5.00% 24.80% Women Earning <\$800 per week	SEIFA Index of Relative Socio-Economic Disadvantage	1001	856	
Women with Limited English Proficiency 5.00% 24.80% Women Earning <\$800 per week	Aboriginal & Torres Strait Islander Women	3.40%	0.70%	
Women Earning <\$800 per week 50.00% 61.00% One Parent Families 15.80% 23.00% Health Indicators	Women who Speak a Language other than English	25.70%	71.90%	
One Parent Families 15.80% 23.00% Health Indicators	Women with Limited English Proficiency	5.00%	24.80%	
Health Indicators Women with 3 or more long-term health conditions 3.30% 2.8% Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults ay ear change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) A.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Women Earning <\$800 per week	50.00%	61.00%	
Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) A.8% increase Stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%	One Parent Families	15.80%	23.00%	
Mental Health 20.50% Women Reporting High or Very High Levels of Psychological Distress (2018-20) 19.40% 20.50% Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) 1607.3 1,279.10 Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) 109.8 74.7 Domestic and Family Violence & Sexual Assault 109.8 28.6 Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) 35.6 28.6 Domestic Violence Related Assaults reported incidents per 100,000 population (2021) 393.4 376.1 Domestic Violence Related Assaults: 3 year change (2018-21) 3.1% increase 2.2% increase Sexual Assault reported incidents per 100,000 population (2021) 89.2 39.8 Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity 57.30% Females - Overweight or Obese (2021) 51.80% 57.30% Adults - Min Daily Fruit Intake (2020) 40.30% 37.70% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Health Indicators			
Momen Reporting High or Very High Levels of Psychological Distress (2018-20) 19,40% 20,50%	Women with 3 or more long-term health conditions	3.30%	2.8%	
Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Al.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%	Mental Health			
rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) 4.8% increase Stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%		19.40%		20.50%
rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Also increase Sexual Assault: 3 year change (2018-21) Also increase Stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%	Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,279.10
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Mutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 28.6 28.6 28.6 28.6 28.6 28.6 28.6 28.6 28.6 28.6 28.6 28.6 28.6 28.6 29.2 39.8 2.2% increase 51.80% 57.30% 57.30% 57.30% 57.30%	Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		74.7
28.6 28.6	Domestic and Family Violence & Sexual Assault			
reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Mutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 3.1% increase 2.2% increase 39.8 49.8 57.30% 4.8% increase 51.80% 57.30% 57.30% 57.30%		35.6		28.6
21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) **Nutrition & Physical Activity** Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) **Sexual Assault: 3 year change (2018-21) **4.8% increase stable **57.30%* **57.30%* **40.30%* **37.70%* **2.20%* **39.8* **4.8% increase stable **4.8% increase stable **4.8% increase stable **57.30%* **5	Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	376.1	
reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) **Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 51.80% 40.30% 39.8 39.8 4.8% increase 51.80% 57.30% 57.30% 37.70% 2.20%	Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	2.2% increase	
Nutrition & Physical Activity 51.80% 57.30% Females - Overweight or Obese (2021) 51.80% 57.30% Adults - Min Daily Fruit Intake (2020) 40.30% 37.70% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Sexual Assault reported incidents per 100,000 population (2021)	89.2	39.8	
Females - Overweight or Obese (2021) 51.80% 57.30% Adults - Min Daily Fruit Intake (2020) 40.30% 37.70% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Adults - Min Daily Fruit Intake (2020) 40.30% 37.70% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Nutrition & Physical Activity			
Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Females - Overweight or Obese (2021)	51.80%		57.30%
	Adults - Min Daily Fruit Intake (2020)	40.30%		37.70%
Adults - Insufficient Physical Activity (2020) 38.30% 47.50%	Adults - Min Daily Vegetable Intake (2020)	5.90%		2.20%
	Adults - Insufficient Physical Activity (2020)	38.30%		47.50%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Fairfield Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	57%	\$450,010	\$474,445	\$476,438	\$478,439
Management, Community Partnerships & Capacity Building	16%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	4%	\$30,545	\$32,203	\$32,339	\$32,474
Total Salaries & Wages	77%	\$610,345	\$643,487	\$646,190	\$648,904
Total Program Costs & Operating Expenses	23%	\$178,581	\$187,510	\$187,510	\$187,510
SCENARIO 1: TOTAL SUSTAINABLE COST		\$788,927	\$830,997	\$833,700	\$836,414
Less:					
Current Women's Health Program Grant		\$408,996	\$429,446	\$429,446	\$429,446
SCENARIO 1: Additional Investment Required		\$379,931	\$401,552	\$404,254	\$406,968

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Fairfield Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	58%	\$463,822	\$489,008	\$491,061	\$493,124
Management, Community Partnerships & Capacity Building	16%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	4%	\$30,545	\$32,203	\$32,339	\$32,474
Total Salaries & Wages	77%	\$624,158	\$658,049	\$660,813	\$663,589
Total Program & Operating Expenses	23%	\$182,040	\$191,142	\$191,142	\$191,142
SCENARIO 2: TOTAL SUSTAINABLE COST		\$806,197	\$849,191	\$851,955	\$854,730
Less:					
Current Women's Health Program Grant		\$408,996	\$429,446	\$429,446	\$429,446
SCENARIO 2: Additional Investment Required		\$397,201	\$419,745	\$422,509	\$425,285

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Fairfield Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	60%	\$680,878	\$717,850	\$720,865	\$723,893
Management, Community Partnerships & Capacity Building	11%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	4%	\$50,908	\$53,672	\$53,898	\$54,124
Total Salaries & Wages	76%	\$861,577	\$908,361	\$912,176	\$916,007
Total Program & Operating Expenses	24%	\$270,371	\$283,889	\$283,889	\$283,889
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,131,948	\$1,192,250	\$1,196,065	\$1,199,896
Less:					
Current Women's Health Program Grant		\$408,996	\$429,446	\$429,446	\$429,446
SCENARIO 3: Additional Investment Required		\$722,952	\$762,804	\$766,619	\$770,450

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Fairfield Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	300	300	400
Trauma-Informed Counselling	700	700	1100
Emergency Assistance, Integrated Care & Referral	480	480	900
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	200
Complementary Therapy - Other	-	-	200
Therapeutic Groups	16	20	50
Health Education, Skills Development & Support Groups	16	80	120
Physical Activity & Wellness Groups	40	80	120
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	-
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	100	100	200
Allied Health - Psychology	-	-	-
Allied Health - Other	59	20	20

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



10. HUNTER WOMEN'S HEALTH CENTRE

NAME Hunter Region Women's Working Group Ltd t/a Hunter Women's Centre

The Hunter Women's Regional Working Group Ltd T/A The HUNTER WOMEN'S CENTRE is a company limited by guarantee, and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1976, we engage, support and empower Hunter women and their families to improve their lives through gender specific health and family-safe programs. We focus on reducing violence against women and their children, and facilitating women's health, safety and wellbeing.

ABN	51 001 278 520
WEBSITE	https://hwc.org.au/hrwwg
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/27048ec7-38af-e811-a963-000d3ad24077/documents/
Local Health District	Hunter New England LHD
Primary LGA(s) Serviced	Newcastle LGA
NSW Electorate(s)	Newcastle; Wallsend
Federal Electorate(s)	Newcastle
Site(s)	Mayfield

Local Population & Health Indicators

The Newcastle LGA is socioeconomically diverse with areas of more significant disadvantage in western suburbs including Waratah, Mayfield and Shortland. Overall, 4.1% of women in the LGA also have three or more chronic and long-term health conditions. Reported rates of domestic and family violence and incidents of sexual assault are also above average, leading to higher than average rates of hospitalisations of women.

Although women in the Hunter New England LHD report rates of psychological distress consistent with the NSW state average of 19.4%, rates of both mental health emergency presentations and intentional self-harm hospitalisations of women are in excess of the NSW average. These figures suggest rates of hidden and under-reported mental illness and psychological distress amongst women.

Responding to Emerging and Unmet Needs

Hunter Women's Centre currently provides health services and support to over 1,700 women each year through the Women's Health Program.

Sustainable investment in the program is reflected in Scenario 1, with a recalibration of costs to deliver currently contracted services and, Scenario 2 reflecting the level of services and activities currently being delivered to meet community needs.

Established in the area in 1976, the Centre has built extensive community connections and has a team of staff who are known and trusted by women and organisations in the area. The level of investment proposed in both Scenarios 2 and 3 would enable the Centre to continue its current level of service delivery more sustainably and ensure strong health outcomes for women.



KEY INDICATORS	NSW	Newcastle LGA	Hunter New England LHD
Population & Growth			
2021 Population – Women	4,087,995	85,893	480,105
Recent Population Growth Women - 2011 to 2021	13.60%	8.90%	9.10%
Projected Population Growth Women - 2021 to 2031	9.70%	8.10%	10.80%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	997	
Aboriginal & Torres Strait Islander Women	3.40%	3.50%	
Women who Speak a Language other than English	25.70%	10.30%	
Women with Limited English Proficiency	5.00%	1.80%	
Women Earning <\$800 per week	50.00%	50.00%	
One Parent Families	15.80%	17.40%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	4.1%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		19.40%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,982.70
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		179.5
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		58.3
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	400.9	
Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	stable	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	135.6	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		60.10%
Adults - Min Daily Fruit Intake (2020)	40.30%		40.20%
Adults - Min Daily Vegetable Intake (2020)	5.90%		8.30%
Adults - Insufficient Physical Activity (2020)	38.30%		40.40%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Hunter Women's Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	47%	\$319,372	\$336,714	\$338,128	\$339,548
Management, Community Partnerships & Capacity Building	21%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	12%	\$84,008	\$88,570	\$88,942	\$89,315
Total Salaries & Wages	80%	\$544,296	\$573,851	\$576,261	\$578,681
Total Program Costs & Operating Expenses	20%	\$139,899	\$146,894	\$146,894	\$146,894
SCENARIO 1: TOTAL SUSTAINABLE COST		\$684,195	\$720,745	\$723,155	\$725,576
Less:					
Current Women's Health Program Grant		\$577,000	\$605,850	\$605,850	\$605,850
SCENARIO 1: Additional Investment Required		\$107,195	\$114,895	\$117,305	\$119,726

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Hunter Women's Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	54%	\$460,080	\$485,062	\$487,100	\$489,146
Management, Community Partnerships & Capacity Building	17%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	10%	\$84,008	\$88,570	\$88,942	\$89,315
Total Salaries & Wages	81%	\$685,004	\$722,200	\$725,233	\$728,279
Total Program & Operating Expenses	19%	\$159,711	\$167,696	\$167,696	\$167,696
SCENARIO 2: TOTAL SUSTAINABLE COST		\$844,715	\$889,896	\$892,929	\$895,975
Less:					
Current Women's Health Program Grant		\$577,000	\$605,850	\$605,850	\$605,850
SCENARIO 2: Additional Investment Required		\$267,715	\$284,046	\$287,079	\$290,125

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Hunter Women's Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	54%	\$460,080	\$485,062	\$487,100	\$489,146
Management, Community Partnerships & Capacity Building	17%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	10%	\$84,008	\$88,570	\$88,942	\$89,315
Total Salaries & Wages	81%	\$685,004	\$722,200	\$725,233	\$728,279
Total Program & Operating Expenses	19%	\$159,711	\$167,696	\$167,696	\$167,696
SCENARIO 3: TOTAL SUSTAINABLE COST		\$844,715	\$889,896	\$892,929	\$895,975
Less:					
Current Women's Health Program Grant		\$577,000	\$605,850	\$605,850	\$605,850
SCENARIO 3: Additional Investment Required		\$267,715	\$284,046	\$287,079	\$290,125

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Hunter Women's Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	190	300	300
Trauma-Informed Counselling	1520	2400	2400
Emergency Assistance, Integrated Care & Referral	-	-	-
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	-
Complementary Therapy - Other	-	-	-
Therapeutic Groups	25	25	25
Health Education, Skills Development & Support Groups	25	25	25
Physical Activity & Wellness Groups	-	-	-
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	-
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	-
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



11.ILLAWARRA WOMEN'S HEALTH CENTRE

NAME Illawarra Women's Health Centre Incorporated

ILLAWARRA WOMEN'S HEALTH CENTRE INC is an incorporated association and registered with the Australian Charities and Not-forprofits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1986, we provide woman-centred, safe, high quality health and wellbeing services to all women of the Illawarra. Our response to the needs of women and girls in the region is shaped by evidence of effective practice local, state and national policy contexts and by listening to our clients and our community.

ABN	57 253 131 534
WEBSITE	https://womenshealthcentre.com.au/
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/e7795a24-39af-e811-a962-000d3ad24a0d/documents/
Local Health District	Illawarra Shoalhaven LHD
Primary LGA(s) Serviced	Shellharbour LGA; Wollongong LGA
NSW Electorate(s)	Shellharbour, Kiama, Wollongong, Keira
Federal Electorate(s)	Whitlam, Cunningham
Site(s)	Warilla

Local Population & Health Indicators

The Shellharbour and Wollongong LGAs are socioeconomically diverse and overall demographic data obscures areas of more significant socioeconomic disadvantage and cultural diversity in the northern and western suburbs of Shellharbour and southern suburbs of Wollongong. Shellharbour and Wollongong both have higher proportions of women on low incomes than the NSW average, and higher than average rates of one parent families. In addition, between 4.2% and 4.4% of women experience chronic and long-term health conditions. Across the Illawarra Shoalhaven LHD, rates of women presenting to emergency for mental health related conditions exceeds the state average. More than 61% of women in the area are overweight or obese and adults have poorer levels of nutrition compared with the rest of NSW.

Responding to Emerging and Unmet Needs

Illawarra Women's Health Centre currently provides health services and support to over 6,000 women each year through the Women's Health Program. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and, Scenario 2 reflecting the level of services and activities currently being delivered to meet community needs.

Expanded investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand both its servicing capacity and the range of health services available to women. In particular, the Centre would seek to:

- Significantly expand counselling and psychology services to reduce current waitlists of women, including young women and women with disability, who are experiencing mental illness, and domestic and family violence related trauma;
- Increase capacity to provide emergency assistance and integrated care to support women and children with immediate and
 acute issues impacting on their health such as homelessness, domestic and family violence, financial and legal issues and
 food security. The Centre is seeing rapidly growing need from women across the region for integrated care and support to
 address social determinants of health;
- Expand therapeutic group programs with a particular focus on supporting women recovering from trauma associated with domestic and family violence and sexual assault;
- Engage a specialist health worker to support Aboriginal and Torres Strait Islander women presenting to the Centre;
- Increase clinical capacity to provide mental health care plans and specialist women's health services including reproductive health screening, long-acting reversible contraceptives and terminations.

Illawarra Women's Health Centre would also seek to establish a new site in Wollongong, offering disadvantaged women in Wollongong access to the same range of multi-disciplinary services provided at its current site in Warilla. In response to demand, the new site would have a greater emphasis on the health needs of young women, and women from culturally diverse backgrounds.



KEY INDICATORS	NSW	Shellharbour LGA	Wollongong LGA	Illawarra Shoalhaven LHD
Population & Growth				
2021 Population – Women	4,087,995	39,006	108,948	217,075
Recent Population Growth Women - 2011 to 2021	13.60%	15.40%	6.20%	11.70%
Projected Population Growth Women - 2021 to 2031	9.70%	17.70%	14.30%	14.20%
Priority Groups				
SEIFA Index of Relative Socio-Economic Disadvantage	1001	976	989	
Aboriginal & Torres Strait Islander Women	3.40%	3.90%	2.70%	
Women who Speak a Language other than English	25.70%	10.90%	17.10%	
Women with Limited English Proficiency	5.00%	1.70%	3.40%	
Women Earning <\$800 per week	50.00%	56.00%	54.00%	
One Parent Families	15.80%	18.70%	16.80%	
Health Indicators				
Women with 3 or more long-term health conditions	3.30%	4.4%	4.2%	
Mental Health				
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%			14.50%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3			1,762.30
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8			108.2
Domestic and Family Violence & Sexual Assault				
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6			23.4
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	310.9	295.3	
Domestic Violence Related Assaults: 3 year change (2018-21)	3.1% increase	stable	stable	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	87.1	77.3	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	stable	
Nutrition & Physical Activity				
Females - Overweight or Obese (2021)	51.80%			61.50%
Adults - Min Daily Fruit Intake (2020)	40.30%			37.90%
Adults - Min Daily Vegetable Intake (2020)	5.90%			3.50%
Adults - Insufficient Physical Activity (2020)	38.30%			38.20%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Illawarra Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	58%	\$722,117	\$761,328	\$764,526	\$767,737
Management, Community Partnerships & Capacity Building	11%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	11%	\$134,286	\$141,577	\$142,172	\$142,769
Total Salaries & Wages	80%	\$997,319	\$1,051,473	\$1,055,889	\$1,060,324
Total Program Costs & Operating Expenses	20%	\$245,823	\$258,114	\$258,114	\$258,114
SCENARIO 1: TOTAL SUSTAINABLE COST		\$1,243,142	\$1,309,588	\$1,314,004	\$1,318,438
Less:					
Current Women's Health Program Grant		\$594,000	\$623,700	\$623,700	\$623,700
SCENARIO 1: Additional Investment Required		\$649,142	\$685,888	\$690,304	\$694,738

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Illawarra Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	58%	\$740,316	\$780,515	\$783,793	\$787,085
Management, Community Partnerships & Capacity Building	11%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	11%	\$134,286	\$141,577	\$142,172	\$142,769
Total Salaries & Wages	80%	\$1,015,517	\$1,070,660	\$1,075,156	\$1,079,672
Total Program & Operating Expenses	20%	\$252,942	\$265,589	\$265,589	\$265,589
SCENARIO 2: TOTAL SUSTAINABLE COST		\$1,268,459	\$1,336,248	\$1,340,745	\$1,345,261
Less:					
Current Women's Health Program Grant		\$594,000	\$623,700	\$623,700	\$623,700
SCENARIO 2: Additional Investment Required		\$674,459	\$712,548	\$717,045	\$721,561

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Illawarra Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	64%	\$2,561,456	\$2,700,544	\$2,711,886	\$2,723,276
Management, Community Partnerships & Capacity Building	4%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	12%	\$489,271	\$515,838	\$518,005	\$520,181
Total Salaries & Wages	80%	\$3,191,643	\$3,364,949	\$3,379,082	\$3,393,274
Total Program & Operating Expenses	20%	\$783,359	\$822,527	\$822,527	\$822,527
SCENARIO 3: TOTAL SUSTAINABLE COST		\$3,975,002	\$4,187,477	\$4,201,609	\$4,215,802
Less:					
Current Women's Health Program Grant		\$594,000	\$623,700	\$623,700	\$623,700
SCENARIO 3: Additional Investment Required		\$3,381,002	\$3,563,777	\$3,577,909	\$3,592,102

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Illawarra Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	240	240	700
Trauma-Informed Counselling	1250	1250	4000
Emergency Assistance, Integrated Care & Referral	743	743	3000
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	220	220	440
Complementary Therapy - Other	-	-	-
Therapeutic Groups	55	55	560
Health Education, Skills Development & Support Groups	160	166	332
Physical Activity & Wellness Groups	90	90	180
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	675	828	4000
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	225	276	552
Allied Health - Psychology	-	-	1200
Allied Health - Other	-	-	800

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



12. LEICHHARDT WOMEN'S HEALTH CENTRE

NAME Leichhardt Women's Community Health Centre Incorporated

LEICHHARDT WOMEN'S COMMUNITY HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1974, we provide an environment where women, regardless of their financial situation and the complexity of their health issues, are able to access high quality health care.

ABN	54 497 880 851
WEBSITE	https://lwchc.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/fb85cb30-38af-e811-a963-000d3ad24077/documents/
Local Health District	Sydney LHD
Primary LGA(s) Serviced	Inner West LGA
NSW Electorate(s)	Balmain; Newtown; Summer Hill; Strathfield
Federal Electorate	Grayndler
Site(s)	Leichhardt

Local Population & Health Indicators

The Inner West LGA, is culturally diverse with almost 30% of women speaking a language other than English and 6.4% with limited proficiency in spoken English, indicating the need for an interpreter or bi-lingual staff when accessing health services. Although the area overall is relatively socioeconomically affluent, overall demographic data for the area obscures pockets of more significant disadvantage in suburbs including Ashfield and Marrickville. Women on low incomes in this inner city area are also facing greater challenges accessing housing and a range of health services, due to a combination of high cost and high demand.

Responding to Emerging and Unmet Needs

Leichhardt Women's Community Health Centre currently provides health services and support to over 2500 women each year through the Women's Health Program. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Significantly expand counselling capacity, with a focus on meeting demand from women who are experiencing trauma related to domestic and family violence;
- Provide a dedicated emergency assistance and integrated care resource to support women and children with immediate and
 acute issues impacting on their health such as homelessness, domestic and family violence, financial and legal issues, and
 food security. This holistic support to address social determinants of health increases the effectiveness of other mental and
 physical health interventions and improves overall health and wellbeing outcomes for women;
- Provide additional therapeutic, health education and physical activity groups to support women with recovery from domestic and family violence trauma, sexual assault and other mental health issues;
- Expand access to physiotherapy, massage and other complementary therapies for women experiencing injuries, chronic pain related to trauma, other mental health issues and long-term illnesses; and
- Expand clinical consultations through the Well Women's Clinic to provide greater access to women's health GPs and nurses for disadvantaged women, Aboriginal and Torres Strait Islander women, and women with multiple long-term health conditions.



2021 Population – Women	KEY INDICATORS	NSW	Inner West LGA	Sydney LHD
Recent Population Growth Women - 2011 to 2021 13.60% 1.90% 20.50% Projected Population Growth Women - 2021 to 2031 9.70% 10.50% 8.10% Priority Groups SEIFA Index of Relative Socio-Economic Disadvantage 1001 1053 Aboriginal & Torres Strait Islander Women 3.40% 1.20% 29.30% Women who Speak a Language other than English 25.70% 29.30% Women with Limited English Proficiency 5.00% 6.40% Women Earning < \$800 per week 50.00% 37.00% One Parent Families 15.80% 13.60% Health Indicators Women with 3 or more long-term health conditions 3.30% 2.2% Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Assaults 3 year change (2018-21) Aborestic Incidents per 100,000 population (2021) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) 51.80% 41.80% Adults - Min Daily Yegetable Intake (2020) 5.90% 6.70% Adults - Min Daily Yegetable Intake (2020) 5.90% 6.70%	Population & Growth			
Projected Population Growth Women - 2021 to 2031 9.70% 10.50% 8.10% Priority Groups SEIFA Index of Relative Socio-Economic Disadvantage 1001 1053 Aboriginal & Torres Strait Islander Women 3.40% 1.20% 29.30% Women who Speak a Language other than English 25.70% 29.30% Women with Limited English Proficiency 5.00% 6.40% 37.00% One Parent Families 15.80% 13.60	2021 Population – Women	4,087,995	93,648	364,186
Priority Groups SEIFA Index of Relative Socio-Economic Disadvantage 1001 1053 1.20%	Recent Population Growth Women - 2011 to 2021	13.60%	1.90%	20.50%
SEIFA Index of Relative Socio-Economic Disadvantage 1001 1053 1.20%	Projected Population Growth Women - 2021 to 2031	9.70%	10.50%	8.10%
Aboriginal & Torres Strait Islander Women 3.40% 1.20% Women who Speak a Language other than English 25.70% 29.30% Women with Limited English Proficiency 5.00% 6.40% Women Earning < \$800 per week 50.00% 37.00% One Parent Families 15.80% 13.60% Health Indicators Women With 3 or more long-term health conditions 3.30% 2.2% Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Audults - Min Daily Fruit Intake (2020) Adults - Min Daily Yegetable Intake (2020) 5.90% 4.030% 40.90% Adults - Min Daily Yegetable Intake (2020) 5.90%	Priority Groups			
Women who Speak a Language other than English 25.70% 29.30%	SEIFA Index of Relative Socio-Economic Disadvantage	1001	1053	
Women with Limited English Proficiency 5.00% 6.40%	Aboriginal & Torres Strait Islander Women	3.40%	1.20%	
Women Earning <\$800 per week	Women who Speak a Language other than English	25.70%	29.30%	
15.80% 13.60%	Women with Limited English Proficiency	5.00%	6.40%	
Health Indicators Women with 3 or more long-term health conditions 3.30% 2.2% Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults as year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) 51.80% 41.80% Adults - Min Daily Fruit Intake (2020) 5.90% 6.70%	Women Earning <\$800 per week	50.00%	37.00%	
Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Al.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) 5.90% 5.70%	One Parent Families	15.80%	13.60%	
Mental Health 20.20% Women Reporting High or Very High Levels of Psychological Distress (2018-20) 19.40% 20.20% Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) 1607.3 968.30 Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) 109.8 74.6 Domestic and Family Violence & Sexual Assault 109.8 25.7 Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) 35.6 25.7 Domestic Violence Related Assaults reported incidents per 100,000 population (2021) 393.4 223.4 Domestic Violence Related Assaults: 3 year change (2018-21) 3.1% increase stable Sexual Assault reported incidents per 100,000 population (2021) 89.2 63.9 Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity 51.80% 41.80% Females - Overweight or Obese (2021) 51.80% 41.80% Adults - Min Daily Fruit Intake (2020) 5.90% 6.70%	Health Indicators			
Momen Reporting High or Very High Levels of Psychological Distress (2018-20) 19.40% 20.20%	Women with 3 or more long-term health conditions	3.30%	2.2%	
19.40% 20.20%	Mental Health			
rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 5.90%	Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		20.20%
rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) A.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%	Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		968.30
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Autrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 25.7 26.8 26.9 27.7 27.7 27.7 28.8 29.8 20.9 40.90% 40.90% 40.90%	Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		74.6
25.7 25.7	Domestic and Family Violence & Sexual Assault			
reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Autrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 223.4 223.4 3.1% increase stable 43.9 51.80 40.90 40.90%		35.6		25.7
21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) **Nutrition & Physical Activity** Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) **Adults - Min Daily Vegetable Intake (2020) **Time Increase Stable (3.9) **A.8% increase Stable	Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	223.4	
reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) **Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 51.80% 40.30% 63.9 41.80% 41.80% 40.90% 6.70%	Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	stable	
Nutrition & Physical Activity 51.80% 41.80% Females - Overweight or Obese (2021) 51.80% 41.80% Adults - Min Daily Fruit Intake (2020) 40.30% 40.90% Adults - Min Daily Vegetable Intake (2020) 5.90% 6.70%	Sexual Assault reported incidents per 100,000 population (2021)	89.2	63.9	
Females - Overweight or Obese (2021) 51.80% 41.80% Adults - Min Daily Fruit Intake (2020) 40.30% 40.90% Adults - Min Daily Vegetable Intake (2020) 5.90% 6.70%	Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Adults - Min Daily Fruit Intake (2020) 40.30% 40.90% Adults - Min Daily Vegetable Intake (2020) 5.90% 6.70%	Nutrition & Physical Activity			
Adults - Min Daily Vegetable Intake (2020) 5.90% 6.70%	Females - Overweight or Obese (2021)	51.80%		41.80%
	Adults - Min Daily Fruit Intake (2020)	40.30%		40.90%
Adults - Insufficient Physical Activity (2020) 38.30% 26.60%	Adults - Min Daily Vegetable Intake (2020)	5.90%		6.70%
	Adults - Insufficient Physical Activity (2020)	38.30%		26.60%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Leichhardt Women's Community Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	53%	\$620,799	\$654,508	\$657,257	\$660,017
Management, Community Partnerships & Capacity Building	12%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	13%	\$154,748	\$163,151	\$163,836	\$164,525
Total Salaries & Wages	79%	\$916,463	\$966,227	\$970,285	\$974,360
Total Program Costs & Operating Expenses	21%	\$244,747	\$256,984	\$256,984	\$256,984
SCENARIO 1: TOTAL SUSTAINABLE COST		\$1,161,210	\$1,223,211	\$1,227,269	\$1,231,344
Less:					
Current Women's Health Program Grant		\$863,200	\$906,360	\$906,360	\$906,360
SCENARIO 1: Additional Investment Required		\$298,010	\$316,851	\$320,909	\$324,984

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Leichhardt Women's Community Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	53%	\$620,799	\$654,508	\$657,257	\$660,017
Management, Community Partnerships & Capacity Building	12%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	13%	\$154,748	\$163,151	\$163,836	\$164,525
Total Salaries & Wages	79%	\$916,463	\$966,227	\$970,285	\$974,360
Total Program & Operating Expenses	21%	\$244,747	\$256,984	\$256,984	\$256,984
SCENARIO 2: TOTAL SUSTAINABLE COST		\$1,161,210	\$1,223,211	\$1,227,269	\$1,231,344
Less:					
Current Women's Health Program Grant		\$863,200	\$906,360	\$906,360	\$906,360
SCENARIO 2: Additional Investment Required		\$298,010	\$316,851	\$320,909	\$324,984

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Leichhardt Women's Community Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	62%	\$1,257,291	\$1,325,562	\$1,331,129	\$1,336,720
Management, Community Partnerships & Capacity Building	7%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	13%	\$259,758	\$273,863	\$275,013	\$276,169
Total Salaries & Wages	82%	\$1,657,965	\$1,747,992	\$1,755,334	\$1,762,706
Total Program & Operating Expenses	18%	\$362,579	\$380,708	\$380,708	\$380,708
SCENARIO 3: TOTAL SUSTAINABLE COST		\$2,020,544	\$2,128,700	\$2,136,042	\$2,143,414
Less:					
Current Women's Health Program Grant		\$863,200	\$906,360	\$906,360	\$906,360
SCENARIO 3: Additional Investment Required		\$1,157,344	\$1,222,340	\$1,229,682	\$1,237,054

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Leichhardt Women's Community Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	125	125	770
Trauma-Informed Counselling	440	440	1260
Emergency Assistance, Integrated Care & Referral	250	250	650
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	200
Complementary Therapy - Other	800	800	800
Therapeutic Groups	48	48	150
Health Education, Skills Development & Support Groups	144	144	225
Physical Activity & Wellness Groups	96	96	350
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	988	988	1338
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	748	748	1098
Allied Health - Physiotherapy	-	-	200
Allied Health - Other	0	0	0

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



LISMORE WOMEN'S HEALTH CENTRE

NAME Northern Rivers Women and Children's Services Incorporated t/a Lismore Women's Health and Resource Centre

Northern Rivers Women & Children's Services Incorporated T/A LISMORE WOMEN'S HEALTH & RESOURCE CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1986, we are committed to a society in which all relationships are free from abuse, and support women and children to achieve self-determination, empowerment, and freedom of choice.

ABN	58 957 945 074
WEBSITE	https://lismorewomen.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/9a746e09-2caf-e811-a961-000d3ad24182/documents/
Local Health District	Northern NSW LHD
Primary LGA(s) Serviced	Lismore LGA
NSW Electorate	Lismore
Federal Electorate	Page
Site(s)	Lismore

Local Population & Health Indicators

The Lismore LGA is relatively socioeconomically disadvantaged, and has a higher proportion of both one-parent families and women on low incomes than the state average. 4.4% of women have three of more chronic and long-term health conditions. Rates of domestic and family violence in the area are significantly above the NSW average, and have increased by more than 12% in the last 3 years. Reported incidents of sexual assault also remain high and rates are unchanged.

In the Northern NSW LHD, 21.8% of women report high, or very high, rates of psychological distress. This is reflected in rates of mental health related emergency presentations and intentional self-harm hospitalisations of women which are well above the NSW state average.

Recent and ongoing natural disasters in the Lismore area are expected to result in significant decline in key health and socioeconomic indicators in the coming year.

Responding to Emerging and Unmet Needs

Lismore Women's Health and Resource Centre currently provides health services and support to over 2800 women each year through the Women's Health Program. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs. Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Significantly expand counselling capacity to reduce current waitlists of women who are experiencing mental illness, domestic and family violence related trauma and self harm;
- Expand intake, assessment and integrated care capacity to support women and children with immediate and acute issues
 impacting on their health including homelessness, domestic and family violence, financial and legal issues and food security,
 many of which are being exacerbated by ongoing natural disasters. This holistic support to address social determinants of
 health increases the effectiveness of other health interventions and improves overall health and wellbeing outcomes;
- Enhance the current suite of therapeutic and health education group programs with a focus on self-harm prevention and recovery, and supporting the health needs of women with intellectual disability;
- Provide massage therapy to women experiencing chronic pain resulting from trauma, mental health issues and other long-term health conditions; and
- Expand capacity for women's health clinical consultations, specifically targeting women with disabilities. This is an identified gap in servicing in the area and has been requested by the Northern NSW LHD.



KEY INDICATORS	NSW	Lismore LGA	Northern NSW LHD
Population & Growth			
2021 Population – Women	4,087,995	22,573	158,271
Recent Population Growth Women - 2011 to 2021	13.60%	0.00%	7.80%
Projected Population Growth Women - 2021 to 2031	9.70%	(-5.20%)	6.50%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	954	
Aboriginal & Torres Strait Islander Women	3.40%	4.90%	
Women who Speak a Language other than English	25.70%	5.20%	
Women with Limited English Proficiency	5.00%	0.50%	
Women Earning <\$800 per week	50.00%	54.00%	
One Parent Families	15.80%	21.60%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	4.4%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		21.80%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		2,332.00
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		135.5
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		59.2
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	632.1	
Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	12.1% increase	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	167.2	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		51.30%
Adults - Min Daily Fruit Intake (2020)	40.30%		49.70%
Adults - Min Daily Vegetable Intake (2020)	5.90%		12.00%
Adults - Insufficient Physical Activity (2020)	38.30%		31.90%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Lismore Women's Health and Resource Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	61%	\$493,352	\$520,141	\$522,326	\$524,520
Management, Community Partnerships & Capacity Building	13%	\$103,833	\$109,471	\$109,931	\$110,392
Administration & Support	5%	\$40,726	\$42,938	\$43,118	\$43,299
Total Salaries & Wages	79%	\$637,911	\$672,550	\$675,375	\$678,211
Total Program Costs & Operating Expenses	21%	\$170,153	\$178,660	\$178,660	\$178,660
SCENARIO 1: TOTAL SUSTAINABLE COST		\$808,064	\$851,210	\$854,035	\$856,871
Less:					
Current Women's Health Program Grant		\$382,635	\$401,767	\$401,767	\$401,767
SCENARIO 1: Additional Investment Required		\$425,429	\$449,443	\$452,268	\$455,105

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Lismore Women's Health and Resource Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	61%	\$501,564	\$528,798	\$531,019	\$533,250
Management, Community Partnerships & Capacity Building	13%	\$103,833	\$109,471	\$109,931	\$110,392
Administration & Support	5%	\$40,726	\$42,938	\$43,118	\$43,299
Total Salaries & Wages	79%	\$646,123	\$681,207	\$684,068	\$686,941
Total Program & Operating Expenses	21%	\$173,938	\$182,635	\$182,635	\$182,635
SCENARIO 2: TOTAL SUSTAINABLE COST		\$820,061	\$863,842	\$866,703	\$869,576
Less:					
Current Women's Health Program Grant		\$382,635	\$401,767	\$401,767	\$401,767
SCENARIO 2: Additional Investment Required		\$437,426	\$462,075	\$464,937	\$467,810

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Lismore Women's Health and Resource Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	63%	\$656,828	\$692,494	\$695,403	\$698,323
Management, Community Partnerships & Capacity Building	10%	\$103,833	\$109,471	\$109,931	\$110,392
Administration & Support	6%	\$59,051	\$62,258	\$62,519	\$62,782
Total Salaries & Wages	79%	\$819,712	\$864,223	\$867,852	\$871,497
Total Program & Operating Expenses	21%	\$216,723	\$227,559	\$227,559	\$227,559
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,036,435	\$1,091,781	\$1,095,411	\$1,099,056
Less:					
Current Women's Health Program Grant		\$382,635	\$401,767	\$401,767	\$401,767
SCENARIO 3: Additional Investment Required		\$653,800	\$690,015	\$693,644	\$697,289

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Lismore Women's Health and Resource Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	1404	1404	1700
Trauma-Informed Counselling	450	450	700
Emergency Assistance, Integrated Care & Referral	-	-	150
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	200
Complementary Therapy - Other	-	-	-
Therapeutic Groups	88	88	100
Health Education, Skills Development & Support Groups	80	80	80
Physical Activity & Wellness Groups	80	80	100
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	500
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	134	250	250
Allied Health - Psychology	-	-	45
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



14. LIVERPOOL WOMEN'S HEALTH CENTRE

NAME Liverpool Women's Health Centre Incoporated

LIVERPOOL WOMEN'S HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1975, we support women to make informed decisions about their health and lives.

ABN	82 537 715 518
WEBSITE	https://liverpoolwomenshealth.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/a5af4632-38af-e811-a963-000d3ad244fd/documents/
Local Health District	South Western Sydney LHD
Primary LGA(s) Serviced	Liverpool LGA
NSW Electorate(s)	Liverpool; Holsworthy
Federal Electorate	Fowler
Site(s)	Liverpool

Local Population & Health Indicators

Liverpool LGA has experienced almost 25% population growth over the last 10 years and growth is projected to continue over the coming decade. The LGA is relatively socioeconomically disadvantaged, and also culturally diverse. Over 50% of women in the area speak a language other than English, and 10.6% of women have limited proficiency in spoken English, indicating the need for an interpreter or bi-lingual worker when attending health care services.

Reported rates of domestic and family violence in the area are above the NSW state average and have increased by 6.2% over the last three years. This is particularly concerning given that evidence indicates significant under-reporting of domestic and family violence in culturally diverse communities. In the South Western Sydney LHD, 20.5% of women report high, or very high, levels of psychological distress. In addition, more than 57% of women are overweight or obese, and adults in the LHD have poorer levels of nutrition and physical activity compared with the rest of NSW.

Responding to Emerging and Unmet Needs

Liverpool Women's Health Centre currently provides health services and support to almost 3000 women each year through the Women's Health Program. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Significantly expand counselling capacity to address the extensive waitlists of women who are experiencing mental illness, domestic and family violence related trauma;
- Expand assessment and integrated care capacity to support women and children with immediate and acute issues impacting
 on their health including homelessness, domestic and family violence, financial and legal issues, and food security. Integrated
 care and support to address the social determinants of health increases the effectiveness of other health interventions to
 improve overall outcomes for women and is in high demand with the Centre receiving hundreds of referrals each year;
- Enhance the current suite of therapeutic, health education and physical activity group programs, with a focus on domestic and family violence trauma recovery, mental health, nutrition and maintaining overall physical health and wellbeing;
- Provide additional massage and complementary therapies to women experiencing chronic pain resulting from trauma, mental illness and other long-term health issues; and
- Expand capacity in the Well Women's Clinic with a Practice Nurse to provide additional cervical screening and breast screening, as well as more complex women's health consultations with female GPs.



KEY INDICATORS	NSW	Liverpool LGA	South Western Sydney LHD
Population & Growth			
2021 Population – Women	4,087,995	117,283	551,905
Recent Population Growth Women - 2011 to 2021	13.60%	24.60%	19.60%
Projected Population Growth Women - 2021 to 2031	9.70%	14.90%	14.00%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	952	
Aboriginal & Torres Strait Islander Women	3.40%	1.50%	
Women who Speak a Language other than English	25.70%	52.80%	
Women with Limited English Proficiency	5.00%	10.60%	
Women Earning <\$800 per week	50.00%	50.00%	
One Parent Families	15.80%	18.60%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	2.4%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		20.50%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,279.10
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		74.7
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		28.6
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	474.7	
Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	6.2% increase	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	68.7	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		57.30%
Adults - Min Daily Fruit Intake (2020)	40.30%		37.70%
Adults - Min Daily Vegetable Intake (2020)	5.90%		2.20%
Adults - Insufficient Physical Activity (2020)	38.30%		47.50%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Liverpool Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	55%	\$790,730	\$833,666	\$837,168	\$840,684
Management, Community Partnerships & Capacity Building	9%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	14%	\$201,582	\$212,528	\$213,421	\$214,317
Total Salaries & Wages	78%	\$1,122,103	\$1,183,033	\$1,188,002	\$1,192,992
Total Program Costs & Operating Expenses	22%	\$314,376	\$330,095	\$330,095	\$330,095
SCENARIO 1: TOTAL SUSTAINABLE COST		\$1,436,479	\$1,513,128	\$1,518,097	\$1,523,087
Less:					
Current Women's Health Program Grant		\$881,902	\$925,997	\$925,997	\$925,997
SCENARIO 1: Additional Investment Required		\$554,577	\$587,131	\$592,100	\$597,089

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Liverpool Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	57%	\$851,599	\$897,841	\$901,611	\$905,398
Management, Community Partnerships & Capacity Building	9%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	13%	\$201,582	\$212,528	\$213,421	\$214,317
Total Salaries & Wages	79%	\$1,182,972	\$1,247,207	\$1,252,446	\$1,257,706
Total Program & Operating Expenses	21%	\$319,311	\$335,276	\$335,276	\$335,276
SCENARIO 2: TOTAL SUSTAINABLE COST		\$1,502,283	\$1,582,484	\$1,587,722	\$1,592,982
Less:					
Current Women's Health Program Grant		\$881,902	\$925,997	\$925,997	\$925,997
SCENARIO 2: Additional Investment Required		\$620,381	\$656,487	\$661,725	\$666,985

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Liverpool Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	61%	\$1,240,027	\$1,307,360	\$1,312,851	\$1,318,365
Management, Community Partnerships & Capacity Building	6%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	11%	\$221,946	\$233,997	\$234,980	\$235,967
Total Salaries & Wages	79%	\$1,591,763	\$1,678,196	\$1,685,245	\$1,692,323
Total Program & Operating Expenses	21%	\$435,832	\$457,624	\$457,624	\$457,624
SCENARIO 3: TOTAL SUSTAINABLE COST		\$2,027,596	\$2,135,820	\$2,142,869	\$2,149,947
Less:					
Current Women's Health Program Grant		\$881,902	\$925,997	\$925,997	\$925,997
SCENARIO 3: Additional Investment Required		\$1,145,694	\$1,209,823	\$1,216,872	\$1,223,950

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Liverpool Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	200	200	650
Trauma-Informed Counselling	750	760	1300
Emergency Assistance, Integrated Care & Referral	560	700	900
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	140	140	300
Complementary Therapy - Other	560	560	1000
Therapeutic Groups	150	200	264
Health Education, Skills Development & Support Groups	500	560	624
Physical Activity & Wellness Groups	160	186	250
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	1460	1100	2400
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	340	453	750
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



15. PENRITH WOMEN'S HEALTH CENTRE

NAME Penrith Women's Health Centre Incorporated

PENRITH WOMEN'S HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1987, we ensure accessibility to health services, without financial and cultural barriers, for women in the Penrith region.

ABN	63 052 883 771
WEBSITE	https://www.pwhc.org.au/
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/bdaa2671-39af-e811-a95e-000d3ad24c60/documents/
Local Health District	Nepean Blue Mountains LHD
Primary LGA(s) Serviced	Penrith LGA
NSW Electorate(s)	Penrith; Londonderry; Badgerys Creek; Mount Druitt
Federal Electorate	Lindsay
Site(s)	Penrith

Local Population & Health Indicators

Penrith LGA has grown rapidly over the last 10 years, with a population increase of 18.7%. The LGA is increasingly socioeconomically diverse, with growing areas of affluence. However overall demographic data obscures entrenched and intergenerational socioeconomic disadvantage in many eastern suburbs including St Marys, Werrington, Oxley Park, Colyton and Kingswood.

Reported rates of domestic and family violence remain well above the NSW state average, despite a 20% decrease over the last 3 years. These rates are reflected in relatively high rates of domestic and family violence related hospitalisations of women in the area. Incidents of sexual assault in Penrith also remain high and unchanged.

In the Nepean Blue Mountains LHD, 20.8% of women experience high, or very high, levels of psychological distress and almost two-thirds of women are overweight or obese.

Responding to Emerging and Unmet Needs

Penrith Women's Health Centre currently provides health services and support to over 2300 women each year through the Women's Health Program. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Significantly expand counselling capacity to address the extensive waitlists of women who are experiencing mental illness, domestic and family violence related trauma;
- Expand assessment and integrated care capacity to support women and children with immediate and acute issues impacting
 on their health including homelessness, domestic and family violence, financial and legal issues, and food security. Integrated
 care and support to address the social determinants of health is in high demand and this holistic support increases the
 effectiveness of other health interventions and improves overall outcomes for women;
- Provide additional massage and complementary therapies to women experiencing chronic pain resulting from trauma, mental illness and other long-term health issues; and
- · Expand capacity for the Well Women's Clinic to provide women's health consultations with female GPs.



KEY INDICATORS	NSW	Penrith LGA	Nepean Blue Mountains LHD
Population & Growth			
2021 Population – Women	4,087,995	110,085	200,533
Recent Population Growth Women - 2011 to 2021	13.60%	18.70%	10.40%
Projected Population Growth Women - 2021 to 2031	9.70%	8.90%	6.50%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	999	
Aboriginal & Torres Strait Islander Women	3.40%	3.90%	
Women who Speak a Language other than English	25.70%	17.40%	
Women with Limited English Proficiency	5.00%	2.20%	
Women Earning <\$800 per week	50.00%	47.00%	
One Parent Families	15.80%	19.50%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	3.4%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		20.80%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,379.30
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		99.4
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		41.2
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	511.8	
Domestic Violence Related Assaults: 3 year change (2018-21)	3.1% increase	20% decrease	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	101.3	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		64.00%
Adults - Min Daily Fruit Intake (2020)	40.30%		37.90%
Adults - Min Daily Vegetable Intake (2020)	5.90%		6.30%
Adults - Insufficient Physical Activity (2020)	38.30%		39.50%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Penrith Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	48%	\$436,605	\$460,313	\$462,246	\$464,187
Management, Community Partnerships & Capacity Building	15%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	13%	\$113,859	\$120,042	\$120,546	\$121,052
Total Salaries & Wages	76%	\$691,380	\$728,922	\$731,984	\$735,058
Total Program Costs & Operating Expenses	24%	\$219,339	\$230,306	\$230,306	\$230,306
SCENARIO 1: TOTAL SUSTAINABLE COST		\$910,719	\$959,228	\$962,289	\$965,364
Less:					
Current Women's Health Program Grant		\$607,306	\$637,671	\$637,671	\$637,671
SCENARIO 1: Additional Investment Required		\$303,413	\$321,556	\$324,618	\$327,692

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Penrith Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	48%	\$436,605	\$460,313	\$462,246	\$464,187
Management, Community Partnerships & Capacity Building	15%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	13%	\$113,859	\$120,042	\$120,546	\$121,052
Total Salaries & Wages	76%	\$691,380	\$728,922	\$731,984	\$735,058
Total Program & Operating Expenses	24%	\$219,339	\$230,306	\$230,306	\$230,306
SCENARIO 2: TOTAL SUSTAINABLE COST		\$910,719	\$959,228	\$962,289	\$965,364
Less:					
Current Women's Health Program Grant		\$607,306	\$637,671	\$637,671	\$637,671
SCENARIO 2: Additional Investment Required		\$303,413	\$321,556	\$324,618	\$327,692

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Penrith Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	53%	\$795,869	\$839,084	\$842,608	\$846,147
Management, Community Partnerships & Capacity Building	9%	\$140,916	\$148,568	\$149,192	\$149,818
Administration & Support	15%	\$231,187	\$243,740	\$244,764	\$245,792
Total Salaries & Wages	78%	\$1,167,971	\$1,231,392	\$1,236,564	\$1,241,757
Total Program & Operating Expenses	22%	\$324,595	\$340,824	\$340,824	\$340,824
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,492,566	\$1,572,216	\$1,577,388	\$1,582,582
Less:					
Current Women's Health Program Grant		\$607,306	\$637,671	\$637,671	\$637,671
SCENARIO 3: Additional Investment Required		\$885,260	\$934,545	\$939,717	\$944,910

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Penrith Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	-	-	-
Trauma-Informed Counselling	1450	1450	2900
Emergency Assistance, Integrated Care & Referral	-	-	750
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	460	460	950
Complementary Therapy - Other	-	-	-
Therapeutic Groups	32	32	32
Health Education, Skills Development & Support Groups	200	200	200
Physical Activity & Wellness Groups	120	120	120
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	1380	1380	2760
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	-
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



16. SHOALHAVEN WOMEN'S HEALTH CENTRE

NAME Shoalhaven Women's Health Centre

SHOALHAVEN WOMEN'S HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1983, we empower women to take control of their health and wellbeing through the provision of accessible, multidisciplinary integrated health services within a safe, caring, supportive environment.

ABN	71 272 156 547
WEBSITE	https://shoalhavenwomenshealthcentre.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/44baccfd-38af-e811-a960-000d3ad24282/documents/
Local Health District	Illawarra Shoalhaven LHD
Primary LGA(s) Serviced	Shoalhaven LGA
NSW Electorate(s)	Kiama; South Coast
Federal Electorate	Gilmore
Site(s)	Nowra

Local Population & Health Indicators

The Shoalhaven LGA makes up one-quarter of the population of the Illawarra Shoalhaven LHD, but covers a large geographic area from Berry and Nowra in the north, to Ulladulla, Mollymook and other south coast townships. The LGA has experienced consistent growth over the past 10 years and is projected to grow by another 16.8% over the next decade. Shoalhaven LGA is relatively socioeconomically disadvantaged, with areas of more acute disadvantage in Bomaderry, Nowra, Ulladulla and Sanctuary Point. Overall, 58% of women in the LGA are on low incomes and almost 6% have chronic and long-term health conditions; 1.8 times the NSW state average. Reported rates of domestic and family violence and sexual assault are above the state average across the Shoalhaven LGA, and rates are significantly higher in Nowra. Across the Illawarra Shoalhaven LHD, rates of women presenting to emergency for mental health related conditions exceeds the state average. More than 61% of women in the area are overweight or obese and adults have poorer levels of nutrition compared with the rest of NSW.

Responding to Emerging and Unmet Needs

Shoalhaven Women's Health Centre currently provides health services and support to over 2300 women each year through the Women's Health Program. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs. Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Significantly expand counselling capacity to address the extensive waitlists of women who are experiencing mental illness, and trauma related to domestic and family violence and sexual assault;
- Expand assessment, integrated care and financial counselling capacity to support women and children with immediate and
 acute needs impacting on their health including homelessness, domestic and family violence, financial and legal issues, and
 food security. Integrated care and other support to address the social determinants of health is in high demand and holistic
 support increases the effectiveness of other health interventions and improves overall outcomes for women;
- Provide additional massage and complementary therapies to women experiencing chronic pain resulting from trauma, mental illness and other long-term health issues. The Centre currently has a 6 week wait for appointments;
- Enhance the current suite of therapeutic, health education and physical activity group programs, with a focus on domestic and family violence trauma recovery, mental health, nutrition and maintaining overall physical health and wellbeing;
- Expand nursing capacity in the Well Women's Clinic to provide reproductive health consultations. The Centre receives daily referrals for these services, but is currently only able to provide one clinic per fortnight.

Shoalhaven Women's Health Centre would also seek to establish a new site in Ulladulla, with outreach services to Sanctuary Point. The additional site is much needed in this large, regional area with limited transport options. The service in Ulladulla would provide women in the southern area of the Shoalhaven with equitable access to the suite of counselling, therapeutic and clinical services available to disadvantaged women in Nowra.



KEY INDICATORS	NSW	Shoalhaven LGA	Illawarra Shoalhaven LHD
Population & Growth			
2021 Population – Women	4,087,995	54,813	217,075
Recent Population Growth Women - 2011 to 2021	13.60%	12.80%	11.70%
Projected Population Growth Women - 2021 to 2031	9.70%	16.80%	14.20%
Priority Groups			
SEIFA Index of Relative Socio-Economic Disadvantage	1001	964	
Aboriginal & Torres Strait Islander Women	3.40%	5.40%	
Women who Speak a Language other than English	25.70%	4.50%	
Women with Limited English Proficiency	5.00%	0.50%	
Women Earning <\$800 per week	50.00%	58.00%	
One Parent Families	15.80%	16.20%	
Health Indicators			
Women with 3 or more long-term health conditions	3.30%	5.9%	
Mental Health			
Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		14.50%
Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,762.30
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		108.2
Domestic and Family Violence & Sexual Assault			
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		23.4
Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	417	
Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	stable	
Sexual Assault reported incidents per 100,000 population (2021)	89.2	137.1	
Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Nutrition & Physical Activity			
Females - Overweight or Obese (2021)	51.80%		61.50%
Adults - Min Daily Fruit Intake (2020)	40.30%		37.90%
Adults - Min Daily Vegetable Intake (2020)	5.90%		3.50%
Adults - Insufficient Physical Activity (2020)	38.30%		38.20%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Shoalhaven Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	47%	\$281,895	\$297,202	\$298,451	\$299,704
Management, Community Partnerships & Capacity Building	22%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	7%	\$40,726	\$42,938	\$43,118	\$43,299
Total Salaries & Wages	76%	\$452,413	\$476,979	\$478,982	\$480,994
Total Program Costs & Operating Expenses	24%	\$143,002	\$150,152	\$150,152	\$150,152
SCENARIO 1: TOTAL SUSTAINABLE COST		\$595,414	\$627,130	\$629,134	\$631,145
Less:					
Current Women's Health Program Grant		\$323,700	\$339,885	\$339,885	\$339,885
SCENARIO 1: Additional Investment Required		\$271,714	\$287,245	\$289,249	\$291,260

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Shoalhaven Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	48%	\$295,322	\$311,358	\$312,666	\$313,979
Management, Community Partnerships & Capacity Building	21%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	7%	\$40,726	\$42,938	\$43,118	\$43,299
Total Salaries & Wages	76%	\$465,840	\$491,135	\$493,197	\$495,269
Total Program & Operating Expenses	24%	\$145,088	\$152,342	\$152,342	\$152,342
SCENARIO 2: TOTAL SUSTAINABLE COST		\$610,928	\$643,477	\$645,540	\$647,611
Less:					
Current Women's Health Program Grant		\$323,700	\$339,885	\$339,885	\$339,885
SCENARIO 2: Additional Investment Required		\$287,228	\$303,592	\$305,655	\$307,726

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Shoalhaven Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	65%	\$898,369	\$947,151	\$951,129	\$955,123
Management, Community Partnerships & Capacity Building	9%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	3%	\$40,726	\$42,938	\$43,118	\$43,299
Total Salaries & Wages	77%	\$1,068,886	\$1,126,927	\$1,131,660	\$1,136,413
Total Program & Operating Expenses	23%	\$312,344	\$327,962	\$327,962	\$327,962
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,381,231	\$1,454,889	\$1,459,622	\$1,464,375
Less:					
Current Women's Health Program Grant		\$323,700	\$339,885	\$339,885	\$339,885
SCENARIO 3: Additional Investment Required		\$1,057,531	\$1,115,004	\$1,119,737	\$1,124,490

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Shoalhaven Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	25	25	50
Trauma-Informed Counselling	552	644	2700
Emergency Assistance, Integrated Care & Referral	180	180	320
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	420	420	600
Complementary Therapy - Other	208	208	408
Therapeutic Groups	20	20	60
Health Education, Skills Development & Support Groups	40	43	43
Physical Activity & Wellness Groups	-	-	-
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	800
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	-
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



17. SYDNEY WOMEN'S COUNSELLING CENTRE

NAME Southern Sydney Women's Therapy Centre Inc t/a Sydney Women's Counselling Centre

Southern Sydney Women's Therapy Centre Inc t/a SYDNEY WOMEN'S COUNSELLING CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1994, we provide specialist counselling to women who are marginalised and socioeconomically disadvantaged; to support the psychological and emotional well-being of women, while recognising the social, environmental, economic, physical and cultural factors which affect women's health.

ABN	37 259 809 883
WEBSITE	https://womenscounselling.com.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/751eb092-39af-e811-a963-000d3ad24077/documents/
Local Health District	Sydney LHD
Primary LGA(s) Serviced	Provides services to women across Greater Sydney
NSW Electorate	Multiple – Greater Sydney
Federal Electorate	Multiple – Greater Sydney
Site(s)	Campsie

Responding to Emerging and Unmet Needs

Sydney Women's Counselling Centre provides specialist, trauma-informed counselling and support services to approximately 400 women each year through the Women's Health Program.

The Centre services multiple Local Government Areas and Local Health Districts, accepting referrals of socioeconomically disadvantaged women across Greater Sydney. Clients typically present with a range of complex co-occurring issues relating to trauma from domestic and family violence and sexual assault, mental health and PTSD. The Centre provides a mix of brief, medium and long-term interventions, alongside integrated care and holistic support to address the social determinants of health, at no cost to clients.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and, Scenario 2 reflecting the level of services and activities currently being delivered to meet community needs.

Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to significantly expand both its counselling and integrated care services in response to the rapidly growing demand across Greater Sydney, and address the needs of the more than 250 women who are currently turned away each year.



Proposed Investment in the Women's Health Program

Scenario 1 - Sydney Women's Counselling Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	46%	\$392,000	\$413,285	\$415,021	\$416,764
Management, Community Partnerships & Capacity Building	15%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	18%	\$152,713	\$161,005	\$161,682	\$162,361
Total Salaries & Wages	79%	\$674,504	\$711,129	\$714,116	\$717,115
Total Program Costs & Operating Expenses	21%	\$177,190	\$186,049	\$186,049	\$186,049
SCENARIO 1: TOTAL SUSTAINABLE COST		\$851,694	\$897,179	\$900,165	\$903,165
Less:					
Current Women's Health Program Grant		\$408,282	\$428,696	\$428,696	\$428,696
SCENARIO 1: Additional Investment Required		\$443,412	\$468,483	\$471,469	\$474,469

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Sydney Women's Counselling Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	49%	\$442,914	\$466,964	\$468,925	\$470,895
Management, Community Partnerships & Capacity Building	14%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	17%	\$152,713	\$161,005	\$161,682	\$162,361
Total Salaries & Wages	80%	\$725,418	\$764,808	\$768,020	\$771,246
Total Program & Operating Expenses	20%	\$185,551	\$194,829	\$194,829	\$194,829
SCENARIO 2: TOTAL SUSTAINABLE COST		\$910,969	\$959,637	\$962,849	\$966,074
Less:					
Current Women's Health Program Grant		\$408,282	\$428,696	\$428,696	\$428,696
SCENARIO 2: Additional Investment Required		\$502,687	\$530,940	\$534,153	\$537,378

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Sydney Women's Counselling Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	59%	\$970,282	\$1,022,968	\$1,027,265	\$1,031,579
Management, Community Partnerships & Capacity Building	8%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	16%	\$254,529	\$268,350	\$269,477	\$270,609
Total Salaries & Wages	83%	\$1,354,602	\$1,428,156	\$1,434,155	\$1,440,178
Total Program & Operating Expenses	17%	\$284,820	\$299,060	\$299,060	\$299,060
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,639,421	\$1,727,217	\$1,733,215	\$1,739,239
Less:					
Current Women's Health Program Grant		\$408,282	\$428,696	\$428,696	\$428,696
SCENARIO 3: Additional Investment Required		\$1,231,139	\$1,298,521	\$1,304,519	\$1,310,543

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Sydney Women's Counselling Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	70	97	180
Trauma-Informed Counselling	1602	1728	2400
Emergency Assistance, Integrated Care & Referral	300	466	2050
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	-
Complementary Therapy - Other	-	-	-
Therapeutic Groups	-	-	-
Health Education, Skills Development & Support Groups	-	-	-
Physical Activity & Wellness Groups	-	-	-
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	-
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	-
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



18. W.I.L.M.A WOMEN'S HEALTH CENTRE

NAME WILMA Women's Health Centre

WILMA WOMEN'S HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1987, we provide women-centred health and wellbeing services that are empowering and evidence based, in a safe, supportive and holistic environment.

ABN	19 686 976 344
WEBSITE	https://www.wilma.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/325361d6-39af-e811-a963-000d3ad244fd/documents/
Local Health District	South Western Sydney LHD
Primary LGA(s) Serviced	Campbelltown LGA
NSW Electorate	Campbelltown; Leppington; Macquarie Fields; Camden
Federal Electorate	Macarthur
Site(s)	Campbelltown

Local Population & Health Indicators

Campbelltown LGA has experienced almost 18% population growth over the last 10 years and growth is projected to continue over the coming decade. The LGA as a whole is relatively socioeconomically disadvantaged, and incorporates many low income areas with entrenched, intergenerational disadvantage. Over 20% of all families in the LGA are one-parent families.

Reported rates of domestic and family violence in the area are above the NSW state average and have increased by 4.1% over the last three years. Rates of sexual assault also remain high and unchanged.

In the South Western Sydney LHD, 20.5% of women report high, or very high, levels of psychological distress. In addition, more than 57% of women are overweight or obese, and adults in the LHD have poorer levels of nutrition and physical activity compared with the rest of NSW.

Responding to Emerging and Unmet Needs

WILMA Women's Health Centre currently provides health services and support to over 2000 women each year through the Women's Health Program.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Significantly expand counselling capacity to address the extensive waitlists of women who are experiencing mental illness, and trauma related to domestic and family violence and sexual assault. The Centre currently has an average of 90 women per quarter on a waitlist for counselling services;
- Enhance the current suite of therapeutic group programs, with a focus on domestic and family violence trauma recovery and mental health; and
- Provide a Women's Health Nurse two days per week to conduct women's health consultations and reproductive screening.



2021 Population – Women	KEY INDICATORS	NSW	Campbelltown LGA	South Western Sydney LHD
Recent Population Growth Women - 2011 to 2021 13.60% 17.50% 19.60% Projected Population Growth Women - 2021 to 2031 9.70% 11.90% 14.00% Priority Groups SEIFA Index of Relative Socio-Economic Disadvantage Aboriginal & Torres Strait Islander Women 3.40% 4.00% Women who Speak a Language other than English 25.70% 30.70% Women with Limited English Proficiency 5.00% 4.30% Women Earning <\$800 per week 50.00% 51.00% One Parent Families 15.80% 20.30% Health Indicators Women with 3 or more long-term health conditions 3.30% 3.9% Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults: 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Aliminerease stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Vegetable Intake (2020) 5.90% 11.00% 11.00% 10.1	Population & Growth			
Projected Population Growth Women - 2021 to 2031 9.70% 11.90% 14.00% Priority Groups SEIFA Index of Relative Socio-Economic Disadvantage 1001 950 Aboriginal & Torres Strait Islander Women 3.40% 4.00% Women who Speak a Language other than English 25.70% 30.70% Women with Limited English Proficiency 5.00% 4.30% Women Earning <\$800 per week 50.00% 51.00% One Parent Families 15.80% 20.30% Health Indicators Women Women Learth Families 15.80% 20.30% Health Indicators Women Parent Families 15.80% 20.30% Health Realth Company of Program Health conditions 3.30% 3.9% Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) **Remales - Overweight or Obese (2021) **Adults - Min Daily Violentalis Intake (2020) **Adults - Min Daily Vegetable Intake (2020) **Sexual And Provided Intake (2020) **Adults - Min Daily Vegetable Intake (2020) **Table Torres Strait Islander Advantage (2018-20) **Domestic Violence Related Accidentity Females rate Per 100,000 population (2021) **Sexual Assault: 3 year change (2018-21) **Abults - Min Daily Vegetable Intake (2020) **Adults - Min Daily Vegetable Intake (2020) **Adults - Min Daily Vegetable Intake (2020) **Table Torres Strait Islander Activity **Table Torres Strait	2021 Population – Women	4,087,995	89,874	551,905
Priority Groups SEIFA Index of Relative Socio-Economic Disadvantage 1001 950	Recent Population Growth Women - 2011 to 2021	13.60%	17.50%	19.60%
SEIFA Index of Relative Socio-Economic Disadvantage 1001 950	Projected Population Growth Women - 2021 to 2031	9.70%	11.90%	14.00%
Aboriginal & Torres Strait Islander Women 3.40% 4.00% Women who Speak a Language other than English 25.70% 30.70% Women with Limited English Proficiency 5.00% 4.30% Women Earning <\$800 per week 50.00% 51.00% One Parent Families 15.80% 20.30% Health Indicators Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Multition & Physical Activity Females - Overweight or Obese (2021) 51.80% Adults - Min Daily Vegetable Intake (2020) 5.90% 4.030% 2.20%	Priority Groups			
Women who Speak a Language other than English 25.70% 30.70% Women with Limited English Proficiency 5.00% 4.30% Women Earning <\$800 per week	SEIFA Index of Relative Socio-Economic Disadvantage	1001	950	
Women with Limited English Proficiency 5.00% 4.30% Women Earning <\$800 per week	Aboriginal & Torres Strait Islander Women	3.40%	4.00%	
Women Earning <\$800 per week	Women who Speak a Language other than English	25.70%	30.70%	
15.80% 20.30% 20.50% 2	Women with Limited English Proficiency	5.00%	4.30%	
Health Indicators Women with 3 or more long-term health conditions 3.30% 3.9% Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults as year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) A.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 3.9% 20.50% 20.50% 20.50% 20.50% 20.50%	Women Earning <\$800 per week	50.00%	51.00%	
Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) A.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%	One Parent Families	15.80%	20.30%	
Mental Health Women Reporting High or Very High Levels of Psychological Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018- 21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018- 21) Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) 5.90% 20.50%	Health Indicators			
Momen Reporting High or Very High Levels of Psychological Distress (2018-20) 19.40% 20.50%	Women with 3 or more long-term health conditions	3.30%	3.9%	
Distress (2018-20) Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Al.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%	Mental Health			
Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20) Interpresonal Violence & Sexual Assault Interpresonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%	Women Reporting High or Very High Levels of Psychological Distress (2018-20)	19.40%		20.50%
rate per 100,000 population (2019-20) Domestic and Family Violence & Sexual Assault Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) A.8% increase stable Nutrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90%	Mental Health Related Emergency Presentations Females rate per 100,000 population (2020-21)	1607.3		1,279.10
Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Autrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 28.6 28.6 28.6 28.6 28.6 4.1% increase 4.1% increase 51.80% 57.30% 57.30% 57.30% 40.30% 57.30%	Intentional Self Harm Hospitalisations Females rate per 100,000 population (2019-20)	109.8		74.7
rate per 100,000 population (2019-20) Domestic Violence Related Assaults reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Autrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 5.90% 28.6 4.1% increase 4.1% increase 54.10 57.30% 57.30% 57.30%	Domestic and Family Violence & Sexual Assault			
reported incidents per 100,000 population (2021) Domestic Violence Related Assaults: 3 year change (2018-21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) Sexual Assault: 3 year change (2018-21) Autrition & Physical Activity Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) 51.80% 541.1 4.1% increase 4.1% increase 541.1 4.1% increase 541.1 4.1% increase	Interpersonal Violence Related Hospitalisations of Females rate per 100,000 population (2019-20)	35.6		28.6
21) Sexual Assault reported incidents per 100,000 population (2021) Sexual Assault: 3 year change (2018-21) **Nutrition & Physical Activity** Females - Overweight or Obese (2021) Adults - Min Daily Fruit Intake (2020) Adults - Min Daily Vegetable Intake (2020) **A.1% Increase** 4.1% Increase 57.30% 57.30% 57.30% 57.30% 57.30% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Domestic Violence Related Assaults reported incidents per 100,000 population (2021)	393.4	541.1	
reported incidents per 100,000 population (2021) 89.2 93.6 Sexual Assault: 3 year change (2018-21) 4.8% increase stable Nutrition & Physical Activity 51.80% 57.30% Females - Overweight or Obese (2021) 51.80% 37.70% Adults - Min Daily Fruit Intake (2020) 40.30% 37.70% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Domestic Violence Related Assaults: 3 year change (2018- 21)	3.1% increase	4.1% increase	
Nutrition & Physical Activity 51.80% 57.30% Females - Overweight or Obese (2021) 51.80% 37.70% Adults - Min Daily Fruit Intake (2020) 40.30% 37.70% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Sexual Assault reported incidents per 100,000 population (2021)	89.2	93.6	
Females - Overweight or Obese (2021) 51.80% 57.30% Adults - Min Daily Fruit Intake (2020) 40.30% 37.70% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Sexual Assault: 3 year change (2018-21)	4.8% increase	stable	
Adults - Min Daily Fruit Intake (2020) 40.30% 37.70% Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Nutrition & Physical Activity			
Adults - Min Daily Vegetable Intake (2020) 5.90% 2.20%	Females - Overweight or Obese (2021)	51.80%		57.30%
	Adults - Min Daily Fruit Intake (2020)	40.30%		37.70%
Adults - Insufficient Physical Activity (2020) 38.30% 47.50%	Adults - Min Daily Vegetable Intake (2020)	5.90%		2.20%
	Adults - Insufficient Physical Activity (2020)	38.30%		47.50%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - WILMA Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	52%	\$418,787	\$441,527	\$443,381	\$445,243
Management, Community Partnerships & Capacity Building	16%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	11%	\$86,538	\$91,237	\$91,620	\$92,005
Total Salaries & Wages	78%	\$635,116	\$669,602	\$672,415	\$675,239
Total Program Costs & Operating Expenses	22%	\$177,619	\$186,500	\$186,500	\$186,500
SCENARIO 1: TOTAL SUSTAINABLE COST		\$812,735	\$856,103	\$858,915	\$861,739
Less:					
Current Women's Health Program Grant		\$618,800	\$649,740	\$649,740	\$649,740
SCENARIO 1: Additional Investment Required		\$193,935	\$206,363	\$209,175	\$211,999

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - WILMA Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	53%	\$443,166	\$467,230	\$469,193	\$471,163
Management, Community Partnerships & Capacity Building	15%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	10%	\$86,538	\$91,237	\$91,620	\$92,005
Total Salaries & Wages	78%	\$659,495	\$695,306	\$698,226	\$701,159
Total Program & Operating Expenses	22%	\$181,623	\$190,704	\$190,704	\$190,704
SCENARIO 2: TOTAL SUSTAINABLE COST		\$841,118	\$886,010	\$888,930	\$891,863
Less:					
Current Women's Health Program Grant		\$618,800	\$649,740	\$649,740	\$649,740
SCENARIO 2: Additional Investment Required		\$222,318	\$236,270	\$239,190	\$242,123

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - WILMA Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	58%	\$616,835	\$650,329	\$653,061	\$655,804
Management, Community Partnerships & Capacity Building	12%	\$129,791	\$136,839	\$137,413	\$137,990
Administration & Support	8%	\$86,538	\$91,237	\$91,620	\$92,005
Total Salaries & Wages	79%	\$833,164	\$878,405	\$882,094	\$885,799
Total Program & Operating Expenses	21%	\$221,929	\$233,025	\$233,025	\$233,025
SCENARIO 3: TOTAL SUSTAINABLE COST		\$1,055,093	\$1,111,430	\$1,115,120	\$1,118,824
Less:					
Current Women's Health Program Grant		\$618,800	\$649,740	\$649,740	\$649,740
SCENARIO 3: Additional Investment Required		\$436,293	\$461,690	\$465,380	\$469,084

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

WILMA Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	200	270	270
Trauma-Informed Counselling	625	720	1450
Emergency Assistance, Integrated Care & Referral	450	450	450
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	-
Complementary Therapy - Other	350	350	350
Therapeutic Groups	48	48	96
Health Education, Skills Development & Support Groups	30	30	30
Physical Activity & Wellness Groups	200	200	200
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	-
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	550
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



WAGGA WOMEN'S HEALTH CENTRE

NAME Wagga Women's Health Centre

WAGGA WOMEN'S HEALTH CENTRE is an incorporated association and registered with the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1978, we provide a health care service that is accessible, without financial and cultural barriers. We support women to make informed choices about their own health. lives and wellbeing.

ABN	53 869 197 957
WEBSITE	https://waggawomen.org.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/d066a1d8-2daf-e811-a963-000d3ad244fd/documents/
Local Health District	Murrumbidgee LHD
Primary LGA(s) Serviced	Wagga Wagga LGA
NSW Electorate	Wagga Wagga
Federal Electorate	Riverina
Site(s)	Wagga Wagga

Local Population & Health Indicators

Women in the Wagga Wagga LGA, while socio-economically comparable with NSW overall, experience high rates of both domestic and family violence and sexual assault. Reported rates of domestic and family violence are 1.75 times the NSW state average and have increased by 4.8% over the last three years, resulting in high rates of hospitalisations. Similarly, high rates of sexual assault in the area have increased by 10.5% over the same period. 4.2% of women experience three or more chronic and long-term health conditions, with options for effective coordinated treatment more limited in this regional area.

In the Murrumbidgee LHD, women experience relatively high levels of psychological distress, along with both mental health related emergency presentations and hospitalisation for intentional self-harm. More than two-thirds of women are overweight or obese.

Responding to Emerging and Unmet Needs

Wagga Women's Health Centre currently provides health services and support to over 1600 women each year through the Women's Health Program.

Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered by the Centre to meet community needs.

Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable the Centre to expand its services and support a greater number of women. In particular, the Centre would seek to:

- Expand counselling capacity to address the extensive waitlists of women who are experiencing mental illness, and trauma related to domestic and family violence and sexual assault; and
- Increase intake and assessment capacity to accept referrals and develop appropriate treatment plans for women.



4,087,995 13.60%	34,728	122,636
13.60%		122 636
		122,000
0.70%	9.80%	4.70%
9.70%	2.80%	5.30%
1001	995	
3.40%	5.80%	
25.70%	6.50%	
5.00%	0.90%	
50.00%	49.00%	
15.80%	17.40%	
3.30%	4.2%	
19.40%		23.70%
1607.3		2,868.90
109.8		159.5
35.6		46.9
393.4	690.3	
3.1% increase	4.8% increase	
89.2	147.5	
4.8% increase	10.5% increase	
51.80%		66.80%
40.30%		43.50%
5.90%		6.90%
38.30%		40.80%
	3.40% 25.70% 5.00% 50.00% 15.80% 19.40% 1607.3 109.8 35.6 393.4 3.1% increase 89.2 4.8% increase 51.80% 40.30% 5.90%	1001 995 3.40% 5.80% 25.70% 6.50% 5.00% 0.90% 50.00% 49.00% 15.80% 17.40% 3.30% 4.2% 19.40% 1607.3 109.8 35.6 393.4 690.3 3.1% increase 4.8% increase 89.2 147.5 4.8% increase 51.80% 40.30% 5.90%

Data Sources: ABS Census 2021 & 2016, NSW HealthStats, NSW Department of Planning, NSW BoCSAR



Proposed Investment in the Women's Health Program

Scenario 1 - Wagga Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	48%	\$311,014	\$327,903	\$329,280	\$330,663
Management, Community Partnerships & Capacity Building	17%	\$112,733	\$118,854	\$119,353	\$119,855
Administration & Support	13%	\$84,008	\$88,570	\$88,942	\$89,315
Total Salaries & Wages	78%	\$507,755	\$535,326	\$537,575	\$539,832
Total Program Costs & Operating Expenses	22%	\$142,949	\$150,097	\$150,097	\$150,097
SCENARIO 1: TOTAL SUSTAINABLE COST		\$650,704	\$685,423	\$687,671	\$689,929
Less:					
Current Women's Health Program Grant		\$404,081	\$424,285	\$424,285	\$424,285
SCENARIO 1: Additional Investment Required		\$246,623	\$261,138	\$263,386	\$265,644

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Wagga Women's Health Centre

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	48%	\$311,014	\$327,903	\$329,280	\$330,663
Management, Community Partnerships & Capacity Building	17%	\$112,733	\$118,854	\$119,353	\$119,855
Administration & Support	13%	\$84,008	\$88,570	\$88,942	\$89,315
Total Salaries & Wages	78%	\$507,755	\$535,326	\$537,575	\$539,832
Total Program & Operating Expenses	22%	\$142,949	\$150,097	\$150,097	\$150,097
SCENARIO 2: TOTAL SUSTAINABLE COST		\$650,704	\$685,423	\$687,671	\$689,929
Less:					
Current Women's Health Program Grant		\$404,081	\$424,285	\$424,285	\$424,285
SCENARIO 2: Additional Investment Required		\$246,623	\$261,138	\$263,386	\$265,644

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Wagga Women's Health Centre

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	49%	\$406,758	\$428,845	\$430,646	\$432,454
Management, Community Partnerships & Capacity Building	14%	\$112,733	\$118,854	\$119,353	\$119,855
Administration & Support	18%	\$148,121	\$156,163	\$156,819	\$157,478
Total Salaries & Wages	80%	\$667,611	\$703,862	\$706,818	\$709,787
Total Program & Operating Expenses	20%	\$162,832	\$170,974	\$170,974	\$170,974
SCENARIO 3: TOTAL SUSTAINABLE COST		\$830,443	\$874,836	\$877,792	\$880,761
Less:					
Current Women's Health Program Grant		\$404,081	\$424,285	\$424,285	\$424,285
SCENARIO 3: Additional Investment Required		\$426,362	\$450,551	\$453,507	\$456,476

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

Wagga Women's Health Centre

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	120	120	180
Trauma-Informed Counselling	600	600	900
Emergency Assistance, Integrated Care & Referral	-	-	-
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	-
Complementary Therapy - Other	-	-	-
Therapeutic Groups	40	40	40
Health Education, Skills Development & Support Groups	120	120	120
Physical Activity & Wellness Groups	-	-	-
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	-	-	-
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	-	-	-
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- · improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



WAMINDA WOMEN'S HEALTH CENTRE

NAME SOUTH COAST WOMEN'S HEALTH & WELFARE ABORIGINAL CORPORATION t/a WAMINDA

SOUTH COAST WOMEN'S HEALTH & WELFARE ABORIGINAL CORPORATION t/a WAMINDA is registered with the Office of the Registrar of Indigenous Corporations (ORIC); and the Australian Charities and Not-for-profits Commission (ACNC) as a Charity with Public Benevolent Institution status. Established in 1984, Our vision is for Aboriginal women and (their) families to be leading and living self-determined futures. We offer a culturally safe and holistic service, with tailored, strength-based care; providing women and their Aboriginal families an opportunity to belong and receive quality health and well-being support.

ABN	97 639 372 729
WEBSITE	https://waminda.org.au/
FINANCIAL REPORTS	https://register.oric.gov.au/document.aspx?concernID=100853 *Submits annual reports and governing documents to the Office of the Registrar of Indigenous Corporations (ORIC)
Local Health District	Illawarra Shoalhaven LHD
Primary LGA(s) Serviced	Shoalhaven LGA
NSW Electorate(s)	Kiama; South Coast
Federal Electorate	Gilmore
Site(s)	Nowra

Responding to Emerging and Unmet Needs

South Coast Women's Health & Welfare Aboriginal Corporation (Waminda) provides a specialist clinical program to prevent lifestyle related chronic disease across the life stages for Aboriginal women and girls in the Shoalhaven.

The Centre provides women's health cervical and STI screening, breast checks and reproductive health services for Aboriginal women, along with community engagement and health promotion in Nowra, Bomaderry and St Georges Basin. Outreach clinics delivered by Nurses and Aboriginal Health Workers in Jerrinja, Wreck Bay and Ulladulla also provide women's health screening and consultations, and health education programs within these more isolated Aboriginal communities.

The Women's Health Program is a small, but crucial, part of Waminda's work to address the unique health needs of Aboriginal women and girls. Sustainable investment in the program is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 & 3 reflecting the level of services and activities currently being delivered to meet community needs.



Proposed Investment in the Women's Health Program

Scenario 1 - South Coast Women's Health & Welfare Aboriginal Corporation (Waminda)

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Local Health District.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986.

This represents the minimum level of Women's Health Program funding required by this Women's Health Centre to remain viable and continue operating the program.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	45%	\$145,808	\$153,726	\$154,371	\$155,020
Management, Community Partnerships & Capacity Building	8%	\$25,958	\$27,368	\$27,483	\$27,598
Administration & Support	0%	\$-	\$-	\$-	\$-
Total Salaries & Wages	52%	\$171,766	\$181,093	\$181,854	\$182,618
Total Program Costs & Operating Expenses	48%	\$155,759	\$163,547	\$163,547	\$163,547
SCENARIO 1: TOTAL SUSTAINABLE COST		\$327,525	\$344,640	\$345,401	\$346,165
Less:					
Current Women's Health Program Grant		\$279,500	\$293,475	\$293,475	\$293,475
SCENARIO 1: Additional Investment Required		\$48,025	\$51,165	\$51,926	\$52,690

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - South Coast Women's Health & Welfare Aboriginal Corporation (Waminda)

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by the Women's Health Centre.

Scenario 2 is the estimated level of Women's Health Program funding required by this Women's Health Centres to remain viable and sustain the levels of service delivery and outcomes that they are currently providing to meet community needs.

This provides a strong indication of immediate and acute health needs in the local community and it is strongly recommended that the Ministry of Health consider funding the Centre's Women's Health Program at this level.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	45%	\$145,808	\$153,726	\$154,371	\$155,020
Management, Community Partnerships & Capacity Building	8%	\$25,958	\$27,368	\$27,483	\$27,598
Administration & Support	0%	\$-	\$-	\$-	\$-
Total Salaries & Wages	52%	\$171,766	\$181,093	\$181,854	\$182,618
Total Program & Operating Expenses	48%	\$155,759	\$163,547	\$163,547	\$163,547
SCENARIO 2: TOTAL SUSTAINABLE COST		\$327,525	\$344,640	\$345,401	\$346,165
Less:					
Current Women's Health Program Grant		\$279,500	\$293,475	\$293,475	\$293,475
SCENARIO 2: Additional Investment Required		\$48,025	\$51,165	\$51,926	\$52,690

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - South Coast Women's Health & Welfare Aboriginal Corporation (Waminda)

Expand and enhance activities and service levels for the Women's Health Program to address population growth, unmet needs and emerging local health issues identified by the Women's Health Centre.

Subject to negotiation with the Ministry of Health and Local Health Districts, this level of investment would enable the Women's Health Centre to sustainably expand service delivery in response to local needs.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Direct Service Delivery	45%	\$145,808	\$153,726	\$154,371	\$155,020
Management, Community Partnerships & Capacity Building	8%	\$25,958	\$27,368	\$27,483	\$27,598
Administration & Support	0%	\$-	\$-	\$-	\$-
Total Salaries & Wages	53%	\$171,766	\$181,093	\$181,854	\$182,618
Total Program & Operating Expenses	47%	\$155,759	\$163,547	\$163,547	\$163,547
SCENARIO 3: TOTAL SUSTAINABLE COST		\$327,525	\$344,640	\$345,401	\$346,165
Less:					
Current Women's Health Program Grant		\$279,500	\$293,475	\$293,475	\$293,475
SCENARIO 3: Additional Investment Required		\$48,025	\$51,165	\$51,926	\$52,690

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Proposed Women's Health Program Services

South Coast Women's Health & Welfare Aboriginal Corporation (Waminda)

The proposed scope and estimated volume of health services to be delivered by the Women's Health Centre under each funding scenario is shown below.

Estimated Number of Sessions per Annum

Service Types	SCENARIO 1	SCENARIO 2	SCENARIO 3
CORE SERVICES			
Intake & Assessment	-	-	-
Trauma-Informed Counselling	-	-	-
Emergency Assistance, Integrated Care & Referral	-	-	-
CORE HOLISTIC HEALTH SUPPORT SERVICES			
Complementary Therapy - Massage	-	-	-
Complementary Therapy - Other	-	-	-
Therapeutic Groups	-	-	-
Health Education, Skills Development & Support Groups	16	16	16
Physical Activity & Wellness Groups	-	-	-
CORE CLINICAL SERVICES			
Women's Health Clinical Consultations	1800	1800	1800
Women's Health Complex Clinical, Health Screening & Reproductive Health Consultations	400	400	400
Allied Health - Psychology	-	-	-
Allied Health - Other	-	-	-

In addition to the sessional services outlined above, each Scenario incorporates resources for the Centre's critical community engagement, health education and promotion, and health system development work. This includes working with other Government, non-Government and community partners to:

- · improve women's health literacy and capacity to make informed decisions about the health;
- reduce the disease burden by raising awareness of factors that contribute to illness;
- provide outreach in community settings to priority groups of women who might not attend a Women's Health Centre; and
- develop and maintain collaborative approaches to improve health care, support and outcomes for women and children in the community.



WOMEN'S HEALTH NSW

NAME Women's Health NSW Incorporated

Women's Health NSW is the peak body representing the 20 Women's Health Centres in NSW. The organisation provides support to the Centres to increase their capacity to respond effectively to women's health and wellbeing. Women's Health NSW also support the development of policies and services that promote the health of all women in NSW, including being proactive on priority issues relevant to women's health and promote women's access to appropriate and effective community-based health services.

ABN	51 392 627 790
WEBSITE	whnsw.asn.au
FINANCIAL REPORTS	https://www.acnc.gov.au/charity/charities/dcd292df-38af-e811-a963-000d3ad244fd/documents/
NSW Health Oversight	Ministry of Health NSW

Responding to Emerging Needs

As the peak body for the 20 NGO Women's Health Centres in NSW, Women's Health NSW provides sector support, coordination and representation, via a single point of contact, to Government and stakeholders.

Women's Health NSW receives funding under the Women's Health Program, with direct oversight from Ministry of Health, to achieve the following aims:

- Support the development of policies and services that promote the health of all women in NSW including being proactive on priority issues relevant to women's health;
- Promote women's access to appropriate and effective community-based health services;
- · Increase capacity in Women's Health sector to respond effectively to women's health and wellbeing;
- Enhance the capacity of Women's Health Centres in NSW to deliver good governance, data management, planning and reporting; and
- Enhance Women's Health NSW governance and performance to achieve its aims and objectives.

Sustainable investment in Women's Health NSW is reflected in Scenario 1 with a recalibration of costs to deliver currently contracted services and Scenario 2 reflecting the level of services and activities currently being delivered to meet the needs of the sector.

Enhanced investment in the Women's Health Program, envisaged in Scenario 3, would enable Women's Health NSW to expand its support for the sector and address key emerging issues. In particular, Women's Health NSW would seek to:

- Enhance existing IT, cyber security support and skill development for the sector;
- Engage a dedicated training and project management resource to support ongoing sector-wide capacity building, research, policy development, data management and outcomes reporting.



Proposed Investment in the Women's Health Program

Scenario 1 - Women's Health NSW

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently contracted</u> by the Ministry of Health.

Scenario 1 recalibrates costing for the current Women's Health Program to reflect the major structural adjustments that have occurred since 1986 and the support provided to maintain the capacity of the NGO Women's Health sector.

This represents the minimum level of Women's Health Program funding required by Women's Health NSW to remain viable, continue supporting the sector and promoting women's access to appropriate and effective community-based health services.

SCENARIO 1	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Sector Development, Training & Support	12%	\$43,427	\$45,789	\$45,986	\$46,184
Management, Advocacy & Sector Capacity Building	45%	\$159,156	\$167,814	\$168,536	\$169,261
Administration & Support	7%	\$25,996	\$27,410	\$27,528	\$27,646
Total Salaries & Wages	65%	\$228,579	\$241,014	\$242,050	\$243,091
Total Program Costs & Operating Expenses	35%	\$124,508	\$130,733	\$130,733	\$130,733
SCENARIO 1: TOTAL SUSTAINABLE COST		\$353,087	\$371,748	\$372,784	\$373,825
Less:					
Current Women's Health Program Grant		\$262,700	\$275,835	\$275,835	\$275,835
SCENARIO 1: Additional Investment Required		\$90,387	\$95,913	\$96,949	\$97,990

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 2 - Women's Health NSW

Sustain activities, service levels and outcomes for the Women's Health Program which are <u>currently being delivered</u> by Women's Health NSW.

Scenario 2 is the estimated level of Women's Health Program funding required by Women's Health NSW to remain viable, continue supporting the sector and promoting women's access to appropriate and effective community-based health services.

SCENARIO 2	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Sector Development, Training & Support	12%	\$43,427	\$45,789	\$45,986	\$46,184
Management, Advocacy & Sector Capacity Building	45%	\$159,156	\$167,814	\$168,536	\$169,261
Administration & Support	7%	\$25,996	\$27,410	\$27,528	\$27,646
Total Salaries & Wages	65%	\$228,579	\$241,014	\$242,050	\$243,091
Total Program Costs & Operating Expenses	35%	\$124,508	\$130,733	\$130,733	\$130,733
SCENARIO 2: TOTAL SUSTAINABLE COST		\$353,087	\$371,748	\$372,784	\$373,825
Less:					
Current Women's Health Program Grant		\$262,700	\$275,835	\$275,835	\$275,835
SCENARIO 2: Additional Investment Required		\$90,387	\$95,913	\$96,949	\$97,990

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Scenario 3 - Women's Health NSW

Expand and enhance sector support activities to address ongoing sector-wide needs including training, policy development, evidence-based practice, IT and cyber security, outcomes measurement and reporting.

SCENARIO 3	% of Total	Full Cost (2022-23 Rates) \$	Proposed 2023-24 \$	Proposed 2024-25 \$	Proposed 2025-26 \$
EXPENSES					
Salaries & Wages					
Sector Development, Training & Support	29%	\$130,280	\$137,367	\$137,958	\$138,551
Management, Advocacy & Sector Capacity Building	35%	\$159,156	\$167,814	\$168,536	\$169,261
Administration & Support	6%	\$27,282	\$28,766	\$28,890	\$29,014
Total Salaries & Wages	70%	\$316,718	\$333,948	\$335,384	\$336,826
Total Program Costs & Operating Expenses	30%	\$133,325	\$139,992	\$139,992	\$139,992
SCENARIO 3: TOTAL SUSTAINABLE COST		\$450,044	\$473,939	\$475,375	\$476,818
Less:					
Current Women's Health Program Grant		\$262,700	\$275,835	\$275,835	\$275,835
SCENARIO 3: Additional Investment Required		\$187,344	\$198,104	\$199,540	\$200,983

Notes

Sustainable delivery costs have been calculated based on 2022-23 rates, with indexation of 5% applied to both costs and the current Women's Health Program grant to show funding required for 2023-24. Forward year estimates are shown in 2023-24 dollars, without indexation. As per current practice, it is assumed that proposed funding in the forward years would be escalated at an appropriate rate determined by NSW Government.



Women's Health NSW

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Accredited at Certificate Level of the Australian Service Excellence Standards

Funded by the NSW Ministry of Health

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