



Women's Health Initiative (WHI)

An Initiative of the Community Wellbeing Strategy 2008-2013

9243 8888

mvcc.vic.gov.au



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Moonee Valley City Council would like to acknowledge the support and expertise of the Community Wellbeing Reference Group, consisting of key local service providers and strong cross-council representation.

For more Information

Please contact the Community Development Department on 9243 8888



Purpose

The purpose of the Moonee Valley Women's Health Initiative (WHI) is to promote better social and health outcomes for women in Moonee Valley. This plan seeks to identify and address the specific health inequalities experienced by women within a Human Rights framework.

Background

In recognising the significant issues faced by women living in Moonee Valley, Council requested a report outlining the ways in which women's health and wellbeing is addressed in Council strategies, services and programs. Following a presentation from Dr Robyn Gregory, Chief Executive Officer, Women's

Health West, Council endorsed a report on women's health and wellbeing at its 21 July 2009 meeting. This report highlighted the work already occurring throughout Moonee Valley City Council and acknowledged the Community Wellbeing Strategy 2008 - 2013 as a comprehensive framework for Council and its partners to address health inequalities across the Municipality.

Following this report, Council requested that a specific women's health and wellbeing program be developed, the Moonee Valley Women's Health Initiative (WHI). The Women's Health Initiative is an initiative of the Community Wellbeing Strategy 2008 - 2013, ensures that the specific social and health issues faced by women are addressed in a co-ordinated, collaborative and targeted manner.

Introduction

Social and health risk factors

It is important to highlight the specific social and health issues that impact on women's health and wellbeing.

- The World Health Organisation reports that it is commonly accepted that addressing the health and wellbeing needs of women within any community has far reaching benefits for that community as a whole. It is also evident that addressing the social determinants of health relating to women specifically can have a positive effect on their families', their children and on the social and economic life of the broader community.
- Violence against women is caused by and also reinforces gender inequality and entrenched discrimination.
- Intimate partner violence is responsible for more ill-health and premature death in Victorian women under the age of 45 than any other of the well-known risk factors, including high blood pressure, obesity and smoking. (Vic Health 2004)
- Violence against women has massive economics costs. In Australia in 2002-2003, those associated with family violence alone were estimated to be \$8.1 billion. (Access Economics 2004, Vic Health 2007)

Health inequalities

It is widely accepted that many factors contribute to potentially poorer health outcomes for women and also the perpetuation of violence against women and family violence including:

- gender inequality and structural discrimination;
- inequitable power and resource distribution;
- access to economic and social opportunity;
- racism;
- disability;
- sexual orientation;
- geographical residence; and
- gender roles strengthened by social and cultural norms and expectations.

Additionally, that these factors exist in three spheres:

1. individual level;
2. organisational level; and
3. societal level. (Vic Health 2007)

Policy Context

International

The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) enshrines key principles of equality and an agenda for national action to end discrimination against women. It is based on the belief that basic human rights include the true equality of men and women. Aspects covered in the convention include: political participation; health; education; employment; marriage; family relations and equality before the law. It provides a comprehensive overview of and action plan to help governments achieve substantive equality for women.

The Universal Declaration of Human Rights from the United Nations sets out the human rights and fundamental freedoms to which all men and women, everywhere in the world, are entitled, without any discrimination. These inalienable rights encompass:

"respect for human rights and for fundamental freedoms for all without distinction as to race, sex, colour, language or religion, political or other opinion, national or social origin, property, birth or other status."

Australia is a signatory to a number of Human Rights instruments including:

- **The Convention on the Elimination of All Forms of Discrimination against Women, 1979.** Australia has also signed the option protocol for CEDAW, strengthening its approach and commitment to the rights of women.
- **The International Covenant on Economic, Social and Cultural Rights** sets out many rights including the right to housing, to a fair wage, to health care, to free primary education and to express your culture.
- **The International Covenant on Civil and Political Rights** sets out many rights including the right to vote, freedom of thought, freedom of religion, a prohibition on slavery and the right to fair trial.
- **The International Convention on the Elimination of All Forms of Racial Discrimination** prohibits race-based discrimination and provides a comprehensive action plan for governments to bring an end to discrimination based on race, culture and ethnicity.
- **The Convention on the Rights of the Child** sets out a range of rights for children.
- **The Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment** aims to end torture and other cruel, inhuman or degrading treatment and punishment. It also prohibits countries from returning anyone to a country where they might be tortured.
- **The Convention on the Rights of Persons with Disabilities** provides a comprehensive list of rights for people with a disability and the actions prescribed for Governments. (United Nations)



National

The Commonwealth is committed to protecting the rights of women. Some of the legislative tools used to protect these rights include:

- **Racial Discrimination Act 1975**, gives effect to Australia's obligations under the International Convention on the elimination of all forms of racial discrimination by protecting people across Australia from discrimination on the grounds of race, colour, descent, national or ethnic origin and immigration status.
- **Age Discrimination Act 2004**, makes it unlawful to discriminate on the basis of age in a number of areas of public life.
- **Sex Discrimination Act 1984**, prohibits discrimination on the basis of sex, marital status, pregnancy or potential pregnancy in a range of areas of public life.
- **Disability Discrimination Act 1992**, aims at eliminating discrimination against people with disabilities as well as ensuring equality before the law and promoting acceptance within the community of the fundamental rights of people with disabilities.
- **Human Rights and Equal Opportunity Commission Act 1986**, established the Australian Human Rights Commission, to make provision in relation to human rights and in relation to equal opportunity in employment and for related purposes.

The key prevention policy developed by the Federal Government regarding violence against women is **The National Plan for Preventing Violence against Women, 2009–2021**. This sets out goals and actions that attempt to address violence against women before it occurs. The National Plan embodies the recommendation set out in the 'Time for Action' Report.

State

In Victoria there are number of provisions established through legislation and through policy that serve to protect and promote the rights of women including:

Victorian Equal Opportunity and Human Rights Commission has responsibilities under three laws:

- **The Equal Opportunity Act 1995**
- **The Racial and Religious Tolerance Act 2001**
- **The Charter of Human Rights and Responsibilities (The Charter)**

These laws protect the community's rights by making discrimination, sexual harassment and religious vilification against the law. The Charter ensures that government and public authorities, such as Moonee Valley City Council, must consider human rights when making decisions and providing services.

Victorian Women's Health and Wellbeing Strategy 2006–2010. The focus of the Strategy is disadvantaged women with three priority action areas identified including:

- Mental health and wellbeing;
- Sexual and reproductive health; and
- Social connectedness.

10 Point Plan for Victorian Women's Health 2010–2014. The plan has been developed by Victorian women's health services. The 10 point plan builds on the 2006 Women's Health Matters: From Policy to Practice—Setting an Agenda for Victorian Women's Health document. The plan calls for a whole

of government strategy and action plan for improving women's health that is aligned with emerging state and national policies.

Vic Health has produced numerous reports that have outlined the social determinants of violence against women, the economic cost to the community of this violence and the evidence for preventative actions and strategies. Preventing Violence Before it Occurs, 2007, sets out a framework to assist in planning prevention.

The framework suggests that the prevention of violence against women should be guided by three interrelated themes:

- Promoting equal and respectful relationships between men and women;
- promoting non-violent social norms and reducing the effects of prior exposure to violence; and
- Improving access to resources and systems of support.

A Right to Respect, Victoria's plan to prevent violence against women 2010–2020, builds on the foundations provided by Vic Health and the Charter of Human Rights and Responsibilities. The Plan will include policies and initiatives across five key 'settings', where strategies will be targeted:

- Education;
- Local Government, Health and Community Services;
- Sports;
- Workplaces; and
- Media, Arts and Popular Culture.



Western Region

Council is a key participant in the development of a Western Region Plan for preventing Violence against Women. Council is working in partnership with five other local governments and key service providers including Western Health and Women's Health West to produce a regional plan for action.

Some of the early themes of the plan include:

- Social justice;
- Access to resources and systems of support;
- Promoting no-violence norms and equal and respectful relationships between men and women; and
- Women in leadership and decision making to support prevention.

Women's Health West provide advocacy, leadership and direct service to women in the West; their identified priorities include:

- Equity and social justice;
- Sexual and reproductive health; and
- Mental wellbeing and social connectedness.

Local

The Moonee Valley Women's Health Initiative aims to integrate many existing policy and plans, as well as proactively linking into new directions and trends locally and internationally. The WHI reaffirms the rights of women in our local community.

MV2020 'Living together, living well' Community Vision

The Moonee Valley Women's Health Initiative promotes the MV2020 'Living Together, Living Well' Community Vision by supporting activities which 'create and sustain healthy, safe and active communities.'

Council Plan 2009 - 2013

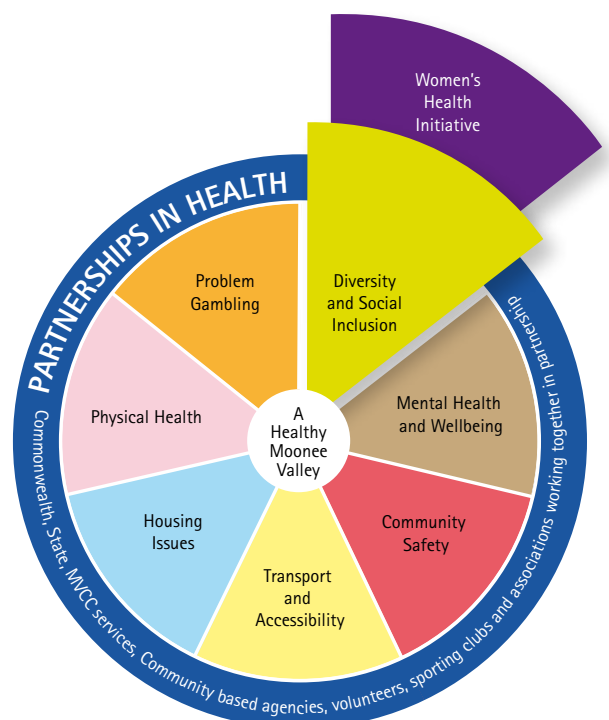
The 2009-2013 Council Plan highlights Council's intention to 'value the diversity and social inclusion of its community by facilitating the wellbeing of its citizens through providing access to a range of quality services and facilities and encouraging participation in community life.' Council achieves this by planning for and promoting a diverse, accessible and inclusive community.

Community Wellbeing Strategy 2008-2013

The Moonee Valley Community Wellbeing Strategy (CWS) is the comprehensive framework developed to address social and health inequalities across our Municipality. The WHI has evolved from the Community Wellbeing Strategy's first key priority area: Diversity and Social Inclusion.

- Women have been identified as a 'priority community' throughout the strategy.
- The Community Wellbeing Strategy remains the vehicle that influences and informs many strategies across Council. The Women's Health Initiative (WHI) will further integrate the collaborative, human rights and social inclusion based approach of the CWS.

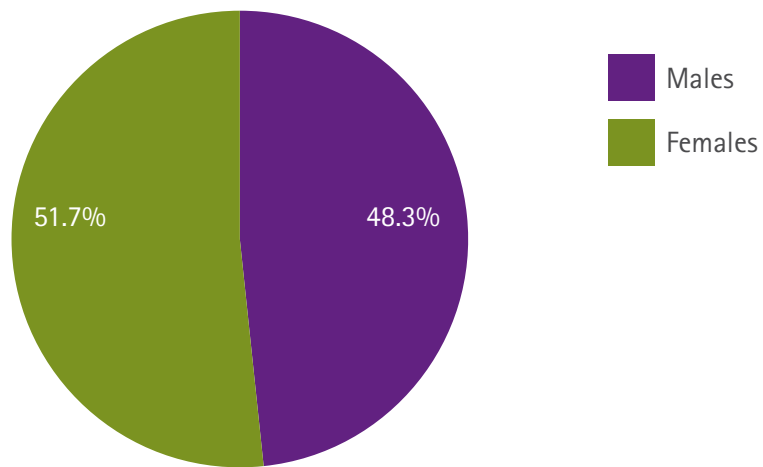
Community Wellbeing Strategy 2008-2013 key priority areas:



Snapshot

Women in Moonee Valley: Population by sex in the City of Moonee Valley

Based on 2006 census data, there are around 52,200 females residing in the City of Moonee Valley. The Municipality has a slightly higher proportion of females (52%) than males (48%).



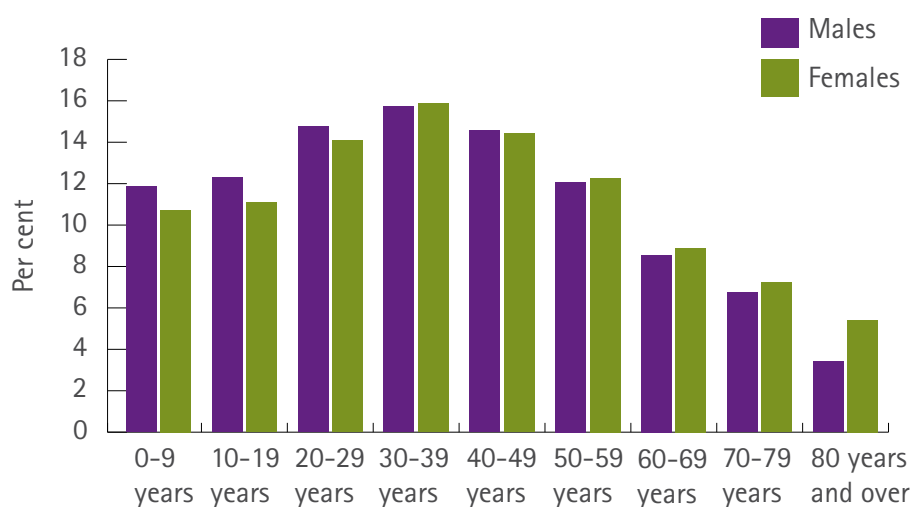
Source: ABS 2006 Census data abs.gov.au





Population by age by sex in the City of Moonee Valley

The most noticeable difference in the ages of residents in the City of Moonee Valley is the greater proportion of females aged over 80 years, accounting for 5.4 per cent of the population compared with only 3.4 per cent for males. Conversely, there are a slightly greater proportion of males aged less than 29 years.



Source: ABS 2006 Census data abs.gov.au

*Note: Data includes North Melbourne and Kensington

Indigenous population

Based on the last census, around 0.3 per cent of the female population indicated they were of Aboriginal or Torres Strait Islander origin. This is consistent with the Melbourne Statistical Division of 0.4 per cent.

Country of birth by sex in the City of Moonee Valley*

The most common country of birth (other than Australia) for both males and females (according to 2006 census data) is Italy. It is worth noting there are a slightly higher proportion of females from Viet Nam and China than males. Conversely, there are a lower proportion of females born in India.



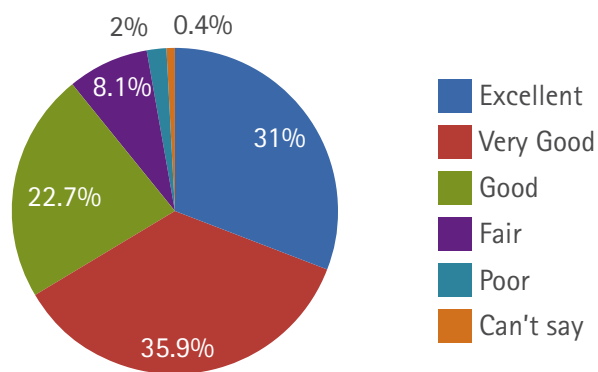
Source: ABS 2006 Census data abs.gov.au
Note: Data includes North Melbourne and Kensington





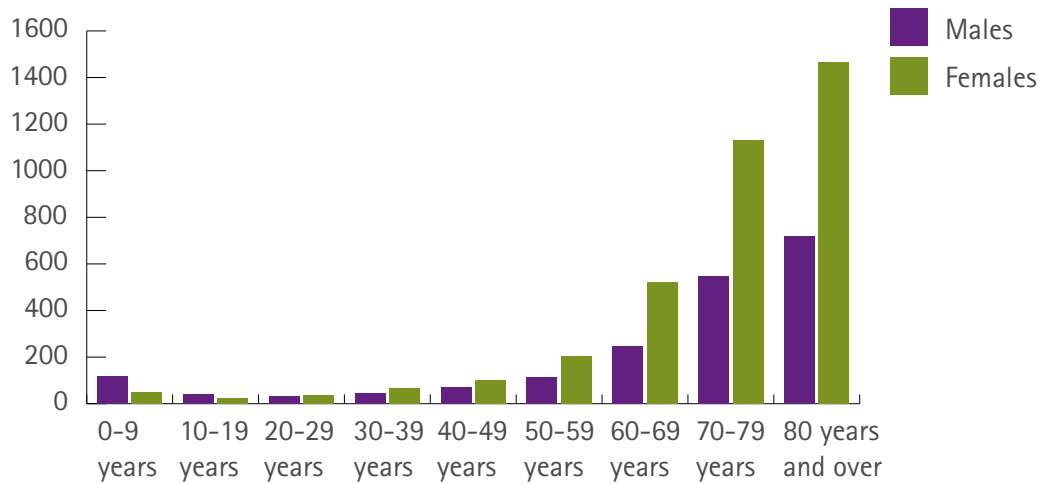
Self-assessed health

In the 2009 household survey, residents were asked to rate their general health. Over two thirds (67 per cent) or girls/women rated their health as either very good or excellent. Around 2 per cent of female respondents indicated their health to be poor.



Source: Moonee Valley Household survey 2009

Home and Community Care Clients



Source: HACC

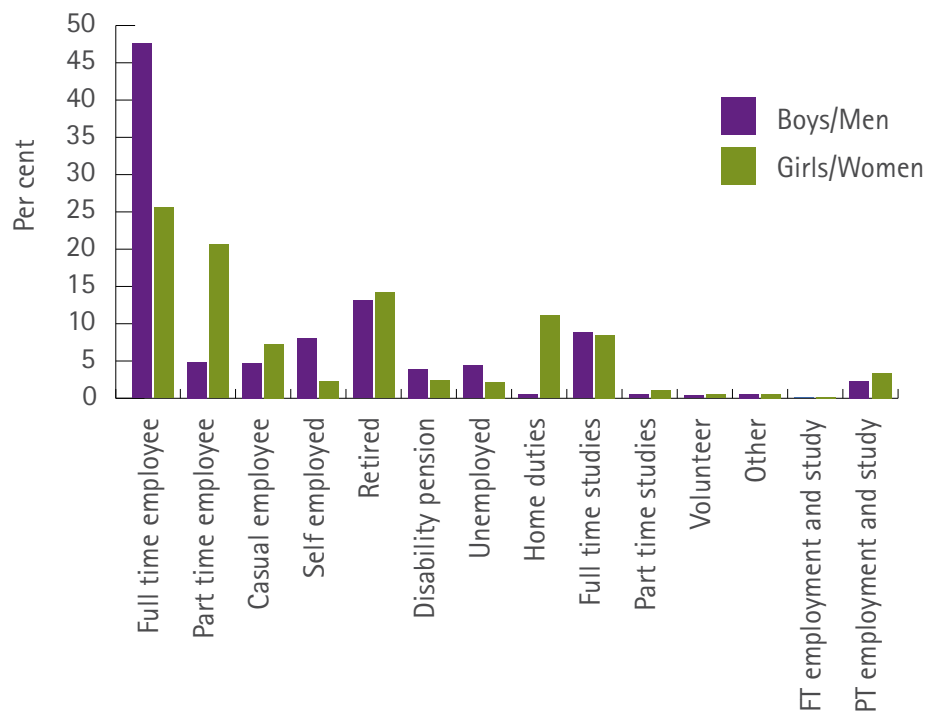
Not surprisingly the number of females receiving HACC services increases with age but what is perhaps more surprising is the number of females receiving HACC services is almost double that of males.





Employment status

In the 2009 household survey, residents were asked their employment status. Females were much more likely to be employed part time (21%) or in home duties (11%) and less likely to be employed full time (26%) than their male counterparts.

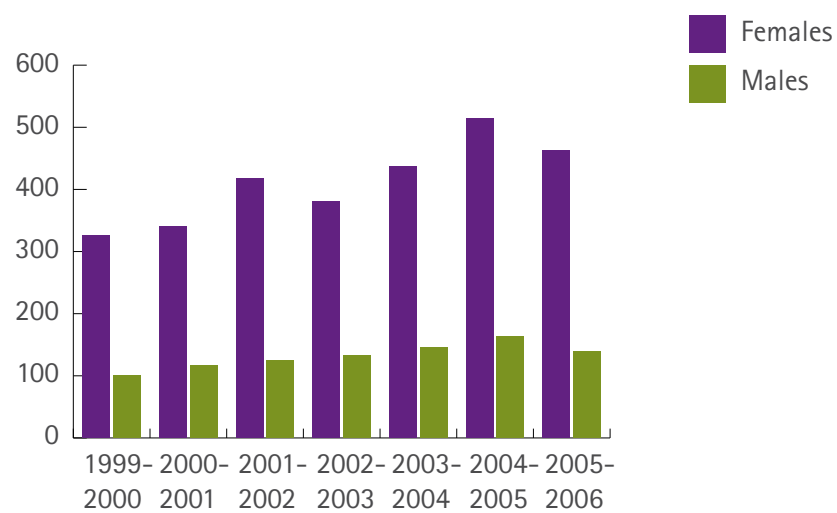


Source: Moonee Valley Household Survey 2009



Aggrieved family members Moonee Valley, Victoria Police data

Female family members were around three times more likely to be the victims of a family violence incident. This ratio remained relatively consistent between 1999 and 2006. The number of family violence incidents reported to the police has trended upwards over time. This may be indicative of better reporting mechanisms.

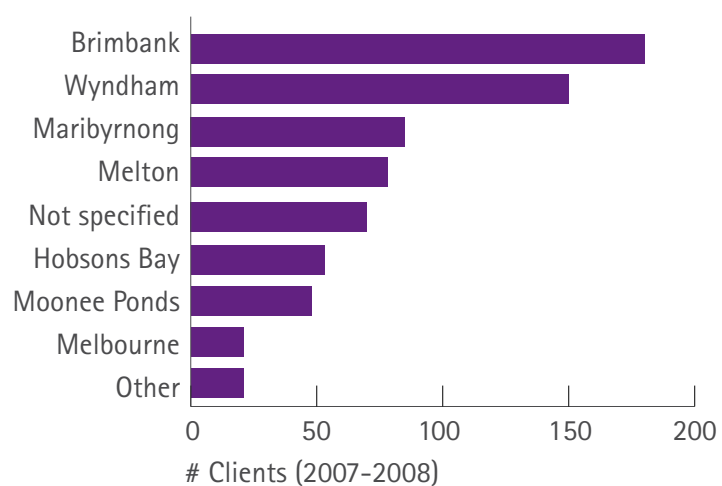


Source: Victoria Police Data



Women's Health West – clients by Local Government area

Across the Western region, the number of women accessing family violence services through Women's Health West has increased each year since 2003, which may show an increased awareness for the service. In Moonee Valley, around 50 women were assisted by Women's Health West in 2007 and 2008.



Source: Women's Health West whwest.org.au/docs/WHWAnnualReport0708.pdf



Women's Health Initiative – Key Priority Areas

The WHI has been underpinned by the research and findings from the Community Wellbeing Strategy 2008 – 2013 and Council's relationships with local women and service providers. The Women's Health Initiative has a strong alignment with the internal strategic directions of Council and other identified regional priorities.

The key priority areas for the Moonee Valley Women's Health Initiative are:

- 1. Women's Wellbeing**
- 2. Women's Safety**
- 3. Equity for Women**



Policy Statements

In Partnership with local women, government and non-government sectors Council will:

Women's Wellbeing

- Provide and advocate for the rights of women to access services and programs that support and enhance their wellbeing;
- Actively seek women's participation in decision making processes that affect their lives;

Women's Safety

- Support the rights of all women to live lives free from violence and the fear of violence;
- Work towards creating safer spaces, promoting respectful relationships, activities and communities for women; and
- Lead preventative actions in response to violence against women across the City of Moonee Valley.

Equity for Women

- Demonstrate leadership by enshrining the rights of women to access opportunities within Council and across the Municipality in its policies, programs and services; and
- Support women's leadership and build a workplace culture that protects gender equity.

Settings for Action

Evidence suggests that in order to address the social determinates of violence against women and other significant health risk factors, a targeted and strategic approach is required. The National and State Plan identify setting for action. The Vic Health *Framework to guide prevention of violence against women* also emphasises the importance of identified settings and sectors.

The WHI has identified a number of local key settings for action:

- Moonee Valley City Council workforce and workplaces;
- Council owned facilities and assets;
- Council funded and supported centres, activities and events;
- Council run services and programs;
- Sporting clubs, associations, venues and events;
- Local primary and secondary schools;
- Local businesses; and
- Community.

Priority Women

The WHI has identified particular groups of women that are most at risk of poorer health outcomes living in Moonee Valley.

- Women experiencing social and economic disadvantage;
- Women from culturally and linguistically diverse backgrounds;
- Women with a disability;
- Pregnant women and new mothers;
- Women from Aboriginal and Torres Strait Islander backgrounds;
- Young Women;
- Older women living on their own;
- Sole parents; and
- Lesbian, bi-sexual and transgendered.





Evaluation and Review

The Women's Health Initiative Action Plan will be reviewed and updated annually in line with the annual review of the Community Wellbeing Strategy 2008 – 2013.

A range of 'Community Wellbeing Indicators' which contain relevant wellbeing data have been developed to support the evaluation of the Community Wellbeing Strategy. Data will be gathered annually from a number of sources including the Moonee Valley household and community satisfaction surveys. Each year, for the life of the strategy, information will be monitored, updated and made available to the community.

Moonee Valley Language Line

عربي	Arabic	9280 0738	Ελληνικά	Greek	9280 0741	Español	Spanish	9280 0744
中文	Cantonese	9280 0739	Italiano	Italian	9280 0742	Türkçe	Turkish	9280 0745
Hrvatski	Croatian	9280 0740	Somali	Somali	9280 0743	Việt-ngữ	Vietnamese	9280 0746

All other languages 9280 0747

TTY 9243 9170

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