

ILLAWARRA  
WOMEN'S  
HEALTH  
CENTRE

**ANNUAL REPORT**  
2018 - 2019



# ACKNOWLEDGEMENTS

## Acknowledgement Of Country

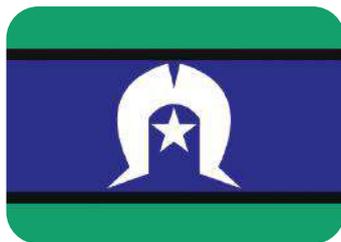
Our Centre is situated on land of the Wodi Wodi people of Warilla, part of the Dharawal Nation.

We acknowledge the traditional custodians of this land, where the Aboriginal people have performed age-old ceremonies of storytelling, music, dance and celebration.

We acknowledge and pay respect to Elders past, present and those of the future, for they hold the memories, traditions and hopes of Aboriginal Australia.

We must always remember that under the concrete and asphalt, this land is, was, and always will be traditional Aboriginal land.

We acknowledge that we work in the context of generations of resilient, strengths-based, holistic resistance to violence in Aboriginal and Torres Strait Islander communities. We commit to actively supporting and promoting the voices of Aboriginal people and organisations in our work.



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## **ILLAWARRA WOMEN'S HEALTH CENTRE**

We are an independent community-based feminist health care centre for women only. We provide a safe place for women to access specialised and trauma informed medical and health care services. We are run by women for women and girls and are a nationally accredited organisation.

## OUR VISION

Women and girls are respected, safe and healthy and experience full participation and equality in their lives.

## OUR PURPOSE

We work to improve the physical, mental and social health and wellbeing of women and girls and advocate for positive change for women in the community and the health system.

## OUR ROLE

We achieve our purpose by focusing on sexual and reproductive health, domestic and family violence, and mental health and wellbeing, and providing:

- Free or low-cost individual and group health care services:
  - Medical, mental health, and domestic and family violence therapy and support services.
  - Complementary therapies, social and wellness workshops and programs.
- A safe and woman-centred space for social support, community activities and groups.
- Primary prevention and early intervention programs and health education.
- Community development, activism and advocacy to address the underlying causes of poor health for women and girls, and improve policy and services.

## OUR VALUES

Illawarra Women's Health Centre is guided by values grounded in feminist philosophy and the proud legacy of women's health centres. Our values are lived out in the way we understand women's experience and health needs, in our practice and action and in the way the Centre is managed and governed.

### Respect

Women involved with our Centre are treated with respect and dignity.

### Equity

We focus on women and girls who are at high risk or have special needs, and we stand with women in their struggle for justice, safety and equality.

### Compassion

We provide a caring, non-judgemental and person-centred approach to service delivery that responds to each woman's individual circumstances.

### Integrity

Honesty, transparency and trustworthiness are foundational to the professionalism of our board, staff and volunteers and our relationships with clients, other services and donors.

### Diversity

We value and respect women's racial, cultural and sexual diversity and strive for excellence in being a culturally competent and inclusive service provider.

### Recognition And Reconciliation

We value and recognise the heritage and history of Aboriginal and Torres Strait Islander peoples and are committed to advancing healing, reconciliation and justice for Indigenous Australians.

## OUR STRATEGIC DIRECTION

Established in 1986, we provide woman-centred, safe, high quality health services and programs. Since then we have evolved in response to the needs of women and girls in the region, shaped by evidence of effective practice and local, state and national policy contexts.

Despite the significant gains in accessing appropriate, quality health services made by women and girls over the last 30 years, gender inequality remains a major challenge in our society, and with it, discrimination, marginalisation and violence continues to occur to women and girls – across all aspects of our lives. With young women experiencing mental health rates twice as high as young men, rising rates of domestic and family violence, crisis levels of violence against women with disabilities, the pervasive and increasing objectification, sexualisation and abuse of (ever younger girls) and women online, and older women being the most rapidly increasing demographic for homelessness, we are as relevant to women's wellbeing as when we began. In this context, the provision of women centred services, the presence of a safe and inclusive community and a voice that argues for equitable access to employment, housing, justice and health is critical.

**That is what we do, that is why we are here.**

### **The NSW Women's Health Framework 2019**

Revised and updated in 2019, the NSW Women's Health Framework, a key policy document for the NSW Government has as its Guiding Principles:

- Taking a holistic view of the health and wellbeing of women and girls
- Recognising the social determinants of health and wellbeing
- Taking a gendered approach and promoting health equity for all women
- Adopting a life course approach
- Empowering women and girls to play an active role in their health and wellbeing
- Improving access and engagement in health services and programs for all women

These principles align to, and reinforce our foundational approach to health which is: a strategic focus on the key current health issues for women, a social determinants and public health perspective to understanding health and wellbeing, a feminist approach to gender equity and women's right to self-determination, and a community-based role within the public health care system.

## The National Women's Health Strategy 2020-2030

Our strategic focus areas, identified groups of women in vulnerable and marginalised circumstances and approach to health and wellbeing are also central to the National Women's Health Strategy, released in April 2019. The five priority areas of the Strategy are:

- Maternal, sexual and reproductive health – increase access to information, diagnosis, treatment and services for sexual and reproductive health; enhance and support health promotion and service delivery for preconception, perinatal and maternal health.
- Healthy ageing – adopt a life course approach to healthy ageing; address key risk factors that reduce quality of life and better manage the varied needs of women as they age.
- Chronic conditions and preventive health – increase awareness and prevention of chronic conditions, symptoms and risk factors; invest in targeted prevention, early detection and intervention; tailor health services for women and girls.
- Mental health – enhance gender-specific mental health awareness, education and prevention; focus on early-intervention; invest in service delivery and multi-faceted care.
- Health impacts of violence against women and girls – raise awareness about, and address the health and related impacts of violence against women and girls; co-design and deliver safe and accessible services.

Our strategic direction for 2017-2022 focuses on three key health issues that adversely affect women: **sexual and reproductive health, domestic and family violence, and mental health and wellbeing.**

### The outcomes we work for

1. Women of all ages coming to the Centre:
  - have choice and control in how their health needs are met at different life stages;
  - can access timely, woman-centred clinical, allied and complementary health services in a safe community setting;
  - feel connected, validated and strong through participation in learning, social support and wellbeing programs; and
  - get timely information, advice and support - directly and through referral to other services – on issues related to housing, legal matter, financial management and access to community services.
2. Women experiencing domestic and family violence and sexual assault, get the support, information, guided referral and advocacy needed to ensure their safety and a specialised, holistic response to their needs.
3. Girls can access appropriate information that empowers them to make healthy life choices and helps them access safe and personal support when they need it.
4. The health and community service system in the Illawarra is more accessible, cohesive and effective for women and girls who are at risk of poor physical and mental health.

# OUR ACHIEVEMENTS

Two years into our five-year 2017-2022 strategic framework, we are meeting our goals. 'Achieved' does not mean we stop working on this strategy – we are always seeking to improve the quality of our services and identify and respond to the growing or new needs of our community. Our monitoring and evaluation systems underpin a dynamic, reflective and continuous improvement cycle.

Goals	Strategies	Progress
<p><b>Strengthen current offerings.</b></p> <p>Maintain and improve the current range of health care and wellness services and activities and grow our capacity to assist more women.</p>	<ol style="list-style-type: none"> <li>1. Build capacity to offer the Centre's suite of health care services and group activities for more hours and after hours.</li> <li>2. Offer services off site and in partnership with other service providers to achieve wider geographic reach.</li> <li>3. Develop new services and programs that are flexible and responsive to the needs of our priority populations.</li> <li>4. Develop an evidence base that demonstrates the effectiveness of our services and programs and supports learning and continuous improvement.</li> </ol>	<ol style="list-style-type: none"> <li>1. <b>Achieved.</b> More varied medical appointments and new after-hours counselling appointments.</li> <li>2. <b>Achieved.</b> A key focus on services for women with disabilities and women experiencing domestic and family violence.</li> <li>3. <b>In progress.</b> Broadened our range of community group activities, developed new early intervention and long-term programs.</li> <li>4. <b>In progress.</b> Working with WHNSW to improve outcome reporting.</li> </ol>
<p><b>Community engagement and outreach programs</b></p> <p>Develop community networks and activities with a prevention, early intervention and health education focus targeting high risk populations of women and girls.</p>	<ol style="list-style-type: none"> <li>1. Expand community outreach and support for women with disabilities at risk of domestic violence and sexual assault.</li> <li>2. Expand our young women and girls program focused on empowerment, resilience and self-protection (targets young women experiencing family violence, mental health and sexual and reproductive health issues).</li> <li>3. Raise awareness among young women and girls of the risks and high rates of mental illness and suicide and how to address barriers, get support and maintain good mental health.</li> <li>4. Develop outreach and support programs for older women who are socially isolated and financially disadvantaged.</li> </ol>	<ol style="list-style-type: none"> <li>1. <b>Achieved.</b> But with much progress to be made: structural and cultural barriers make accessing women with disabilities extremely difficult.</li> <li>2. <b>Achieved.</b> Working with ten schools, our program now includes a boys stream teaching respectful relationships and consent.</li> <li>3. <b>Achieved.</b> Through school outreach program and specialised young women's counselling.</li> <li>4. <b>Not yet achieved.</b></li> </ol>

Goals Strategies Progress

**Research, advocacy and activism**

Strengthen the Centre's positioning as a respected expert in women's health matters and expand our efforts in advocacy and community activism to improve women's access to health and justice.

1. Partner with the University of Wollongong and other research institutions to conduct and access research on community needs, service gaps and design and evaluation of services and programs.
2. Advocate for accessible and affordable termination services in the Illawarra, as part of a more comprehensive response to women's sexual and reproductive health needs.
3. Foster networks and partnerships to raise awareness and advocate the need for a more integrated, safe and timely service response to women experiencing domestic violence and sexual assault.
4. Participate in awareness raising and activism that challenges the increased objectification and sexualisation of women and girls.
5. Advocate for improved access to health and community services across the Illawarra, including the need for better public and community transport.

1. **Achieved.** Primary partnerships with UOW on two research projects and contributing partners on two community-based grants.
2. **Achieved.** Strong local media coverage and social media engagement.
3. **In progress.** As Chair of the Illawarra Committee against Domestic Violence, developing a more strategic regional approach.
4. **In progress.** Through social media, limited by time and resources.
5. **Not yet achieved.**

**Organisational development**

Develop the organisational capacities critical to our success – governance, visibility, a professional and committed staff team and a predictable funding base.

1. Strengthen Centre governance by building board stability and investing in board development.
2. Put in place a strategy to achieve stability of funding and growth in untied funding.
3. Ensure the Centre's management, structure and staff competencies are in line with our goals and priorities, including:
  - Increased capacity in fundraising, public relations, advocacy and community mobilisation and outreach.
  - A workable balance of full time and part time staff, and continued investment in staff learning and development.
4. Maintain strategic relationships with Women's Health NSW, the Illawarra and Shoalhaven Local Health District, other women's health centres and key stakeholders in our priority focus areas.

1. **Achieved.**
2. **In progress.** Untied funding is increasing, stability still varied and dependent upon government commitment.
3. **In progress.** Strategic restructure undertaken, professional development increased.
4. **Achieved.** Relationships maintained and developed, and new ones established.

"With many thanks for your support and 'healing hands' Linda, I feel so much better after a visit with you - it has been a godsend being pain free for longer than I have in previous years."

## OUR PEOPLE

### Council of Women Members



**JUDY DAUNT** Chairwoman  
(2015 – current)



**VI BLAZEVSKA** Treasurer  
(2016 – current)



**DR MARY PAPAOSMAS**  
(2016 – current)



**SUSAN BROWN**  
(2018 – current)



**TANYA SAINTY**  
(appointed Aug 2018)



**DIMITRIA PAPAVALSSILIOU**  
(appointed Aug 2018)

**NATALIE CROKER**  
(appointed Aug 2018)

**SHARON HOLZ**  
(2018 – current)

**BARBARA SANTOS**  
(2018 – resigned May 2019)

**NYAN THIT TIEU**  
(2018 – current)

**SUE DIGNAN**  
(2016 – resigned May 2019)

Staff



**SALLY STEVENSON AM**  
General Manager



**SUE ILIEVSKI**  
Operations Manager



**GRACE JENNINGS**  
Student Social Worker,  
Young Women's Program

**SHARON STEWART**  
Practice Nurse

**TINA MCLAREN-BELL**  
Telephone Counsellor

**LINDA BRADSHAW**  
Massage Therapist

**DENIKA THOMAS**  
Social Worker, Young  
Women's Program



**ALICE MARTIN**  
Business Manager



**THERESE WOLFE**  
Administration Support



**KIM SATTLER** Women with  
Disabilities and Domestic  
Violence Officer

**FRAN COLVILLE**  
Practice Nurse

**ALISON ILIEVSKI**  
Administration Assistant

**EDITT MELGAREJO**  
Nurse Practitioner

**BELINDA FABRIANESI**  
Research and  
Evaluation Officer

Visiting Practitioners

**ENIKO UJVARY**  
Doctor

**ELSPETH HOLBROOK**  
Doctor

**MELISSA BROWN**  
Doctor

**HAYLEY GLEESON**  
Doctor

**CAROLINE LADE**  
Doctor

**ROBYN CRAIGIE**  
Clinical Psychologist

**JEANETTE HINDMARSH**  
Clinical Psychologist

**STACEY FULLER**  
Dietitian

Special Advisors

**HELEN VOLK**  
Legal

**DR KAREN WILLIAMS**  
Mental Health

**SUE DIGNAN**  
Domestic and Family  
Violence

## CHAIRWOMAN'S REPORT



This annual report highlights the many fantastic achievements, and some of the challenges, of all those involved with the Illawarra Women's Health Centre in the past 12 months.

At the Annual General Meeting held October 2018 we accepted nominations and welcomed the following Council of Women members: Vi Blazevska, Mary Papakosmas, Sue Dignan, Tanya Sainty, Natalie Croker, Thit Tieu, Dimi Papavassiliou and myself, thus eight Council member positions and one vacancy remained. During the reporting period we accepted a nomination and welcomed Barbara Santos to the Council.

Since then, we have farewelled some members as they were unable to commit to the ongoing responsibilities of Council membership due to professional and personal reasons. Sue Dignan who is now a Special Advisor to Council and Centre Management, Thit Tieu, Barbara Santos and most recently Natalie Croker. Council is very excited to welcome back Sue Brown.

Strong leadership sees the Centre in a satisfactory financial situation, which supports ongoing viability and a strong future.

The Centre is currently two years into its 5 year Strategic Plan 2017 – 2022. The plan continues to provide the organisation with a defined purpose and a clear direction for core business. This has provided an excellent framework for the past 12 months ensuring we focus on:

- free or low cost individual and group services;
- maintaining a safe and women-centred space for social support;
- community activities and groups, providing primary prevention and early intervention programs and health education;
- participating in community development, activism and advocacy to address the underlying causes of poor health for women and girls, and improve policy and services involved.

Programs within the Centre are very well utilised. Some are expanding at a great pace such as the Young Women's Program, and at times it overflows! From the successful and widely recognised Mothers and Sons program to our highly regarded Women with Disabilities and Domestic and Family Violence Program (the only service in the Illawarra providing specialised and dedicated support to women with disabilities, as well as training on domestic and family violence and healthy relationships to men and women) and our awareness raising A Little Bird Told Me campaign we continue to develop and deliver new and innovative projects.

Two strategies over the past 12 months have become a significant focus for the Council and staff:

1. Reproductive and Sexual Health and the provision of accessible, affordable and decriminalised medical termination of pregnancies.

2. The Illawarra Domestic and Family Violence Trauma Recovery Centre. The Centre identified the gap in service provision for long term recovery

and support for women who have trauma as a result of domestic and family violence. Our organisation has advocated and highlighted the need, connected and gathered support and established a consultative working party. This group continues to coordinate a campaign for a specialised Centre, a first for Australia and a model that can be replicated anywhere. A significant partnership has been established with the University of NSW and University of Wollongong to drive the research agenda.

Again, the Annual Dinner was a highlight this year, a sold-out event, doubling the number in attendance and funds raised. Jane Caro was entertaining and thought provoking, and the performance from Ayse Goknur Shanal was so moving and powerful. And, as always, the wonderful Melinda James as MC ensured the night ran smoothly.

The future for the Illawarra Women's Health Centre continues to look bright and exciting - strong leadership from the Council, a dedicated and visionary Manager Sally, passionate and professional Centre staff, sound financial situation, an excellent working Strategic Plan and increased community reputation and recognition are all significant factors. However, the future is not without challenges. We must continue to work hard, remain vigilant and advocate for young girls and women so all have the opportunity to improve and maintain their physical, mental and social health and well-being.

Finally, a big thanks and congratulations on a great year to all Council Members, Sally and Centre Staff. Please join me in sharing the Vision of the Illawarra Women's Health Centre, a future where "Women and girls are respected, safe and healthy, and experience full participation and equality in their lives".

**JUDY DAUNT**

Chairwoman

## GENERAL MANAGER'S REPORT



Our Centre provides a unique and critical service in the Illawarra, welcoming all women who walk through our door, regardless of age, ethnicity, sexuality or disability. We offer safe, accessible and cost-effective support to women. The Centre is also a place of integrity, where women are treated with respect, dignity and kindness.

2018-19 was a very positive year for us – launching new initiatives, consolidating our operational structure and strengthening our services in all three strategic focus areas - sexual and reproductive health, domestic and family violence, and mental health and wellbeing. We exceeded both our operational and financial goals.

We are a vital and dynamic component of the primary health care system in the Illawarra. During the year we supported 1,437 individual clients, approximately the same as last year. This translated to 4,352 occasions of service, covering 10,497 presenting issues reflecting our integrated care 'one stop shop' approach to services and support. The number of women contacting us for information, support or referrals continues to increase with almost 8,600 telephone contacts at reception, an increase of 37% over last year.

We facilitated and/or implemented 1,207 group sessions, an increase of 13% on last year. These included groups for yoga, meditation, singing, art therapy, quit smoking, healthy relationships and craft.

In addition, we achieved the following highlights:

- Implemented our new operational structure, with permanent staff in all positions enabling us to sharpen and strengthen our support for women experiencing or recovering from domestic and family violence, boost our front of office presence and support, and increase our counselling appointments.
- Launched our "A Little Bird Told me..." campaign that increases awareness of support pathways for women experiencing or recovering from domestic and family violence.
- Led a regional response to domestic and family violence by Chairing the Illawarra Committee against Domestic Violence.

- Hosted the launch of the Australian Services Union A Workplace Guide to Preventing & Responding to Domestic Violence.
- Established our free medical termination pregnancy service, and were a strong and public advocate for the decriminalisation of abortion in NSW.
- Developed our Mothers and Sons program, raising boys into respectful men with the generous support of IWD Illawarra, which provided a grant of \$20,000.
- Partnered in a world first Australia wide clinical trial for the new cervical screening protocol.
- Expanded our young women's program to include boys and established a fee for service income stream from the program.
- Initiated two ground-breaking research projects with University of Wollongong, Shellharbour Council, NSW Police and our local health district on community attitudes to domestic and family violence, with generous funding by Shellharbour Club and ISLHD.
- Installed our new telephone system, worth \$15,000 and funded by the NSW Government Community Building Partnership, with the support of Anna Watson MP.
- Enjoyed our most successful fundraising year on record!

We also spent a significant amount of time launching and driving our community campaign to support the establishment of an Australian first Domestic and Family Violence Trauma Recovery Centre. This Centre of Excellence will be a much needed service that responds to the desperate need for long term free services for women suffering the indisputable physical and psychological impacts of trauma caused by with this violence.

**This work, and our achievements are only possible because of our extraordinary team of multiskilled, highly committed and compassionate women.**

The Centre this year was funded (65%) by the NSW Ministry of Health, through the NGO Health Partnerships grant program, distributed and monitored by the Illawarra Shoalhaven Local Health District. We met and, in most cases, exceeded our key performance indicators associated with this funding.

We continue to experience high demand for all our services. This is in part because our excellent reputation keeps growing, especially as we develop more outward reaching partnerships and relationships and persist in raising our voice across all forms of media to advocate for women's health. It is also because the incidence of mental health and violence against women is increasing, and more clients accessing our service do so with increasingly complex needs, often with difficult and traumatic histories.

There has been no real increase in funding for women's health centres across the state since 1986, and this is of significant concern especially in the context of: increased demands on governance, administration, management and for services; increased demands on financial and organisational compliance; population growth and increased complexity and number of clients and their presenting issues. Inadequate funding results in undue stress on our physical and human resources, and it means we have little capacity to meet additional needs – try as we might. **An urgent increase in funding levels is required to meet current and growing governance and community service needs.**

I thank our networks and partners for their support and commitment to the needs of our shared clients. I thank our Council of Women and staff for creating a women's health centre that we can all be proud of.

And most of all I thank our clients who continue to put their faith in us, often under the most awful circumstances. Their quiet strength, remarkable resilience and perseverance, humour and humility are, without question, inspiring. It is our privilege to support them.

**SALLY STEVENSON AM**  
General Manager

# OUR WORK

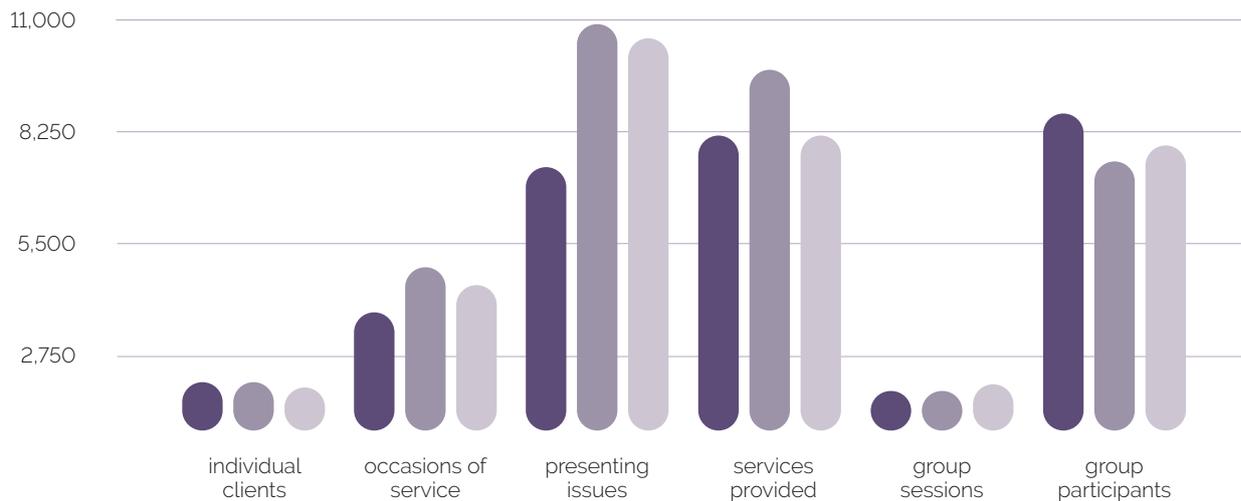
We address key health issues for women using a variety of strategies, including clinical and allied health services, therapeutic and information workshops on mental and physical health relationships as well as healthy relationships, financial and legal services, outreach and community group activities.



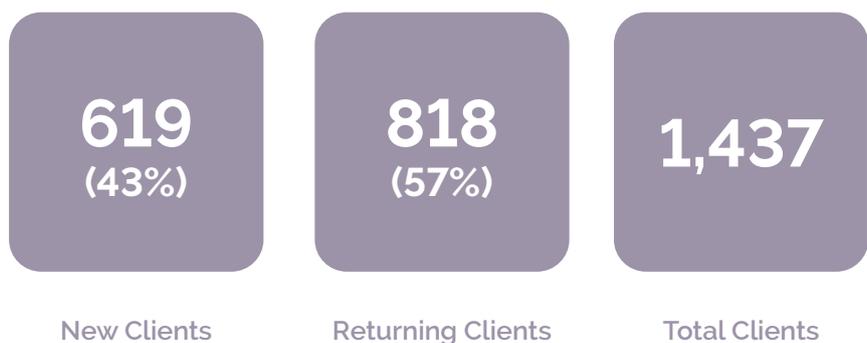


## CLIENT ACTIVITY SNAPSHOT

● 2017 ● 2018 ● 2019



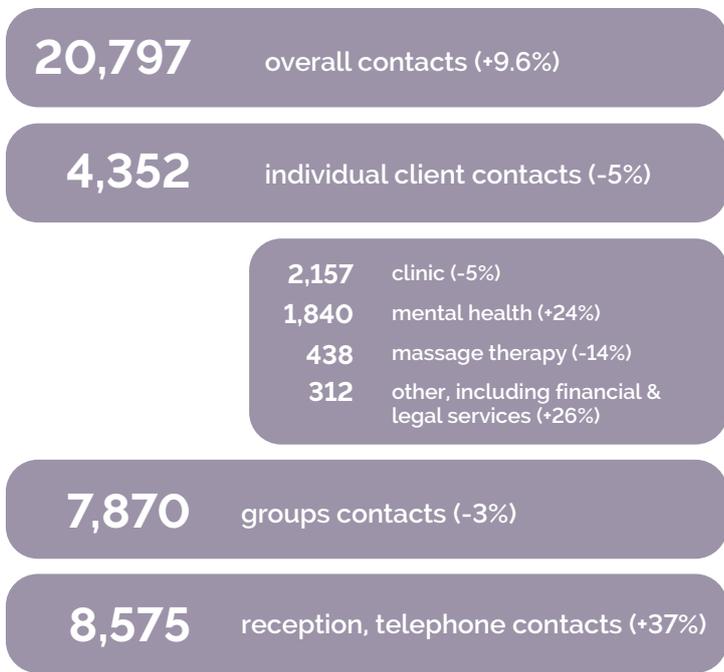
## INDIVIDUAL CLIENTS



The number of individual client contacts have dropped slightly [5%] this year, as have the number of presenting issues for physical health and sexual and reproductive health. This decrease is the result of a significant gap in providing doctors services. However, it is important to note that our exceptional Women's Health Nurse Practitioner, Edith Melgarejo sees an average of 13 women a day, offering each woman an appointment of up to 45 minutes, if necessary. This provides the time to be respectfully listened to, informed of their options and supported to make their own health decisions.

At the same time it is distressing to note that the number of women who had violence and abuse as a presenting issue increased by 21%.

## CLIENT CONTACTS



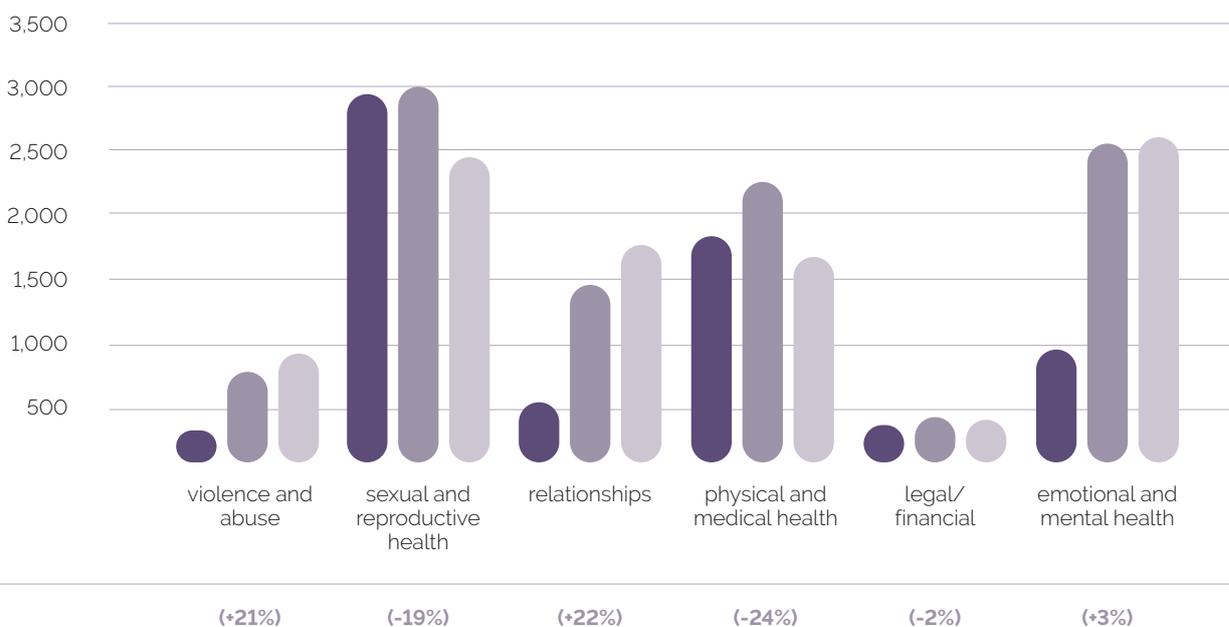
### OUR PARTNERS

delivering free of charge, individual services at the Centre:

- Illawarra Legal Centre
- Mission Australia
- Centrelink
- Australian Hearing
- Violence Abuse & Neglect Team, ISLHD

## PRESENTING ISSUES

● 2017 ● 2018 ● 2019



The range and availability of our health practitioners enables us to provide continuity of care under one roof, particularly important for women who are in vulnerable and marginalised situations.



937

NUMBER OF  
CLIENT CONTACTS  
FOR VIOLENCE  
& ABUSE

## STRATEGIC FOCUS AREAS

### DOMESTIC AND FAMILY VIOLENCE

The complexity of domestic and family violence demands integrated, high quality, flexible and safe services and referral pathways. We have 33 years experience in addressing the impacts of domestic and family violence, and provide wrap-around support services that address the multiple physical, psychological, economic and social needs of women.

These services include medical assessment, safety planning and referral, trauma counselling, priority access to doctor and nurse consultations and a range of therapeutic, educational and support programs. We have a dedicated domestic and family violence Manager who provides crisis support and ongoing individual advocacy.

This year we Chaired the Illawarra Committee Against Domestic Violence, an interagency partnership including government and non-government services. The vision of the ICADV is to assist with the elimination of domestic and family violence, and this year under the skilful and strong leadership of Grace Jennings our DFV Manager, the Committee delivered training programs on cultural competency and Response Based Practice as well as increasing the profile and advocacy voice of the Committee.



Boys undertaking the 'BoysTalk' program with Grace.

### We deliver the following unique programs:

**1. Women with disabilities and domestic and family violence program:** 90% of women with disabilities experience domestic and family violence, often with multiple experiences and multiple perpetrators. We are the only service in the Illawarra to provide specialised and dedicated support to these women. We work in partnership with a wide range of disability service providers to provide individualised support and advocacy and deliver appropriate domestic and family violence and healthy relationships training to men and women.

We actively worked to raise the profile of women with a disability experiencing violence and are regularly asked to present at local conferences and panels on this issue.

**2. TeensTALK outreach program:** this program is a simple but innovative approach to delivering health education messages, improving health behaviours and building and enabling health seeking strategies in young people – it builds understanding of gender equity and healthy relationships (including the gender-based drivers of violence), positive mental health and sexual and reproductive health. It has been tested and refined over the last three years. This year we delivered it to eight Illawarra High Schools (500 students), on a fee for service basis. There are two streams:

- a. **'Talk like a Girl'**, which also develops the skills, knowledge and confidence of girls to understand and protect themselves against domestic and family violence, manage their sexual and reproductive health and build mental health resilience.
- b. **'BoysTalk'**, which works with boys to develop an understanding of positive masculinity and respectful relationships.

The program has been designed by our specialised young women's social workers. Delivered face to face and in modules, its strengths include; transparent, age-relevant and timely content; independent and professional expertise and age-appropriateness of the program facilitator (allowing for open, safe and non-judgemental conversation); face to face delivery, which builds interpersonal communication skills and capacity and allows for peer driven learning; and enabling of health seeking behaviours.

**3. Mothers and Sons Program:** Developed as an early intervention program and run over six weekly sessions, this program supports the mother and son relationship through new skills, techniques and strategies that foster the development of boys into respectful young men. Designed and implemented by a female social worker and a male clinical psychologist, community interest in this program has been overwhelming. This year we were generously supported by IWD Illawarra with a \$20,000 grant to continue supporting the program's development, evidence base and forms of delivery..

A Centre Initiative

## MOTHERS AND SONS PROGRAM

Malika Reese



In 2019, my six year old son Jesse and I participated in the Illawarra Women's Health Centre's Mothers and Sons program. I had been feeling incredibly frustrated with my relationship with my son. I knew he was a good kid, but we seemed to be pushing each other's buttons regularly and there were frequent stressful outbursts that I did not know how to deal with.

It was amazing to find out that there was a new program designed to help mothers and sons learn how to communicate with and better understand each other in a respectful way. My boy and I were both happy to attend and were welcomed into a small group with another seven mothers and sons, who were all trying their best to get along peacefully with each other.

The facilitators were both very experienced, empathetic, and articulate. They helped the boys, and mums, to feel at ease. Everyone was enthusiastic about the journey ahead and the possibilities of better connection. The boys learnt about empathy, resilience and compassion for themselves, and others, in a fluid fun way. They learnt about emotions and how to express constructively. The mums were relieved to know that they were not alone in feeling frustrated and at times out of their depth with how to handle their son's emotions. We learnt about boundaries with our boys and our own triggers. We all felt very supported.

There were lots of moments of connection and fun. Many moments of clarity and affirmation. A highlight was certainly when we were treated to an intimate session with Maggie Dent. That was such a good afternoon! We learnt different techniques in how to talk with and help our sons through their wild feelings, and how to nurture ourselves too.

The whole experience was absolutely positive. Many friends expressed interest in being part of the course. Many more marvelled at what a wonderful program it is to be offered and how it would be sensational for this program to be available freely around the world. Change in the world starts in childhood with empowering ourselves to give voice to our feelings and mastery over them.

The Illawarra Women's Health Centre is making ground breaking positive changes, because when sons and mothers are bonded healthily, these boys will grow up to be emotional intelligent men. The Mothers and Sons program is simply marvellous, and I hope that it does grow to be available everywhere. I cannot sing the praises of this course enough. Jesse and I get along so much better now.

Thank you.

# PAINTING THE PICTURE

Domestic And Family Violence Statistics

OUR WORK

**1 in 3**

Australian women has experienced physical violence since the age of 15.

**1 in 6**

Australian women has experienced physical or sexual violence by current or former partner.

**1 in 4**

Australian women has experienced emotional abuse by a current or former partner.

**1 in 5**

Australian women has experienced sexual violence.

- One in four women (23% or 2.2 million) has experienced at least one incident of violence by an intimate partner. 82 % have never contacted the police.
- Domestic assaults rose by just over 6% in the last year. In NSW, domestic violence murders doubled over the last year to 38. Seven victims were children.
- Hospitalisation rates due to domestic and family violence have risen by 30% over the last 14 years. A woman is hospitalised every 2 hours in Australia. 1 in 12 is pregnant. Hospitalisation rates are the 'tip of the iceberg'.
- Research in Victoria shows that of the 16,000 Victorians who attended hospital over a decade due to family violence, 2 in every 5 sustained a brain injury (40%). 31% of victims of family violence attending Victorian hospitals over a ten-year period were children under the age of 15, and 25% of these children sustained a brain injury.
- Domestic and family violence is the most significant driver of homelessness: 72,000 women and 34,000 children sought homelessness services in 2016-17 due to domestic and family violence.
- Domestic and family violence contributes more than any other risk factor to the burden of disease for women 18-44 and represents 5.1% of the disease burden.

- The long-term impact of domestic and family violence on women's health includes mental health problems, suicide, reproductive health problems, an increased risk of chronic illness and pain, and a higher likelihood of drug and alcohol use and smoking.
- Domestic and family violence victims are 10 times more likely than others to experience legal problems, including a wide range of family, civil and criminal law issues.
- Domestic and family violence witnessed or experienced as a child can have serious lifelong consequence on your development and wellbeing. 65 % of women who had children in their care when they experienced violence by a current or former partner, reported that the children had seen or heard the violence.
- Women who as children witnessed partner violence against their parent were more than twice as likely to be subjected to partner violence themselves.
- For those who had experienced physical and/or sexual violence from a current cohabiting partner: 1 in 2 (46%, or 127,000) women never sought advice or support, reflecting the invisible domestic and family violence burden of disease.
- KPMG research found the cost to the Australian economy of domestic and family violence in 2015-16 was \$22 billion per year. This equates to approximately \$279 million per year in the Illawarra.
- In 2019, a Deloitte report found childhood abuse cost the Australian economy \$34 billion in one financial year. Nationally, 72,361 children were abused in the 2016-17 financial year. The cost to NSW is estimated to be \$11.2 billion.

**There is nowhere in the public health system, or across the community service sector, where women can access integrated, comprehensive long term support to recover from the health impact of this violence.**

## LOCAL RATES

### NSW

Rate per  
100,000 people

**382.4**

### WARILLA

Rate per  
100,000 people

**497.4**

### WARRAWONG

Rate per  
100,000 people

**996.9**

### BELLAMBI

Rate per  
100,000 people

**726.2**





## A Centre Initiative

# A LITTLE BIRD TOLD ME . . .

Our 'A Little Bird Told Me...' campaign is designed to reach out to women who may be experiencing violence and abuse in their relationships - but don't know where to seek help in the Illawarra.

The campaign was launched by Wollongong Lord Mayor Gordon Bradbury at the Sanity Salon in Warrawong and attracted significant media and community support.

We distributed over 2,000 small 'a little bird told me' cards with our contact details, that women can keep discreetly in their purses, handbags, or at home. It is critical that information does not alert a perpetrator to the act a woman may be seeking help, or planning to leave, as this can be one of the most dangerous times for a victim of violence.

These cards are available in places that are primarily used by women, such as hairdressing salons and

women's gyms. Women are encouraged to take the cards, and even if they can't or don't want to use the information immediately - we suggest they keep them in their purse or handbag, for when they or a friend or family member may need them. Research shows that 2 out of 5 women who experience domestic and family violence do not know where to seek help. These cards provide that information - having access to support services to escape or recover from such violence is highly beneficial, and may act as a catalyst for women to seek safety.

We are deeply indebted to local artist Anthea Stead for donating the artwork for this campaign as well as organising the printing of the cards for us.

This campaign is supported by Wollongong City Council and has been funded locally by a Club-Grant from The Illawarra Yacht Club.



1,840

CLIENT  
CONTACTS WITH  
OUR MENTAL  
HEALTH TEAM

## MENTAL AND SOCIAL HEALTH

Mental health increasingly dominates the disease burden for women.

**17.3% of women in NSW experience high or very high psychological distress [Health Stats NSW].**

The Seven Year Youth Mental Health Report, 2012 - 2018 (Mission Australia and Black Dog Institute) notes almost a quarter of young Australians are facing mental health challenges. That figure has increased from 18.7% in 2012 to 24.2% in 2018. Young females are twice as likely as young males to experience psychological distress, and this has increased from 22.5% in 2012 to 30.0% in 2018.

Between our generalist counsellors, social workers and psychologists we offer: individual counselling at the Centre, telephone counselling, crisis support, peer support groups, educative and therapeutic workshops and outreach to schools. Of utmost importance, our Centre is a safe space for women to come and simply be themselves and if they chose, part of a supportive community.



## A Centre Initiative

# THE ILLAWARRA DOMESTIC AND FAMILY VIOLENCE TRAUMA RECOVERY CENTRE

## Transforming support for women suffering from Domestic and Family Violence related trauma:

Domestic and family violence can have a serious impact on the long-term health of women and children. Research shows that left untreated, the traumatic consequences of domestic and family violence can have a lifelong physical and mental health impact, including increased rates of drug and alcohol use, heart disease, acquired brain injury, depression, suicide and chronic pain.

Domestic and family violence is a complex issue. Whilst there are many crisis intervention services, there is increasing recognition of the need for domestic and family violence services to go beyond this and address the ongoing impact of trauma, particularly in terms of the mental health, emotional and psychosocial needs of women and their families.

Women recovering from complex Post Traumatic Stress Disorder (PTSD) and PTSD caused by domestic and family violence may require a range of support services depending on their circumstances: counselling, social support, parenting support, financial advice and support and/or legal support. These services are most efficiently and effectively provided in one – safe – place, from a case managed team of professionals.

And yet, this is currently not available – anywhere. There is nowhere in the public health system, or across the community service sector, where women can access integrated, comprehensive long-term support to recover from the health impact of this violence. There is a limited range of short-term programs provided by different services (government and non-government) which are largely siloed and only available piecemeal to women, often at different times depending on the waiting lists, and their capacity to pay for services.

This makes it incredibly difficult for women to coordinate services (especially if transport is a problem), to have timely access to resources as well as being extremely stressful, which only exacerbates the trauma many women are struggling to cope with.

To combat this, we are proposing to establish the Illawarra Domestic and Family Violence Trauma Recovery Centre. This specialised Centre will offer a whole-of-organisation trauma sensitive approach that enables recovery from domestic and family violence trauma and helps to break the intergenerational cycle of violence. A range of holistic, and free, health, legal and psychosocial services will be provided.

The project will be the first of its kind in Australia and is designed to be easily replicated across the country.

## Impact

The Centre will be a key - and critical - service for GPs and mental health professionals to refer women diagnosed with domestic and family violence related trauma for appropriate, integrated and long-term support.

Strategically, the concept of the Domestic and Family Violence Trauma Recovery Centre aligns closely with the Fourth Action Plan for the National Plan to Reduce Violence against Women and their Children 2010–2022. Specifically, National Priority Five: improve support and service systems responses and its associated action to 'collaborate across services, sectors and workforces to ensure responses to women affected by domestic, family and sexual violence are coordinated, meet women's needs, avoid women having to retell their story and promote their recovery'.

It also speaks directly to the National Women's Health Strategy 2020-2030, and the key measures of success to 'reduce the gap in mental and physical health trajectories between women who have and have not experienced violence' and 'increase in number of services available, and women accessing these services'.

The Centre has the potential to be a circuit breaker not only in an individual woman's life but also for governments seeking to support a common sense, cost saving and compassionate service response. It is a unique and innovative proposal.

Support across all sectors affected by domestic and family violence has already been demonstrated in the Illawarra. In addition to Mayoral support from Wollongong and Shellharbour City Councils, 70 influential regional leaders from health, medical, judicial, law and order, multicultural and Aboriginal communities met on March 22nd to learn more about the project.

The high level Consultative Working Group formed after this meeting reflects this broad support. A Professional Advisory Group has also been formed and is comprised of a range of a domestic and family violence and trauma experts.

The Centre has formed working partnerships with King & Wood Mallesons (pro bono), Blue Knot Foundation, the Illawarra Legal Centre and Lifeline Southcoast. It is also supported by:

- Royal Australian and New Zealand College of Psychiatry
- Women's Health NSW
- DVNSW
- Waminda - South Coast Women's Health and Welfare Aboriginal Corporation
- Illawarra Women's Domestic Violence Court Advocacy Services
- Supported Accommodation & Homelessness Services Shoalhaven Illawarra
- Doctors Against Violence towards Women

The support has extended across Australia with strong media coverage, including through the Illawarra Mercury, WIN Network, and ABC News, as well as nationwide social media visibility.

We have established a research partnership with the UNSW School of Public Health and the University of Wollongong to drive the research agenda and establish the Centre as a leading innovative service.

# THE URGENT NEED FOR A WOMEN'S TRAUMA RECOVERY CENTRE

## Dr Karen Williams

**Psychiatrist, Illawarra Womens Health Centre Special Advisor  
and founder of Doctors Against Violence Towards Women.**

Having worked as a doctor for almost two decades now, I am deeply aware of the way health professionals and the rest of the nation respond to conditions that result in loss of life or loss of the quality of life. I am also familiar with the way the system is (mostly) designed to reduce morbidity and mortality rates of various conditions and how almost all treatments provided by the public system are undergoing constant and vigorous testing to ensure that they are relevant and safe. Domestic violence, as well as other forms of violence towards women, however, is different. Very different.

Whilst most of us have heard the infamous statistics, such as one to two women a week dying at the hands of their current or former partner and an even greater number of women are physically, emotionally, sexually or financially abused on a day to day basis, with estimates of a lifetime prevalence of violence being about a quarter of all women, many accept this as an unfortunate and static reality for which there is little we can do about. We don't tend to see violence towards women and its impacts as an issue that the medical profession is responsible for addressing. We advocate for low fat diets, reduced alcohol, smoking and other drugs, we advocate for hats, sunshirts and sunscreen, but we tend to keep silent about reducing violence in families.

Yet, the impact of sustained and repetitive trauma from abuse is one of the most underrated tragedies of today's society. In no other condition, which devastates so many people is there such a lack of recognition, resources or effective response from not just the health system but society as a whole. The effect of violence is not limited to the impact of the abuse itself on a victims physical and mental wellbeing, but also the impact on their ability to attain financial freedom, to raise her children in a safe environment, and to participate freely in society. The generational impacts of family abuse, such as increased poverty, lower educational attainment and increased criminal activity must also be considered. The social and economic

consequences are, put simply - enormous. Unlike cancer or diabetes - there is no Domestic Violence ward, no Family Abuse Centre, no Psychological Trauma department and I have never quite understood why it is up to womens groups to try and manage this insidious and destructive condition alone.

When Sally Stevenson approached me to become involved in the development of a Trauma Recovery Centre, I of course jumped at the opportunity. Finally, a revolutionary vision for a cohesive and holistic response to women who are experiencing the psychological and physiological impacts of violence! The gains to be had from this Centre are massive and far reaching. It is likely to be even more than we can even imagine. To me the Trauma Centre is about increasing society's acknowledgement of what it means to be a survivor of abuse, and to recognise the very specific needs this vulnerable population have. The mere existence of a Centre will allow us to start to tear away at the shroud of secrecy the envelopes families experiencing violence. Just as people are now generally aware of the risks of sun exposure due to the presence of the Cancer Council, people will become more aware of what domestic violence is, and will be more capable of finding the right sort of evidenced based help they require within a specialised hub such as the Trauma Centre. In addition to increasing the visibility of domestic and family violence, the Trauma Centre will be a Centre of Excellence, a place where women can expect to find the right treatments, legal information and access to relevant and trauma-informed support. It will be a place where research can be conducted to really qualify and quantify the true impact of family, domestic and sexual violence on society.

In the development of the Centre - domestic violence will be given the attention and response it deserves and in doing so will help break the cycle of violence that continues to penetrate generation after generation.



"It's kind of like when people adopt dogs and they say 'I didn't rescue the dog, the dog rescued me...' That's how I feel about the Centre. I thought I would come here and volunteer and give the Centre all of this help, but I've gotten more from here than I ever could have given." - Anna

## COMMUNITY GROUPS

Providing an inclusive and women's only space to meet, create and be healthy together is an important part of what we offer our community. Social isolation is a devastating driver of mental health issues, and often a consequence of Domestic and Family Violence. As a space that welcomes the building of community, we support women in ways that are deeply important to their social and mental health. We thank all our wonderful facilitators who make such a significant contribution to our community by volunteering their time and energy to run these weekly groups.

### **FIONA STEPHENS**

Singing & Musical Moments

### **LORRAINE MCKEW**

Gathering of Women

### **KIM SATTLER**

Aromatherapy

### **JUNE MORRIS**

Carers Support & Social Group

### **LYN YOUNG**

Craft

### **TAMARA CARMODY**

Strengthening & Conditioning Exercise Classes

### **TRACEY JAMES & LISA MOREY**

Yoga

### **MAUREEN OLIVER**

Quit Smoking Support Group

### **MARTA VENEGAS**

Tai Chi

### **MYRA SUCH**

Qigong

### **SUE REID & ELIZABETH BRANDIS**

Meditation

### **SUE REID**

Exercise

### **DEB SYKES**

Belly Dancing



"How wonderful to come in nervous about a breast lump and be treated so very kindly, thoughtfully and respectfully by Sharon and Louise. Thank you so much."

## SEXUAL AND REPRODUCTIVE HEALTH

In 2018-19 our support to women for their sexual and reproductive health included:

- Screening and referral for cervical cancer.
- Provision of a wide range of contraception options, including IUD.
- Counselling, information and management of fertility, pregnancy planning and pregnancy options to women.
- Free medical termination of pregnancy.
- Screening, assessment, diagnosis, treatment and referral for women who present for sexually transmitted infections, or other sexual and reproductive issues.
- Targeted outreach services for sexual and reproductive health, and breast awareness information and community education to vulnerable populations.
- Provision of a comprehensive program to treat urinary incontinence.
- Provision of group-based workshops or programs on menopause, continence, nutrition and stress management.

Our medical team consisted of a specialised Women's Health Nurse Practitioner (4 days per week), a practice nurse (2 days per week), and two doctors (1.5 days per week). During the year we treated over 4,000 presenting issues.

## MEDICAL TERMINATIONS

This year we are very pleased to report that, with the support of a wonderful team of doctors dedicated to the principle of a woman's right to have autonomous reproductive choice, we were able to provide medical terminations, free of charge to women of the Illawarra. The establishment of this service has met with nothing but support, which has been heartening.

Heartening, because at the same time, we had to maintain our strong and public advocacy position on the need to decriminalise abortion in NSW and vastly improve access to termination services in the Illawarra. We did this independently, and

"That abortion remains in the criminal code is not only outdated but also misogynistic. Our right to choose should not be a crime. Our sexual and reproductive rights are human rights - our bodies are not a place for negotiation and control." - Sally Stevenson

as part of the NSW Pro-Choice Alliance, led by the Women's Electoral Lobby and the inimitable Wendy McCarthy AO. The Alliance represents over 70 expert legal, health and community voices from across the state.

Abortion after 118 years – outrageously - remains in the NSW criminal code. Put simply, unless a Doctor can verify that continuing a pregnancy will have a material physical and psychological impact on a woman, then it is unlawful for that woman to have an abortion, and for a doctor to provide one. This fraught legal situation compounds the lack of accessibility to abortion services for women in the Illawarra: the public health system provides no service, there is one private provider, which for many women is financially prohibitive, and only a few female GPs offering medical terminations. This is not acceptable, when 1 in 4 women will seek an abortion at some time in life.

Recently, emerging and compelling research has brought to light the range and types of reproductive abuse and coercion experienced by women (often as part of a broader pattern of power and control) and has demonstrated inextricable links between reproductive coercion and sexual, domestic and family violence. Any denigration of unequivocal support for reproductive autonomy suggests a lack of genuine understanding in relation to the experiences and impacts of violence against women.

We will continue to advocate to the government, our political representatives, government services and the community for all women to have the support they need to make autonomous choices about their safe reproductive rights.



A Centre Partnership

## THE COMPASS TRIAL

In June 2019 we were invited to participate in the Compass Trial, a joint initiative between the VCS Foundation (Victorian Cytology Service) and Cancer Council NSW. It is a randomised controlled trial which aims to compare 2.5 yearly cytology based cervical screening with the 5-yearly primary HPV screening introduced in November 2017. We were delighted to be able to participate in such significant research.

The Compass Trial aimed to recruit 82,000 women across Victoria & South Australia from 2015. New South Wales was included in the trial from June 2019 to try to achieve the high participant requirement for the trial. Only six NSW practices took up the invitation to participate.

Participants will be followed up for a 5-year period by the VCS Foundation with information on participants from the Centre provided to us. They will return to the Centre for subsequent cervical screening according to the randomised control group that our participants had been allocated together at 2.5 years or at 5 years.

The Compass Trial is an important trial to support the introduction of primary HPV DNA testing and we are pleased to have been able to contribute.



## WARILLA OCCASIONAL CARE CENTRE

In July 2018, Warilla Occasional Care Centre extended its hours of operation and is now operating 8am to 5pm Monday to Friday. The increase to the hours of operation was a direct result of funding cuts from the Federal Government, by extending the hours of operation, it is anticipated that some income lost will be recouped. Many families have welcomed the increased hours of operation, as it has supported their needs.

A high number of the children who attend the service are from vulnerable families and have complex issues including developmental delays, speech delays and the inability to regulate emotions and behaviour as a result of trauma. Further to this 20% of children enrolled at the service have diagnosed disabilities. A significant investment in professional development has been made to upskill and increase the knowledge of the Educators to support these children and their families. Educators have attended training on trauma informed practices, Circle of Security, brain development, sensory processing and self – regulation.

The program which is implemented for children at the service is evidence based and delivers optimal outcomes for vulnerable children providing strong foundations for a successful transition to school.

To further support educators and children's understanding of the Aboriginal Culture the service took part in the Gumaraa Cultural Learning Program, 16 weeks of cultural immersion. Together, children and educators learnt to speak in the local language - Dharawal, participated in traditional Aboriginal dance, music and songs, listened to Dreamtime stories and explored art mediums.

# MEDIA HIGHLIGHTS

Our warmest thanks to ABC Illawarra Radio, the Illawarra Mercury and WIN NEWS for their constant support of the Centre, and women's health issues.

## ILLAWARRA MERCURY

MAY 15 2019 - 5:00PM

### Labor pledges \$1.5m for new one-stop Illawarra DV support service

Andrew Pearson



## ILLAWARRA MERCURY

JANUARY 21 2019 - 5:30PM

### UOW survey to question beliefs about domestic violence

Lisa Wachsmuth



## ILLAWARRA MERCURY

MARCH 14 2019 - 6:38PM

### Guide helps Illawarra workplaces prevent and respond to domestic violence

Agron Latiff



## ILLAWARRA MERCURY

5:00PM

OCTOBER 24 2018 -

### NSW is the last state where abortion is unlawful, and that needs to change

Lisa Wachsmuth



# SOCIAL MEDIA HIGHLIGHTS

OUR WORK

**+33%**

Our Facebook following has increased by 33% since 30 June 2019

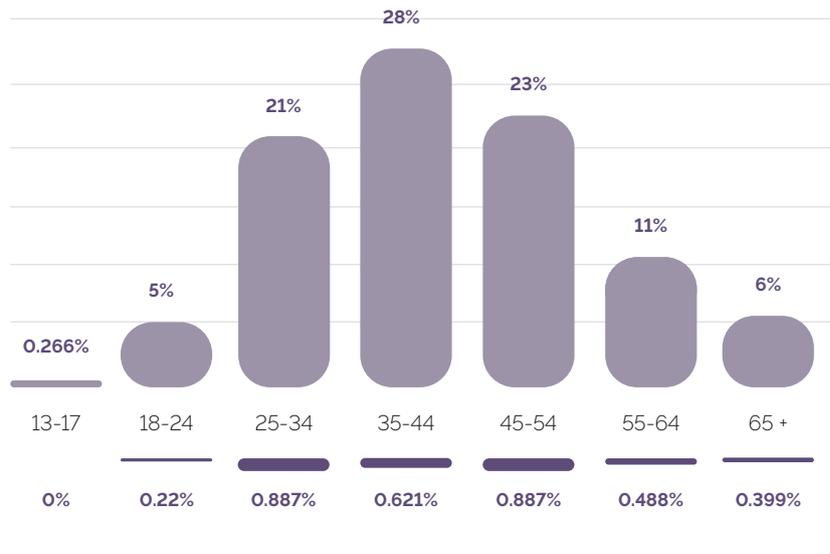
**+82%**

An increase of 82% in the number of people who saw our posts

Boosting our advocacy messages and increasing access to our health and wellbeing messages.

## FACEBOOK DEMOGRAPHIC

● Female Facebook Fans  
● Male Facebook Fans



Demographics profile of our Facebook users: we need to be mindful of the 55+ age group and our communications to them. As they are the fastest growing demographic experiencing homelessness and social isolation, this will be our challenge.

## FACEBOOK STATS

**Illawarra Women's Health Centre**  
Published by Grace Della · 20 February 2019

\*Just because women are getting all of these rights that men have always had doesn't mean we're above them.  
We're just trying to level the playing field - Max, High School Student.  
We are very excited about the future with young feminists like Max leading the way 🙌

**Performance for your post**

**1,664** People Reached

**211** Reactions, comments & shares

122 Like	49 On post	73 On shares
66 Love	28 On post	38 On shares
1 Wow	0 On post	1 On shares
17 Comments	9 On Post	8 On Shares
6 Shares	6 On Post	0 On Shares
301 Post Clicks		
32 Photo views	0 Link clicks	269 Other Clicks

**Illawarra Women's Health Centre**  
Published by Ken Selzer · 12 February 2019

Many thanks to the guys from the CFMEU - Mining Division who came and emptied our shipping container and filled a skip for us today! These guys are locked out of their workplace at the Port Kembla Coal Terminal and are offering help to local organisations as part of Uniontown solidarity

**Performance for your post**

**10,740** People Reached

**792** Reactions, comments & shares

564 Like	191 On post	373 On shares
118 Love	40 On post	78 On shares
2 Haha	0 On post	2 On shares
3 Wow	3 On post	0 On shares
1 Angry	0 On post	1 On shares
36 Comments	19 On Post	17 On Shares
69 Shares	69 On Post	0 On Shares
1,529 Post Clicks		
504 Photo views	1 Link clicks	1,024 Other Clicks



Our Centre works closely with other agencies to maximise the use of resources and achieve the best outcomes for our clients and the community. In 2018-19 the Centre actively partnered, networked and collaborated with the following services and organisations:

- The Shoalhaven Women's Health Centre and Waminda, South Coast Women's Health and Welfare Aboriginal Corporation.
- Women's Health NSW, DVNSW, the Illawarra Industry Group, and NCOSS.
- Illawarra Shoalhaven Local Health District, including the Women's Health Unit, Violence Abuse and Neglect Team, Child and Adolescent Mental Health Service, the HIV & Related Programs Unit and Drug and Alcohol Services.
- The Illawarra Committee Against Domestic Violence, Wollongong Women's Information Centre and SAHSSI (Supported Accommodation & Homelessness Services Shoalhaven Illawarra).
- Illawarra Legal Centre, Shellharbour Legal Solutions, Legal Aid and the Women's Domestic Violence Court Advocacy Service and the Illawarra Justice Partnership.
- Family Services Illawarra, Relationships Australia, Association of Relatives and Friends of the Mentally Ill (ARAFMI), Barnardos, Salvation Army, Mission Australia, the WaterShed and Family Planning Australia.
- NSW Young Peoples Sexual Health Advisory Council, Illawarra Shoalhaven Education Support Network.
- Five Islands College, Warilla High School, Lake Illawarra High School, Dapto High School, Woonona High School, Warrawang High School, Oak Flats High School, Albion Park High School, Koonawarra High School.
- Unanderra Community Centre.
- Greenacres Disability Service, People with Disabilities Australia, and the Disability Trust.
- Illawarra Multicultural Services and Multicultural Communities Council of Illawarra.
- Wollongong, Kiama and Shellharbour Councils.
- NSW Police - Lake Illawarra and Wollongong Local Area Commands.
- Centrelink and the Department of Human Services, and NSW Department of Family and Community Services, NSW Victims Services, and the Office of E-Safety Commissioner.
- Illawarra Women in Business and Illawarra Committee for International Women's Day,
- University of Wollongong and the University of New South Wales.

## In addition, we support local agencies by:

- Providing guest speakers and outreach opportunities.
- Attending local organisations and community agency events.

The value of these partnerships and relationships in significantly extending and multiplying the impact of the Centre cannot be overestimated. It is also important to acknowledge the time and resources it takes to maintain such relationships and make them both effective and efficient.

Last but not least, a thank you to our local representatives Gareth Ward, Anna Watson, Paul Scully, Ryan Park, Stephen Jones and Sharon Bird for their unwavering support.



## RESEARCH PARTNERSHIPS

This year we commenced two significant research projects with the University of Wollongong.

The first was a project on community attitudes to domestic and family violence within Shellharbour.

Research has identified that one of the key contributors to the continuation of domestic and family violence is violence-supporting attitudes: justifying, excusing, trivialising, minimising and blaming. If we can understand and change attitudes towards domestic and family violence, then logically this violence will decrease.

Surveys show in the last 10 years there has been no significant decrease in the prevalence of domestic and family violence nationally. Locally, it has increased by 2.7%.

To appreciate the distinctive characteristics and attitudes at our local level a community survey was distributed to 4,000 households in Lake Illawarra and Warilla. These two suburbs have the highest rates of domestic violence in Shellharbour LGA. The survey included attitudinal questions used in the National Community Attitudes towards Violence Against Women Survey (NCAS) as well

Delivering 4,000 surveys.

additional survey domains such as perceptions of the criminal justice system and beliefs about community capacity and engagement in domestic violence issues. In this way the survey results will be nationally comparable and will build in domains which are relevant for better understanding local communities.

Interviews were then undertaken with domestic and family violence service providers with the aim to understand and collate the expertise and experience of those working in the sector and providing support in the Lake Illawarra and Warilla suburbs. The interviews were based on an appreciative inquiry methodology which seeks to recognise strengths and good practice, as well as identify barriers to achieving community change. Finally, we held three community forums to talk about what the community strengths are, and how we can apply them to changing the attitudes identified in the survey.

With the results, we can create a public health campaign that will work intimately with the community and its key stakeholders to significantly improve the prevalence and incidence rates of domestic violence.

The project was funded by the Illawarra Shoalhaven Local Health District, the Shellharbour Workers Club and UOW, and is actively supported by Shellharbour City Council and Lake Illawarra Police.

The second project is an extension of the first project: we are working with Lake Illawarra High School and Warilla High School to understand young people's attitudes to domestic and family violence. Recent research shows, disturbingly, almost one in seven young Australians believe a man would be justified in raping a woman if she initiated sex but changed her mind. Almost one-quarter of young men think women find it flattering to be persistently pursued, even if they are not interested. At the same time, 92% of youth participants agreed that it is helpful to have young people leading the learning on respectful relationships.

We are working with the student leaders of Warilla and Lake Illawarra High Schools to understand student attitudes to domestic and family violence.

These student leaders sit on our project Steering Committee. They are smart, engaged, prepared, passionate, committed and articulate. They are the future leaders in our community, and they are inspiring. They want to change their community, they want to stop the violence and they have stepped up to work with us, the University of Wollongong, Local Police and Council to do so.

This is an Australian first project – a student led, designed and implemented family violence prevention strategy for their schools. The first part is a survey of students at both high schools to establish perceptions of domestic violence in their communities. We will survey the entire student body from both schools (up to 1400 students). Findings from the survey will be presented to the school community and students will be asked to self-identify if they would like to take part in stage two. In the second stage, the research team will facilitate focus groups in which students work with the research team to identify priority issues from the findings from stage one and to analyse the school community's strengths. Stage one will begin in November.

Domestic and Family Violence School Research Steering Committee.

"Only by understanding and then changing attitudes to domestic and family violence can we really make an impact in breaking the cycle of violence for this generation and the next."





## FINANCIAL PARTNERSHIPS

We are funded by the Illawarra Shoalhaven Local Health District and are deeply thankful for the support offered through grants and donations by the following organisations:



A very special thank you to Melinda James who so generously and graciously was, for the third year running, the MC for our annual dinner, the one and only Jane Caro for being our guest speaker, and the world class soprano Ayse Goknur Shanal for providing the most extraordinary musical experience. And to the very generous donors of raffle and auction items and all our wonderful supporters for making our annual fundraising dinner such a success – thank you.

A thank you to our local supporters and fundraisers who continue to provide whatever support they can, however large or small to the Centre. They are our backbone.

## TREASURER'S REPORT



I am pleased to report we had an excellent year financially. Importantly, we continued to enjoy a small but healthy operating surplus, amounting to \$18,612 this year. We increased our fundraising income by 70% from \$22,778 to \$38,262 reflecting community support for the Centre and enabling us to improve and expand operations and client services by increasing staff hours, with an associating increase is staff costs of \$28,780.

Our financial statements when matched with the diversity and scope of services and programs we offer demonstrate the Centre is highly cost effective and an excellent investment.

I'm proud to present these statements to the membership and the community.

### Key Financial Data

<b>Income</b>	799 779
<b>Expenditure</b>	781 167
<b>Surplus</b>	18 612
<b>Members Equity</b>	61 931 (8% of Income)

The full audited financial statements for the year ended 30 June 2019 are available on request.

**VI BLAZEVSKA**  
Treasurer

# FINANCIAL STATEMENTS 2018-19

Consolidated income and expenditure statement year end June 2019.

Income	2019	2018
<b>Grants</b>	608 386	571 354
<b>Medical Services</b>	78 551	102 499
<b>Donations</b>	24 293	35 612
<b>Fundraising</b>	38 262	22 778
<b>Fee For Service</b>	5 250	7 880
<b>Other</b>	4 2381	24 033
<b>Membership Fees</b>	32	55
<b>Interest</b>	2 624	2 333
<b>Total Income</b>	<b>779 779</b>	<b>766 544</b>

Expenditure	2019	2018
<b>Employment Costs</b>	566 387	513 173
<b>Program Costs</b>	44 036	29 349
<b>General Operating Expenses</b>	159 038	187 054
<b>Equipment, Software And Maintenance</b>	9 426	11 245
<b>Total Expenditure</b>	<b>781 167</b>	<b>724 862</b>

	2019	2018
<b>Operating Surplus/Deficit</b>	18 612	25 723
<b>Accumulated Funds Brought Forward</b>	43 319	17 596
<b>Accumulated Funds Carried Forward</b>	61 931	43 319

# BALANCE SHEET JUNE 2019

OUR FINANCES

Current Assets	2019	2018
Cash And Cash Equivalent	166 700	154 798
Trade And Other Receivables	15 792	4 208
Other Current Assets	1 471	3 287
<b>Total Current Assets</b>	<b>183 963</b>	<b>162 293</b>

Non Current Assets	2019	2018
Property, Plant And Equipment	33 159	24 224
<b>Total Non-Current Assets</b>	<b>33 159</b>	<b>24 224</b>
<b>Total Assets</b>	<b>217 122</b>	<b>186 517</b>

Current Liabilities	2019	2018
Trade And Other Payables	15 182	15 975
Short Term Provisions	69 031	75 858
Other Current Liabilities	54 448	46 389
<b>Total Current Liabilities</b>	<b>138 661</b>	<b>138 192</b>

Non-Current Liabilities	2019	2018
<b>Total Non-Current Liabilities</b>	<b>16 531</b>	<b>5 007</b>
<b>Total Liabilities</b>	<b>155 192</b>	<b>143 199</b>

Net Assets	2019	2018
<b>Net Assets</b>	<b>61,930</b>	<b>43 319</b>
<b>Equity</b>		
Retained Earnings	61 930	43 319
<b>Total Equity</b>	<b>61 930</b>	<b>43 319</b>

"This is the only place I know of and is safe to me, that I know I can come to and feel completely safe. Sometimes I need that."

Our feminist beliefs and this social view of health shape our approach to women's health and they underscore why our focus on marginalised and disadvantaged women and girls is so important. We are a nationally accredited community health service.

We are a feminist women's health centre. This means we understand and value women's life experiences and recognise the continued discrimination and structural inequality we face in our communities and Australian society. It also means we see an ongoing need for a gendered analysis and approach to health, the empowerment of women and girls and strong advocacy for gender equity and women's rights.

We embrace a social view of health, as framed by the World Health Organisation, and reflected in Australian federal and state health policies. This view recognises health status is shaped by the conditions in which people are born, grow, live, work and age. Factors such as financial security, affordable housing, education, employment, disability, racism, locational disadvantage, gender inequality and discrimination based on sexual identity and preferences impact individual health outcomes and cause health inequalities.

Our feminist beliefs and social view of health shape our approach to women's health and underscore why our focus on women and girls in marginalised and disadvantaged circumstances is so important.

We are a nationally accredited community health centre and are committed to excellence in service delivery and continuous quality improvement and learning, guided by national standards and research relevant to our field.





**ANNUAL REPORT**  
2018 - 2019