

Women's Health Victoria Annual Report



08-09



Women's Health Victoria 'knowledge into action'

Our Vision

A society that takes a proactive approach to health and wellbeing, is empowering and respectful of women and girls and takes into account the diversity of their life circumstances.

Our Strategic Goals

- Keeping gender on the agenda.
- Promoting women's health knowledge.
- Targeting health inequality.
- Fostering an effective, healthy organisation.

Our ways of working are guided by four principles

- We work from a feminist framework that incorporates a rights-based approach.
- We acknowledge the critical importance of an understanding of all of the determinants of health and of illness to achieving better health outcomes.
- We understand that the complexities involved in achieving better health outcomes for women require well-considered, forward-thinking, multi-faceted and sustainable solutions.
- We commit to 'doing our work well'; we understand that trust and credibility result from transparent and accountable behaviours.

Published October 2009
Women's Health Victoria
Level 1, 123 Lonsdale Street
Melbourne VIC Australia 3000
T (03) 9662 3755
F (03) 9663 7955
E whv@whv.org.au
W www.whv.org.au
Postal Address
GPO Box 1160
Melbourne VIC Australia 3001
Reg. No. A0029795W
ABN 33365284944

Written by Rachael Harris with contributions from Marilyn Beaumont, Petra Begnell, Rosemary Sexton, Jill Exon, Di Missen, Justine Dalla Riva and other Women's Health Victoria staff, and Council and WHV members.
Editing and production management by Rachael Harris.
Photos by Vicki Jones, except where otherwise credited.
Design by Neale Mar.
Proofreading by Sandra Padova.
Printed by Work and Turner.
Printed on Harvest Recycled stock (60% recycled sugar cane).

About this report

This 2008–09 *Annual Report* aims to tell stories that represent the highlights of Women's Health Victoria's work for the year. Much of our health promotion work is done in collaboration and a significant part of what we do is about influencing policy and helping to change attitudes, practices and cultures. It is difficult to illustrate these changes, especially given that they are often incremental. We could list the meetings we've attended, briefing papers we've produced and the number of users of BreaCan or of the Clearinghouse but that's only a part of the story. This year's report presents stories that celebrate our collaboration with others.

This report is also available on our website at www.whv.org.au

Cover: On the 10th October 2008 the Victorian Government passed the Abortion Law Reform Bill 2008, decriminalising abortion. This was the culmination of decades of work, and in particular four years of intensive, co-ordinated work to remove abortion from the Victorian Crimes Act and have it recognised as a safe, legal and accessible health service.

Photograph digitally altered.

Contents

Chairperson's message	2
Executive Director's message	2
Meet our Council	3
Meet our staff	4 & 5
Working towards capacity building	6
Creative therapies benefit women finishing cancer treatment	7
Policy and health promotion work	8 & 9
Working towards a funded national policy	10
Moving forward with clarity	11
The year in review	12,13,14 & 15
How Women's Health Victoria works	16 & 17
Meet a Council Member	17 & 19
The work of our Council	18 & 19
Membership	20
Meet a Member	20 & 21
Thank you to our donors	21

Financial Statements

Summary of Financial Results	22
Income Statement	23
Balance Sheet	23
Cash Flow Statement	24
Statement of Recognised Income and Expense	24
Notes to the Financial Statements	25
Statement by Members of the Council	32
Notes to the Financial Statements	32
Independent Audit Report to the Members	33





Chairperson's message

The past year has been extraordinary for Women's Health Victoria. The enormous amount of advocacy work in partnership with other organisations was rewarded with the passage of the Abortion Law Reform Bill in late 2008. The commitment and tireless work of staff members was exceptional. The celebratory event in December 2008 was memorable with a moving speech from the Honourable Joan Kirner.

The launch of the Index of Women's Health and Wellbeing website in July 2008 by Minister Maxine Morand was another highlight. The initial success of The Index, with more than 2000 visits to the site from people across 30 countries within three months, has continued.

An emphasis on strategic planning has seen the development of a new three-year strategic plan for the organisation. Council Members have embraced governance with enthusiasm, returning to the organisation an armoury of new ideas, helping WHV to become a stronger organisation.

It is satisfying for WHV to see the Victorian Women with Disabilities Network (VWDN) become independent at the end of this financial year. This is a huge achievement for VWDN following a partnership agreement with WHV from 2005 to 2009.

BreaCan has continued to innovate in relation to service delivery with positive new initiatives including art therapy, music programs and the development of a new website. A weekend away with Camp Quality for some families regularly involved with BreaCan was a rewarding experience.

The health promotion team has continued to manage a diversity of projects, rising to the challenge and contributing to increased awareness of violence against women, sexual and reproductive health, and other priority health issues.

The health of an organisation such as WHV is important for its continued success in achieving organisational objectives and a new project, 'Developing Our Preferred Culture Together at WHV' was initiated.

I would like to congratulate Marilyn and her staff and Council Members for this year's enormous achievements. I would also like to thank the outgoing Chairperson, Liz Chatham, and Deputy Chairperson, Cathy Mead, and all members of Council for their support during the past year. I would also like to thank members of WHV for their continued support.

Louise Johnson
Chairperson

Executive Director's message

Another amazing and productive year in progressing women's health has passed. Though it was a year of some tough times and difficult work, the achievements were big.

After four years of intensive work to remove abortion from the Victorian Crimes Act and have it regulated as a health service, this was achieved on the memorable night of the 10th October 2008. We, along with a multitude of organisations and individuals, set out to have abortion recognised as a safe, legal and accessible health service. Being present in the Victorian State Parliament, listening to the debate and then witnessing the vote in support of an unamended Abortion Law Reform Bill was stunning.

We finished the year with the final stage of our work in partnership with the Victorian Women with Disabilities Network (VWDN). This work started in 2003–04 when WHV identified women with disabilities as one of the priority groups to work with and in 2005, developed a partnership agreement with VWDN for organisational capacity building and advocacy service development.

On the 1st July 2009, VWDN took over fund holder responsibility and became wholly accountable for the funds and delivery of the service while remaining co-located with WHV. This goal has been achieved after six years of complex work by many people and is a unique example of collaborating to create sustainable ways and means for the voices of marginalised women to be heard on issues of importance to their health and human rights.

In all our work we have made full use of WHV Members; those individual women and organisations who wish to be kept informed and take well-informed action on women's health issues. As of the 30th June 2009, WHV had 209 members. We have received an unprecedented amount of positive feedback this year from members about the action that has been taken to include them in our work.

My thanks to the highly effective, multi-skilled and interdependent team of women, that is the WHV staff and Council. Particular thanks to the women active in the VWDN, BreaCan volunteers, WHV members and the individuals within organisations that we have worked with to deliver this year's achievements.

Marilyn Beaumont
Executive Director

Meet our Council



Louise Johnson
Chairperson
CEO, Infertility Treatment
Authority



Cathy Mead
Deputy Chairperson
Adjunct Associate
Professor,
La Trobe University



Bente Jansen
Treasurer
Manager, Aged Persons
Mental Health,
Broadmeadows



Suzanne Young
Director of Executive
Education, Associate
Professor, Graduate School
of Management,
La Trobe University



Julie Mulvany
Professor and Deputy
Dean, Faculty of Life
and Social Sciences,
Swinburne University



Sally Fawkes
Senior Lecturer,
School of Public Health,
La Trobe University



Annabel Pollard
Clinical Psychologist,
Clinical Research Fellow,
Peter MacCallum
Cancer Centre



Helena Maher
Co-ordinator,
Advocacy & Diversity,
The Women's



Kym Daly
National Ethics Officer,
Australian Association of
Social Workers



Lyn Allison
Former Senator and
board member of various
health-related not-for-profit
organisations

Meet our staff



Marilyn Beaumont
Executive Director



Rosemary Sexton
Business Manager



Vicki Ayers
Organisational &
Administration
Support Officer



Beverley Murphy
Organisational Information
Support Officer



Petra Beggell
Policy & Health
Promotion Manager



Rose Durey
Policy Officer



Rebecca Yeats
Health Promotion Officer



Pam Rughla
Health Promotion Officer



Di Missen
BreaCan Manager



Helen Shepherd
BreaCan Services &
Volunteer Co-ordinator



Justine Dalla Riva
BreaCan Project Officer



Fiona McRae
BreaCan Project Officer

Meet our staff



Rosie Craven
Accounting Administration
Officer



Jenny Ward
Clearinghouse Information
Officer



Jill Exon
Project Officer, VicHealth
Preventing Violence
Against Women Project



Nicole Wilton
BreaCan Information &
Support Officer



Wendy Pullan
BreaCan Information &
Support Officer



Katherine Bradstreet
BreaCan Administration
Officer

Victorian Women with Disabilities Network Advocacy Information Service (VWDN AIS)

From the 1st July 2009, as part of the transmission of business arrangements with the WWDN (see story on page 6), Keran Howe, WWDN Executive Officer, and Sarah Boyd, WWDN Information & Administration Officer, became employees of the WWDN. Kate Hood, WWDN Policy Officer, resigned in June 2009. We sincerely thank them for their service during their time as WHV employees.

We would like to thank the casual staff who worked with us during 2008–09:

Judith Armstrong, Bernadette Brennan, Andrea Main, Karolyne Quinn, Kerrilie Rice, Kath Deakin.

We would like to thank staff who left WHV during 2008–09 for their contribution:

Trish Bolton, Katie Cherrington, Jenny Ejlak, Brigitte Gerstl, Tracey Hanna, Jeanette Liebelt, Gabrielle O'Brien, Melanie Thomson.

Working towards capacity building

Working collaboratively and building capacity, both within and outside the organisation, are key ways Women's Health Victoria works to bring about systemic change.

'Women's Health Victoria: Strategic Directions 2009–2012' states: "We understand that systemic change is not achieved in isolation but requires co-ordinated and collaborative effort. We will actively foster and maintain diverse relationships that promote shared focus and joint effort. We will provide mentoring and support to groups and organisations involved in women's health promotion and advocacy".

On the 1st July 2009, the Victorian Women with Disabilities Network (VWDN) took over fund holder responsibility and became wholly accountable for the funds and delivery of the service. Under the new one-year agreement the VWDN will remain co-located with WHV.

WHV Executive Director, Marilyn Beaumont says: "This goal has been achieved after six years of complex work by many people and the work that has been done in conjunction with the VWDN to build capacity will enable the organisation to be in control of its own destiny".

"The strength of the VWDN is around its advocacy work and the way it works at the systemic level. It has been a great achievement that the VWDN has selected priority areas to work on, in a deep and meaningful way over a significant period of time, to make a real difference that lasts." The VWDN has been highly visible and connecting with key people, says Marilyn.

VWDN is one example of WHV's capacity building with others.

Business Manager, Rosemary Sexton, says there are more than 20 examples of WHV providing support to a wide range of organisations in the past year and helping to build capacity.

"There are more than 20 examples of WHV providing support to a wide range of organisations in the past year and helping to build capacity."

- WHV Business Manager, Rosemary Sexton

Rosemary says services and organisations come to WHV "because they know we have good systems in place, a good reputation and know if we didn't have the experience we would know where it could be found. WHV's work is thorough and other organisations trust it and build upon it".

Over the past year WHV has provided support to Women's Health East (WHE) to assist it to continue as an independent regional women's health service through an agreed partnership agreement.

Chairperson of the WHE board, Marg D'Arcy says: "During 2008–09 WHE went through a major transition and was without a chief executive officer (CEO) for an extended period of time. Within the partnership agreement, WHV supported WHE to strengthen capacity to operate as an independent service, develop infrastructure and lay a foundation for working collaboratively."

Marg says: "The support that WHV provided was both practical, in arranging for someone to take on our finances as well as providing policy and general, in terms of organisational advice, and lots of encouragement and reassurance to the Board that we were heading in the right direction. The work that we did in partnership with WHV enabled WHE to re-establish itself as a viable and visible presence in the region with a new CEO and a clear strategic direction".

Marilyn says: "From the outset we said we were willing to help. WHV's interest was the health of the women's health services sector with strong, regional, independent women's health services being critical to that".

WHV has also continued and extended its work with the Australian Women's Health Network (AWHN). In August 2008 WHV took on the secretariat role for AWHN and responsibility for the organisation's mail, email, membership database and newsletter distribution.



The Victorian Women with Disabilities Network (VWDN) Executive Officer, Keran Howe, and VWDN Information & Administration Officer, Sarah Boyd.

Creative therapies benefit women finishing cancer treatment



Members of the 'Our Voices Our Songs' project with the Royal Melbourne Hospital's Senior Music Therapist, Emma O'Brien, (playing guitar) performing songs at the launch of the CD.

A successful music therapy program for women who had recently completed treatment for breast or gynaecological cancer has been trialled by BreaCan. The use of creative therapies is part of BreaCan's holistic approach to providing support and information to people affected by breast or a gynaecological cancer.

BreaCan Manager, Di Missen, says the aims of the 'Our Voices Our Songs' project included "providing an opportunity for participants to connect with other women about what they have been through and a chance to explore ways of emotional healing through music".

Di says the period after completion of treatment is a transitional time, which is often difficult for women: they can feel isolated after the formal contact with their medical team finishes and they often reflect on the impact of a cancer diagnosis on their life and future priorities.

The 16 women involved in the two, five-week programs, wrote words and music about their cancer journey and recorded a CD showcasing the songs. It was launched in front of family and friends.

The project was a collaboration of BreaCan, the Royal Melbourne Hospital, The Women's and Western Health through the Western Hospital.

The music program was facilitated by Senior Music Therapist at the Royal Melbourne Hospital, Emma O'Brien. Emma's involvement was critical to the program's success as it required a skilled therapist who could not only engage the participants musically, but also encourage them to explore the impact of cancer through the creative process of song writing and singing.



Emma says: "Much of the value of music therapy is in the ripple effect; the idea that what you are doing in the space has a life beyond the therapeutic session. Women might want to write or share their song with family and friends. They are empowered to take it forward in their own way".

The music program was run at the BreaCan resource centre, a safe and welcoming place away from the hospital environment. It also meant that during the program, women could browse the information available and become more familiar with what BreaCan provides.

The women who participated said they felt their own thoughts, feelings and experiences had been validated by writing their songs and sharing them. As one woman said: "I met a lot of wonderful people and I don't feel alone any more. We were able to share experiences through laughter, conversation and then music".

Over the past year BreaCan has run other creative therapies such as art therapy and creative writing, utilising professional facilitators to maximise the benefits to women.

The first creative therapy sessions run by BreaCan were in 2004 and says Di: "BreaCan will continue to recognise and promote the role of creative therapies as one way for women to explore the profound impact of cancer on their lives; but in a way which is gentle, fun and inspiring".

Policy and health promotion work

Campaign achieves decriminalisation of abortion

The passing of the unamended Abortion Law Reform Bill 2008 by the Victorian Government on the 10th October 2008 was the culmination of four years of intensive work to remove abortion from the Victorian Crimes Act. It is now recognised as a safe, legal and accessible health service.

Women's Health Victoria Executive Director, Marilyn Beaumont, says: "Leading up to the passing of the Bill, WHV continued to resource and co-ordinate the combined activity on behalf of eight Victorian women's health services. WHV was consistently present and legitimately involved through the strength of evidence-based resources."

"During the Parliamentary debate, WHV was analysing the discussions, developing fact sheets and responding to Members of Parliament's (MP) requests for more information in helping them to shape their speeches."

"WHV staff, members and members of Victoria's women's health services were present in the Parliament during the debate, which was an amazing thing to see and be part of. It also gave legitimacy to the role of women's health services."

A celebration was organised by WHV and all MPs who had supported the legislation were invited, resulting in an extraordinary cross-party celebration.



Beatrice Faust, Eve Mahlab, Jo Wainer, Marilyn Beaumont and Jane Patrick celebrating the decriminalisation of abortion in Victoria. Photographs by Susan Clarke.



The Victorian Minister for Women's Affairs, Maxine Morand, former Premier Joan Kirner, and WHV Executive Director, Marilyn Beaumont, celebrating the passing of the unamended Abortion Law Reform Bill 2008.

Records and documentation have been collected by WHV and will be used in the writing of the abortion law reform campaign story.

WHV continues to be vigilant in ensuring women are able to access abortion information and services in accordance with the Abortion Law Reform Act and has been developing a resource on understanding conscientious objection and how it works in relation to abortion.

Submissions: Making sure women are considered

During the past year, Women's Health Victoria developed over 50 high-quality, evidence-based submissions on a range of issues that impact on women's health.

Policy & Health Promotion Manager, Petra Begg, says it is important WHV provide an evidence-based voice via its submissions. "We do it to make sure women are considered; because so often they're not considered and so many policy areas have an impact on women's health."

Petra nominates three major submissions as the highlight of WHV's work in this area this year including the submission to the new National Women's Health Policy and the submission to the National Human Rights Consultation.

The third is the submission to the Committee on Employment and Workplace Relations (Federal) on 'Inquiry into pay equity and associated issues relating to increasing female participation in the workforce'. Significantly WHV was asked to further present a verbal submission to the House of Representatives Standing Committee on Employment and Workplace Relations.

Petra describes putting the Human Rights submission together, which advocates for a national charter with the integration of women's rights, as challenging but a great learning experience. "It was a high-quality submission and it was a huge achievement."

Regarding the development of the new National Women's Health Policy Petra says: "It was the first time in 22 years there was an opportunity to talk about what a national women's health policy would look like and we felt the gravity of the occasion was significant and this shaped our submission."

The submission, with 11 key recommendations incorporates lessons from history and highlights how the women's health sector has thrived and worked together to obtain significant achievements, says Petra. "It speaks to the potential that sits there and how much more could be achieved with a Federal commitment."

"Developing submissions is a crucial way of working and we make comment wherever we can, because the opportunities that come out of those submissions are often unexpected and fruitful."

Highlights of the year

Violence prevention project expands

Women's Health Victoria's initiative to help prevent violence against women, in conjunction with transport, warehousing and supply chain management company, Linfox, continues to expand and develop.

The pilot project, known as Working in Partnership to Prevent Violence and funded by VicHealth was one of five projects, from a total of 30, that received 'scaled up' funding for another three years. It was the only project in a workplace setting.

VicHealth Preventing Violence Against Women Project Officer, Jill Exon, says that Phase 2 of the project has seen the number of Linfox employees attending the 'Harm in the Home' training workshops double, with another 105 workers at five work sites participating. This included a briefing session for senior managers, at their request, and resulted in many of the managers expressing interest in getting involved in the project. Development of workplace policy is also a key project component.

Linfox management is enthusiastic to see this project go far and wide and ideally, says Jill, rolled out to all its 48 Victorian worksites with some 1500 workers.

One participant described the training as "very informative" and said "it really brought this issue to the surface".

Feedback has been largely positive, says Jill, and in an evaluation group one participant said the training "opens the door to communicate about these issues [violence against women] in the workplace".

There has also been an increase in requests to management, now numbering more than 30, for referrals to employee assistance programs.

Another participant in a review noted: "People [are now] coming forward and actually speaking to other people, where they wouldn't do that before. It's a barrier we've broken down."



VicHealth Preventing Violence Against Women Project Officer, Jill Exon, with Linfox Australia's Administration Manager, Fiona Stevenson, and Distribution Warehouse Manager, Ron Dumas.



WHV's Petra Beggell with the redesigned website.

Website redesign improves usability

Women's Health Victoria's website (www.whv.org.au) has undergone a redesign resulting in a simplified, clean-looking and easy-to-use site.

Policy & Health Promotion Manager, Petra Beggell, says: "The website is really important as it is our external face. Many people who work with us and who use our resources don't come into the office. It is a major way of interaction with stakeholders and our community of interest".

WHV's 'Publications and Resources' are the core of the site, and are constantly being added to.

Contributing to increased use of a gender and health framework

The Index of Women's Health and Wellbeing Data website went live in July 2008 and has contributed to an increased understanding and use of a gender and health framework.

The Index (www.theindex.org.au) is an online gateway to up-to-date, evidence-based health and wellbeing data on Victorian women and girls across a wide variety of indicators relevant to a social model of health.

By facilitating the use of gendered data, The Index assists professionals working in policy development, planning, research and service provision to consider women and gender, resulting in a more detailed picture of Victorian women's lives and better health outcomes for all Victorians.

The Index incorporates over 70 indicators of health and wellbeing and includes links to external reports, surveys and other sources of quantitative data.

At the launch of The Index, Victorian Minister for Women's Affairs, Maxine Morand, congratulated WHV for "their initiative and leadership in developing such a valuable resource," describing it "as the first comprehensive online data source on women's health and wellbeing". She also said it was an important reminder that evidence-based data also needs to be viewed through a gender lens, because gender has a significant impact on health and wellbeing.

Working towards a funded national policy

Women's Health Victoria has been consistently lobbying and seeking to influence the Rudd Federal Government since it came into office for a funded commitment to women's health.

A new national women's health policy is essential, says WHV Executive Director, Marilyn Beaumont, "because there is a complete vacuum at the national level to enable the available knowledge and evidence to translate into policy across all things which determine health. The Commonwealth has responsibility for a number of areas that contribute to women's health and wellbeing".

"The new environment is about recognising gender as a health determinant," says Marilyn.

Some of this work in seeking to influence the thinking and actions of the Federal Government in its aim to develop a new policy is through the Australian Women's Health Network (AWHN).

Both AWHN and WHV developed strong, evidence-based submissions around a new National Women's Health Policy, both seeking significant contribution from the Federal Government.

AWHN has put money into doing key pieces of work and committing resources for its submission was one of them, says Marilyn. "WHV was able to locate a staff person here to co-ordinate pulling together the AWHN submission. It is a good-quality piece of work done in a time frame that was set externally, and was a good use of resources paid by the AWHN membership."

AWHN's submission, endorsed and supported by WHV, focused on five priority areas and principles that would underpin how the national policy would work.

"There is so much work to be done in getting a funded commitment. There is a great difference between a policy with significant funding around it versus a policy saying the right thing, but which has no implementation push or resources."

- WHV Executive Director, Marilyn Beaumont

"There is so much work to be done in getting a funded commitment. There is a great difference between a policy with significant funding versus a policy saying the right thing, but which has no implementation push or resources."

WHV's own submission on the new National Women's Health Policy was significantly around describing and understanding how the sector works and building on its strength, says Marilyn. It put forward 11 key recommendations and focuses on lessons from history on what has worked and what doesn't.

AWHN's advocacy plan is moving along well, says Marilyn. "It is work over a long period of time and is an organised and structured approach to advocacy. All state and territory women's health services and equivalents, and the AWHN membership, are working well together. We are working through our five-year plan and we're well on track."

AWHN aims to influence people broader than the health sector and have an impact on other policy areas, says Marilyn.

"The advocacy messages are consistent and are being used in a range of ways; when speaking and in submissions and this makes it easier for policy makers to connect with them."

AWHN is also convening the 6th Australian Women's Health Conference in May 2010 in Hobart and WHV has provided expertise as the Program Committee chair.



Women's Health Victoria and the Australian Women's Health Network developed strong, evidence-based submissions around a new National Women's Health Policy.

Moving forward with clarity

A thorough review of Women's Health Victoria and its structure means it is now able to move forward with greater clarity, says WHV Executive Director, Marilyn Beaumont.

"We have had a situation of growth in funding and a diversity of funding sources. It was time to review the organisation's strategic directions, so it was timely we reviewed all of the organisation's direction, not just the funded programs."

The 'Women's Health Victoria: Strategic Directions 2009–2012' has been developed and comprises four strategic goals: 1. Keeping gender on the agenda; 2. Promoting women's health knowledge; 3. Targeting health inequality; and 4. Fostering an effective, healthy organisation.

There are also different strategic actions arising from each of these goals, which better connect the organisation, says Marilyn.

The plan is underpinned by four guiding principles and four primary ways of working, and includes 'Collaborating and building capacity' and 'Innovating', where WHV continues to develop new models and approaches.

"The review process was really clarifying and we now have a good base from which to move forward over the next three or four years."

For the first time, BreaCan has a three-year strategic plan in place, which is part of its funding agreement and the time frames for the whole organisation are the same.

The review of the organisation's structure and growth, over the past 18 months, gave Council and staff the opportunity to pause and reflect.

Looking at the organisation's culture, as well as leadership and team development, was the last component of the review process. "In the 'Developing Our Preferred Culture Together at WHV project' we asked the questions: What sort of organisation are we? What sort of organisation do we desire to be? We have been working on getting a closer connection between the two," says Marilyn.

"The review process was really clarifying and we now have a good base from which to move forward over the next three or four years."

- WHV Executive Director, Marilyn Beaumont

The review of organisational culture was undertaken with an external consultant utilising expertise in Human Synergetics. Information from all staff was gathered and it measured thinking and behaviours.

Marilyn describes the review as a rigorous and systematic process and included setting realistic goals and solving problems with contribution from all staff highlighting areas to work on and improve.

The purpose of the organisational review was to ensure a healthy workplace and that is only possible when everyone contributes and participates in it, says Marilyn. "This requires us to be relatively direct and honest with each other and to recognise different types of contributions and listen to each other."

WHV has all the data and is now implementing it into the way it works. The organisational culture project was important as WHV now works differently. It no longer has a flat structure, but a management layer with staff teams, says Marilyn. "We are just starting to see the potential of this as the teams are now fully staffed and the next 12 months will be very interesting."

Marilyn says the review and changes are important as "WHV has to keep changing to maintain relevance and to be alert to opportunities to contribute to healthy public policy. There are massive opportunities and WHV now has a clear decision making process for what it does and doesn't do."



Women's Health Victoria

knowledge into action

The year in review

Here is a summary of the range of activities that occurred across WHV during the reporting period.

Women's Health Program

Health Promotion Priority Activities

Priority 1: Sexual and Reproductive Health

- Completed a review of current women's sexual and reproductive health data, which also identified gaps in the data.
- Reviewed and updated the Hepatitis C Issues Paper and the Sexual and Reproductive Health Issues Paper to incorporate changes stemming from abortion law reform.
- Conducted a review of good practice in sexual and reproductive health, providing an overview of national and international good practice models that are applicable to Victoria.
- A delegation from staff and Council met with the Minister for Health to advocate for a focus on sexual and reproductive health, including preventing unplanned pregnancy.
- Co-ordinated the Victorian campaign and advocacy that removed abortion from the Crimes Act in Victoria. Abortion is now regulated like any other health service. This success means that women across Victoria now have access to safe, legal abortion without the threat of criminal prosecution.
- Commenced work to capture the details of the abortion law reform campaign in a written 'campaign story' that will also share advocacy lessons.
- Following law reform, Women's Health Victoria has remained vigilant in ensuring that women are able to access abortion information and services in accordance with the Abortion Law Reform Act. This has included publication and dissemination of an information paper called 'Abortion and Conscientious Objection' about the new law and the impact of conscientious objection on women seeking information about termination of pregnancy services.

Priority 2: Mental Health and Wellbeing

- Article 'Getting gender on the agenda' was published in the spring edition of *new paradigm*.
- Developed a comprehensive submission to the 'Because Mental Health Matters' statewide mental health strategy consultation, suggesting evidence-based changes that could strengthen the draft strategy. Also participated in consultation sessions held by the Mental Health Unit of the Department of Human Services.

- Responded to a call by the Federal Government for submissions to the National Plan of Action to Prevent Violence against Women and Children. The submission discussed the link between violence and gender inequality. The final report incorporated a gendered approach to violence and recognised gender roles and gender relations in the development of the strategies.
- Participated in the State Plan for the Prevention of Violence against Women Workplace Policy Advisory Committee discussion.

Priority 3: Women's Health Inequities

- Reviewed and updated Gender Impact Assessments on Corrections, Drugs and Dependence, Financial Security, Body Image, Cardiovascular Disease, and Informal Care Giving.
- Developed a Women's Health Information Package and Clearinghouse Connector in response to the Victorian Bushfire Crisis, which was accessed more than 3000 times from the website.
- Responded to 200 Clearinghouse information requests and enquiries.
- Reviewed and updated the Better Health Channel Fact Sheets on 'Abortion Services in Victoria' and 'Domestic Violence – Services for Women'.
- Participated in the Committee on the Elimination of Discrimination against Women (CEDAW) workshop conducted by the YWCA 'From Local to Global: Using the United Nations to achieve local change for women' that developed the CEDAW Shadow Report.
- Supported the Australian Women's Health Network (AWHN) to:
 - Develop submissions and participated in an AWHN delegation to the Minister for the Status of Women.
 - Prepare a submission to the Federal Office of Women for funding to develop a national dialogue on Aboriginal women's health over 2009 into 2010.
 - Develop the AWHN submission to the New National Women's Health Policy discussion paper.
 - Provide expertise as Program Committee chair of the 6th Australian Women's Health Conference to be held in May 2010 in Hobart.
- Delivered the Gender in Health Promotion workshop at the Women's Health New South Wales Statewide Conference in Sydney.

The year in review

- Developed and delivered the new Applied Gender Analysis workshop, which focused on the topics of depression and cardiovascular disease. The new workshop addressed an unmet need of women's health workers by providing a method for conducting gender analysis.
 - Directly increased the advocacy skills of 116 Victorian professionals, through their participation in the Advocacy in Health Promotion workshops. This year workshops were held in Melbourne, Traralgon, Camperdown, Benalla, Bendigo and Geelong.
 - Submissions were made on the following:
 - National Plan of Action to Prevent Violence Against Women and Children.
 - Senate Inquiry into the Disclosure Regimes for Charities and Not-for-Profit (NFP) organisations.
 - Department of Human Services Vulnerable Youth Framework discussion paper.
 - Victorian Assisted Reproductive Technologies Bill.
 - Public Health Association of Australia Gender and Health Policy.
 - Because Mental Health Matters – Consultation on a New Focus for Mental Health and Wellbeing in Victoria.
 - National Review into Model Occupational Health and Safety Laws.
 - 'Which Way Home? A New Approach to Homelessness' – The Australian Government Green Paper on Homelessness.
 - The Victorian Council of Social Services State budget submission.
 - Committee on Employment and Workplace Relations (Federal) on 'Inquiry into pay equity and associated issues related to increasing female participation in the workforce'.
 - Senate Legal and Constitutional Affairs Committee (Federal) Inquiry into Effectiveness of the Commonwealth Sex Discrimination Act 1984 in Eliminating Discrimination and Promoting Gender Equality.
 - Australian Medical Council – Good Medical Practice: A Draft Code of Professional Conduct.
 - Australia: Healthiest Country by 2020 developing a preventative health agenda.
 - Attorney's General Committee project to design a national model Bill for a spent convictions scheme which would provide for certain criminal convictions to be disregarded, for most purposes.
 - Towards a National Primary Health Care Strategy.
 - Non Government Organisations' Shadow Report to the CEDAW Committee compiled by YWCA.
 - Verbal submission provided to the House of Representatives Standing Committee on Employment and Workplace Relations.
 - National Human Rights Consultation.
 - National Women's Health Policy.
 - Provided women's health representation on boards and committees relating to women in prison, including the Corrections Health Board, the Justice Health Clinical Advisory Committee and the Women's Correctional Services Advisory Committee.
- #### Priority 4: Whole of Organisation Capacity Building
- Added 828 new resources to the Clearinghouse collection of women's health information.
 - Managed and maintained The Index of Women's Health and Wellbeing Data, with a high number of new visitors, indicating strong visitor recruitment.
 - Completed review and redevelopment of the WHV website. The new website has a 'fresh look', is easier to navigate, and places publications at its core.
 - Eleven Clearinghouse Connectors were produced on the following topics:
 - Reproductive Health
 - Sexual Health
 - Drugs
 - Tobacco
 - Ageing
 - Housing
 - Gender and Health Framework
 - Victorian Bushfires and Disaster Situations
 - Cardiovascular Disease
 - Physical Activity
 - Healthy Eating.

The year in review

BreaCan

Breast and Gynaecological Support Service

Highlights of service deliverables

- Provided information and support to a total of 1922 contacts including one-on-one contacts, group attendees and service providers.
- Conducted 73 group activities and events with 947 people attending. These included What's On information sessions, workshops, the Feel Good Exercise program and specific activities for women living with advanced cancer.
- Increased the number of women, family and friends affected by gynaecological or breast cancer on the BreaCan mailing list to over 1700.
- Developed the BreaCan Strategic Plan 2009–2012 with significant input from the BreaCan Advisory Group. The plan identifies three key goals for the service: increase the number of people using our service, expand our capacity, and extend our influence.
- Completed the fourth peer support volunteer training program comprising 45 contact hours for the 13 participants. All 13 participants completed the training, taking the total number of peer support volunteers to 34.
- Developed a new stand-alone website for consumers and health professional that aims to improve the on-line accessibility throughout Victoria.
- Celebrated the completion of the 'Our Voices Our Songs' music therapy program on Breast Cancer Awareness Day in October. The program was a collaboration of The Women's, The Royal Melbourne Hospital, Western Health and BreaCan.
- Collaborated with the National Breast Cancer Foundation about their public speaking training program, which was conducted at BreaCan and involved BreaCan volunteers and service users as participants.
- Hosted a successful morning tea for women living with ovarian cancer as part of Ovarian Cancer Awareness Week.
- Collaborated with Camp Quality to conduct a pilot program providing 10 families (35 participants) with a weekend away.
- Presented a paper at the 11th National Breast Care Nurses Conference about the benefits of a women-focused, community-based service model such as BreaCan in meeting the supportive care needs of women with breast or gynaecological cancers.
- Presented a paper at the 15th International Reach to Recovery Conference in Brisbane, which explored the benefits of trained peer support in meeting the needs of women with breast cancer.
- Conducted an internal evaluation of BreaCan's reflexology programs to assess the impact and benefits to participants – 94% of women who responded stated they found the session relaxing and 50% said they would now investigate options for relaxation and self care.
- Commenced the development of a DVD to promote what our service can provide to people affected by breast and gynaecological cancers and to the health professionals who support them.

The year in review

The Victorian Women with Disabilities Network Advocacy Information Service (WWDN AIS) in partnership with Women's Health Victoria.

Highlights of service deliverables

WWDN's three priority areas continue to provide a strong framework for advocacy activities.

- **Violence against women with disabilities** was progressed through submissions and meetings with key stakeholders to achieve better responses to violence against women with disabilities by supporting regional family violence services in developing capacity to respond to women with disabilities and supporting disability services to develop links with family violence services. Additional recurrent funding was secured from the Office of Housing (Department of Human Services) for a new staff position, Policy Officer, Violence against women with disabilities.
- **Parenting for women with disabilities** was progressed through collaboration with Yooralla Society to present a forum on 'Parenting for people with disabilities'. The forum was attended by a good representation of workers from the disability and family support fields.
- **Access to health services** was progressed through collaboration with the Health Issues Centre (HIC) and the HIC Consumer Nominee Program. This program includes a support and development program for consumer representatives.

WWDN capacity development activities for the year included:

- Redevelopment of the WWDN website, including the required access tools for people with a range of disabilities, was provided by the RMIT School of Business Information Technology students.
- Launch of the 'WWDN AIS Online Resource Collection and Building the Evidence: A Report on the Status of Policy and Practice in Responding to Violence Against Women with Disabilities in Victoria' at the 5th International Mental Health and Mental Behaviour Disorders Conference in September.

- Undertook an external evaluation of the WWDN Advocacy Information Service and partnership with WHV. This process also fed into the development of the three-year WWDN Strategic Plan.
- WWDN Board governance role development continued throughout the year with a training program on governance, covering Board roles and responsibilities, the Disability Services Division Quality Framework and the Disability Act.
- Revamped WWDN's Members' newsletter.

A major focus of the Executive Officer's work throughout this year was facilitating a smooth transfer of the auspice between WHV and WWDN for the AIS funding. Processes have been established for WWDN to assume responsibility for employment of staff, including the set-up of payroll and salary packaging processes and taxation registration for PAYG, FBT and GST. Also the transfer of information from the WHV website to the WWDN website, the development of operating policies, financial systems and a new funding and service agreement between WWDN, and the Department of Human Services and the Office for Disability, Department of Planning and Community Development were required. By the close of the year the WHV and WWDN Partnership Agreement had been evaluated with a new 2009–10 Partnership Agreement and Purchasing Agreement regarding ongoing co-location signed on the 27th May 2009. This marks a significant point in WWDN's development. A celebration of the achievement of the Partnership is planned.

The staff of the WWDN AIS would like to acknowledge the excellent support WHV has provided in bringing the service to this stage in its development and looks forward to the next stage of the Partnership.

How Women's Health Victoria works



Policy & Health Promotion: Jenny Ward, Petra Begnell, Rose Durey, Rebecca Yeats, and Pam Rugkha (front).



BreaCan: (sitting) Justine Dalla Riva, Helen Shepherd, Wendy Pullan and Fiona McRae. (standing) Katherine Bradstreet, Nicole Wilton and Di Missen.



Business Services: Beverley Murphy, Rosemary Sexton, Rosie Craven and Vicki Ayers.

The role of our Council

Women's Health Victoria's governing body is the Council. At any one time throughout the year it is made up of between eight to twelve women, all WHV members who have been nominated for annual election or co-opted to fill vacancies.

Council's responsibilities fall into four main areas: formulating strategy, setting policy, providing accountability and reviewing the Executive Director's performance.

Council members play a critical role in keeping WHV in touch with emerging issues in the business world, policy directions at all levels of government, thinking relevant to women's health within and outside academia, and the vast network of organisations in the health and community sectors that makes up the environment in which we operate.

Our Council works within a set of policies and procedures that make up our governance framework, including those related to Council's role, conflict of interest, meeting structure, delegation and implementation of Council functions, orientation, evaluation, succession planning and professional development of Council members.

A team-based approach

WHV has a strong team-based governance and staff structure. Detailed work for Council is done through three Task Groups, comprised of both Council and staff members. Staff meet regularly in staff teams to implement a team-based workplan.

The Executive Director is responsible for providing organisational leadership in strategic directions and funding agreement development and implementation along with management of internal and external relationships.

The Executive Director and managers who are team leaders monitor team performance and support the work of the Task Groups through regular meetings.

Task Groups

Governance Task Group: Responsibilities include decision-making processes, organisational structure, evaluation of Council, professional development of Council members and succession planning. This year the group continued to focus on succession planning to build Council membership and ensure Council remains skilled, diverse and active.

Strategic Directions Task Group: Responsibilities include developing policies, strategies and messages around key and emerging issues, which are informed by our strategic directions. Other tasks include overseeing strategy and policy related to the Policy & Health Promotion Team, BreaCan and the Victorian Women with Disabilities Network Advocacy Information Service Partnership.

Business Resources Task Group: Responsibilities include oversight of risk management, financial management, income generation, legal compliance, human resources management, and the information, communication and technology (ICT) strategy.

Staff Teams

Managers Forum: In place now for about 18 months it provides a regular forum for the Executive Director and managers to discuss cross-organisation strategies and management leadership within the staff teams, and to develop and review policies and procedures and organisational capacity building.

Policy & Health Promotion: Responsible for managing development, implementation and review of the three-year Department of Human Services Health Promotion Plan and Annual Health Promotion Plans. Work includes scanning the health information and policy environment, responding to emerging issues, making decisions about representation, submissions and other health promotion advocacy and capacity building, managing the Clearinghouse and website, producing resources including Clearinghouse Connectors and Health News Daily, and developing resources for health professionals and organisations.

BreaCan: Responsible for managing the development, implementation and review of the BreaCan three-year strategic plan and annual action plans. This includes developing and delivering the BreaCan information and support service in partnership with the volunteer workforce, operating the Resource Centre based at the Queen Victoria Women's Centre, promoting the service and improving access for women statewide through innovative project development.

Business Services: Responsible across the organisation for business development, maintaining and improving business continuity, finance, human resource administration, legal and governance systems, ICT support systems and maintaining accreditation requirements.

Victorian Women with Disabilities Network Advocacy Information Service (VWDN AIS) Executive Partnership Group: Oversees implementation of the partnership between the VWDN and WHV, the Advocacy Information Service, and the work of the VWDN Executive Officer. The successful outcome of the work to achieve independent fundholder status for VWDN has led to the last meeting of this group being held in June 2009.

Meet a Council Member

Giving back to the community

Bente Jansen

Manager,
Aged Persons Mental Health,
Broadmeadows



Why and when did you become involved in Women's Health Victoria?

I became involved about 18 months ago after realising many of my passions were on WHV's agenda such as abortion law reform and violence against women. I felt it was a way of doing something worthwhile for the community and for women who were less autonomous than myself.

What do you get out of your involvement?

I get a sense of putting back into the community and feel good that I can be part of a phenomenal team working towards the best outcomes for women. I enjoy contributing to discussions and the learning.

How do your skills, education and professional role contribute to your role on the Council?

My finance training at Graduate Diploma level and MBA level assist with my duties as treasurer and my nursing background in both general nursing and mental health play a valuable role in contributing to the team when discussing health issues.

What was your highlight of the work undertaken by WHV this past year and why?

The highlight would have to be visiting the different areas and in particular BreaCan to gain a better understanding of the work being performed and the constraints they may be experiencing. It has also been fulfilling to discuss the possible expansion options for BreaCan and the opportunities that could be provided to women.

The work of our Council

Council's work 2008–2009

Following is a brief summary of some of the decisions and actions taken by the WHV Council during the reporting period.

Finances, risk management, human resources and compliance

- Reviewed provision of external audit services through a limited call for expression of interest, negotiation of contract and engagement of UHY Haines Norton from 2008–09 for three years.
- Adopted Risk Management Assessment 2009.
- Adopted Compliance with Legislation, Service Agreements and Codes of Practice Internal Audit 2009.
- Adopted Privacy of Personal Information Internal Audit 2009.
- Ratified use of the seal for three-year lease renewal on the 210 Lonsdale Street premises.
- Noted that no formal complaints or incidents had arisen during the year.
- Noted that one staff grievance had been dealt with during the year.

Reviewing WHV Strategic Directions

- Participated in a major review of strategy and adopted Women's Health Victoria: Strategic Directions 2009–2012 to commence from July 2009.
- Endorsed BreaCan Strategic Plan 2009–2012.
- Endorsed WHV Department Human Services (DHS) Strategic Health Promotion Plan 2009–2012 with five priority areas and goals within each of these.

Supporting WHV's work

- Acknowledged the excellent work WHV staff contributed to the enactment of the Abortion Law Reform Bill by the Victorian Parliament.
- Agreed to provide support to Women's Health East to assist this service to continue as an independent regional women's health service through an agreed partnership agreement.
- Received and endorsed the Quality Improvement and Community Service Accreditation (QICSA) Accreditation Review Report 2008 and adopted the QICSA Quality Workplan 2008–2011.
- Supported the Dying with Dignity Victoria position to call on the Victorian Government to take necessary action to ask the Victorian Law Reform Commission to consider and provide advice on advance care planning and physician assisted dying.

Council adopted:

- Family Friendly Workplace Policy and Procedure Review.
- Staff Working from Home Policy and Procedure Review.
- Salary Packaging Guidelines Review.
- Decision Making and Communications Review.
- Delegations and Implementation of Council Functions Review.
- Governance Policies Review.
- Occupational Health and Safety Policy Review.

'Developing Our WHV Preferred Culture Together at WHV' Project

Participated in, and received progress reports on work undertaken to assess WHV's current and preferred internal culture and the development of change processes.



Members of Women's Health Victoria enjoying the proceedings of the WHV 2008 Annual General Meeting. Photographs by Michela Cardamone.



Women's Health Victoria Executive Director, Marilyn Beaumont, with WHV Chairperson, Louise Johnson, at the WHV 2008 Annual General Meeting.

Council office bearer election

The following members of Council were elected unopposed:

- Louise Johnson as Chairperson
- Cathy Mead as Deputy Chairperson
- Bente Jansen as Treasurer.

Council development

All Council members participated in the DHS-funded governance training, at either advanced or beginner level, with some new initiatives from this being translated into the WHV governance process. In addition, a Board Building workshop with NOUS Group facilitation was held in which all Council members participated.

Meeting participation by Council Members as follows:

Louise Johnson	10/11
Cathy Mead	11/11
Liz Chatham (resigned from Council May 09)	9/10
Bente Jansen	8/11
Suzanne Young (leave of absence for 4 meetings)	6/11
Julie Mulvany	7/11
Sally Fawkes	6/11
Verity Newnham (resigned from Council March 09)	1/8
Annabel Pollard	8/11
Helena Maher	9/11
Naomi Arentz (resigned from Council June 09)	6/11
Kym Daly	7/11
Lyn Allison (co-opted June 09)	0/0



Executive Officer of Gippsland Women's Health Service, Diane Wilkinson, and Executive Director of Women's Health in the North East, Kathleen Maltzahn at the WHV 2008 Annual General Meeting.

Meet a Council Member

Interest in politics, feminism and women's health

Annabel Pollard

Clinical Psychologist, Clinical Research Fellow, Department of Clinical Psychology & Psycho-Oncology Research Unit, Peter MacCallum Cancer Centre



Why and when did you become involved in Women's Health Victoria?

I have had a long-standing interest in politics, feminism and in women's health. I have worked closely with the BreaCan staff for some years conducting courses and therapy groups for women with breast and gynaecological cancer. After a while I became aware of the important role WHV played in promoting health advocacy for women in Victoria, so I offered to play a more active role in supporting the organisation through the Council. I have a strong interest in public health and health policy.

What do you get out of your involvement?

An important insight into the health issues confronted by women in Victoria, across a range of health indicators, including domestic violence, social policy, law reform, advocacy and health promotion.

How do your skills, education and professional role contribute to your role on the Council?

My major skills are as a psychologist with a keen interest in health care and particularly cancer. I have been working in the field of cancer for about 25 years, initially as a nurse and subsequently, as a clinical psychologist.

What was your highlight of the work undertaken by WHV this past year and why?

Firstly decriminalisation of abortion which gave me an insight into the powerful and positive role an organisation like WHV can bring to public debate on sensitive issues. Secondly, working as Chair of the BreaCan Advisory Group, which brings together women with a wide range of professional and personal interests, to support the development of this valuable service for women with breast and gynaecological cancer.

Membership

Membership Development

Recruiting for an active membership

Women's Health Victoria has an active membership of individual women and organisations supportive of the work we do. At the 30th June 2009 we had a membership of 209, made up of 51 organisational members; three which are new, and, 158 individual members; 29 of which are new.

Membership is free, but must be renewed every year. Members have the right to participate in the organisation, nominate for Council, and vote at Annual General Meetings and General Meetings and in elections.

Our policy is to encourage a committed membership, not to recruit for large numbers. Every year we actively target and recruit new members for the vitality and growth of WHV. We target individuals and organisations we have contact with, particularly those who promote or are active in women's health.

Communicating with our members

In the past financial year we sent out three Members' Bulletins as scheduled, updating members on our activities, informing them of coming events and inviting their involvement in actions.

These were supported by 35 email communications, sent as required, encouraging members to participate in debate on key issues. In 2008–09 this included abortion law reform, advocacy for a new national women's health policy and national human rights charter, participation in the next Australian Women's Health Conference in May 2010 in Hobart, information dissemination on the Victorian Bushfires recovery and support services, and participation in a WHV evaluation survey.

Meet a Member

WHV information aids formulation of policy advice

Beth Wilson

Victorian Health Services Commissioner (since 1997). A lawyer by training, Beth has a long-standing interest in medico/legal and ethical issues



When did you first become involved in Women's Health Victoria and why?

The Health Services Commissioner (HSC) is an independent statutory authority which receives and resolves complaints from consumers of health services in Victoria. HSC has been a member since 2006. Women make up the majority of complaints to HSC. This is because they use our health services more often than men, particularly during reproductive years. Women are also carers who utilise health services for others and make complaints on their behalf.

What motivates you to be a member?

WHV provides an invaluable service which includes the dissemination of information about women's health issues. These are useful to HSC in the formulation of policy advice to government and others. WHV played a leading role in promoting the rights of Victorian women to utilise safe abortion services and the HSC fully supports this.

How does your membership connect with your current work?

Membership of WHV enables HSC to receive feedback about women's health services and what consumers have to say about them. Information received from WHV is useful in providing policy advice, giving information to consumer and carers in Victoria and in developing networks.

What do you gain from being a member?

All of the above plus the opportunity to interact with a wonderful group of women who are led by the inspirational Marilyn Beaumont.

Meet a Member

Keeping informed aids lobbying

Noela MacLeod

Past State President, Member of Honour, member of the Social Issues Fact Finding Team and member of the Agriculture and Environment Committee – Country Women's Association (CWA)



When did you first become involved in Women's Health Victoria and why?

It was about four or five years ago. I was at a forum and being on the State Executive of the CWA I was lobbying government about long-term concerns about women's health issues, particularly for women in regional and rural areas. I stood up a number of times and spoke and afterwards members' of WHV came and introduced themselves, and their work, to me.

What motivates you to be a member?

I like the way WHV goes about things. I receive a large amount of information, which I can respond to and it keeps me informed of the issues, which is really important.

How does your membership connect with your current work?

I am a member of the CWA Social Issues Fact Finding Team and we have put together resolutions relating to women's health issues. One issue of concern is dental health in rural and regional areas. The other major concern is the shutting down of obstetric departments in rural and country hospitals resulting in pregnant women having to travel huge distances to give birth – putting both the women and their babies at danger.

What do you gain from being a member?

I believe for a long time women's voices were not heard and I think this is changing through the work of WHV. I believe that women have the right to the dominion over their own bodies. I enjoy attending the Annual General Meetings and meeting people who think the same way as me.

Thank you to our donors

We sincerely thank those who generously continue to support our work and specific program activities.

We also acknowledge the National Australia Bank for its grant of \$2000 for volunteer programs. The funds will be utilised by BreaCan in support of its volunteers.

General donations received by Women's Health Victoria are deposited in the Women's Health Victoria Fund. A total of \$3250 was transferred to the fund during the year.

This Fund is administered through the Melbourne Community Foundation and managed by a WHV nominated Advisory Committee. Investment of donations in the Fund enables growth towards providing sufficient earnings from capital for future distribution decisions based on identified priority issues in women's health. It is a cost-effective way of managing donations and bequests, and investment and distribution of the monies. It is also an attractive option for donors and those making a bequest as it ensures the donation is directed to women's health in perpetuity.

We acknowledge and thank our 2008–2009 donors:

Susie Allanson
Maria Annunziata
Marilyn Beaumont
Danielle DiCarlo
Susan Feldman
Razmi Finn
Suzanne Geermans
Carolyn Graham
Kerry Hampton
Jenny Hillier
Judy Hogg
Lea Kewish

Melinda McCormack
Vivien McDonald
Noela MacLeod
Elaine Mitchell
Elizabeth Norton
Jane Patrick
Annabel Pollard
Rosemary Sexton
Jennifer Strauss
Pamela Williams
Desiree Yap



Financial Statements

For the Year Ended 30 June 2009

Summary of Financial Results

The organisation recorded a profit of \$22,788 for the year. The outcome is considered a very good result in an eventful year and reflects increased activity in program and project areas across the organisation.

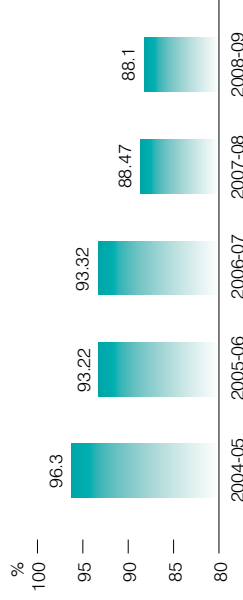
Contents

Summary of Financial Results	22
Income Statement	23
Balance Sheet	23
Cash Flow Statement	24
Statement of Recognised Income and Expense	24
Notes to and forming part of the accounts:-	
Note 1 - Statement of Significant Accounting Policies	25
Note 2 - Profit/(Loss) From Ordinary Activities	27
Note 3 - Receivables	27
Note 4 - Property, Plant and Equipment	28
Note 5 - Intangibles	28
Note 6 - Payables	29
Note 7 - Provisions	29
Note 8 - Reserves	29
Note 9 - Retained Profits	29
Note 10 - Commitments	29
Note 11 - Contingent Assets/Liabilities	30
Note 12 - Cash Flow Information	30
Note 13 - Events after Balance Sheet Date	31
Note 14 - Related Parties	31
Note 15 - Economic Dependency	31
Note 16 - Principal Activities & Operations	32
Note 17 - Association Details	32
Statement by Members of the Council	32
Independent Audit Report to the Members	33

The Financial Statements disclose Victorian Department of Human Services recurrent funding for the Women's Health Program, BreaCan and the Victorian Women with Disabilities Network Advocacy Information Service.

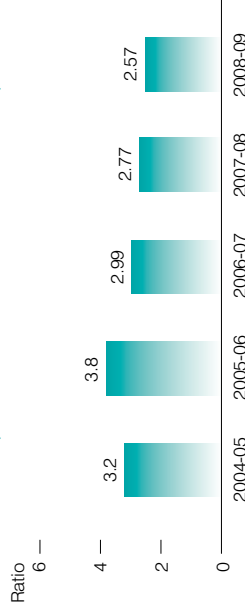
Operating expenditure correspondingly relates to employee expenses, business services and program and project costs.

DHS Grants to Total Revenue



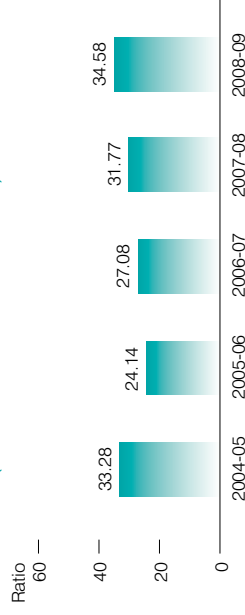
This graph shows the comparison of Department of Human Services grants revenue to Total Revenue, which reflects significant funding from the Department to the organisation. The 2008-2009 result reflects increased project funding from philanthropic trusts, other areas of government and income generated by program and project areas.

Current Ratio (Current Assets/Current Liabilities)



This graph shows the organisation's ability to meet its financial commitments at balance date. A result above 1.0 indicates a positive position with no reliance on borrowings. The marginal change in the 2008-2009 position mainly reflects increased employee provisions held at balance date.

Debt Ratio (Total Liabilities/Total Assets)



This graph shows a percentage representation of Total Liabilities compared to Total Assets over time. This shows that at balance date for 2008-2009, for each \$1 in assets held, \$0.3458 was committed in liabilities and is attributable to increased holdings in employee provisions.

Cash Flow Statement

For the Year Ended 30 June 2009

	Note	2009 \$ Inflows/ (Outflows)	2008 \$ Inflows/ (Outflows)
Cash Flows from Operating Activities			
Operating grant receipts		2,201,916	1,901,790
Donations received		11,637	22,207
Receipts from other revenue		39,531	22,774
Payments to suppliers and employees		(2,076,154)	(1,827,910)
Interest Received		57,901	62,320
Net Cash provided by/(used in) Operating Activities	12(b)	234,831	181,181
Cash Flows from Investing Activities			
Purchases of Property, Plant & Equipment		(90,985)	(16,352)
Purchase of Intangibles		0	0
Net Cash used by Investing Activities		(90,985)	(16,352)
Net Increase/(Decrease) in Cash Held		143,846	164,829
Cash at beginning of financial year		907,013	742,184
Cash at end of financial year	12(a)	1,050,859	907,013

The accompanying notes form part of this financial report.

Statement of Recognised Income and Expense

For the year ended 30 June 2009

	Note	2009 \$	2008 \$
Net Income recognised directly in equity			
Profit/(loss) for the period	9	22,788	91,485
Total recognised income and expense for the period		22,788	91,485

The accompanying notes form part of this financial report.

Notes to the Financial Statements

For the year ended 30 June 2009

Note 1. Statement of Significant Accounting Policies

The financial report of Women's Health Victoria for the year ended 30 June 2009 was authorised for issue by a resolution of the Members of the Council on 24 August 2009.

This financial report is a general purpose financial report that has been prepared in accordance with Australian Accounting Standards and other authoritative pronouncements of the Australian Accounting Standards Board and the requirements of the Associations Incorporation Act (VIC).

The financial report covers Women's Health Victoria Inc. as an individual entity. Women's Health Victoria Inc. is an association incorporated in Victoria under the Associations Incorporation Act 1981.

The financial report has been prepared on an accruals basis and is based on historical costs and does not take into account changing money values or, except where stated, current valuations of non-current assets. Cost is based on the fair values of the consideration given in exchange for assets.

The following is a summary of the material accounting policies adopted by the Association in the preparation of the financial report. The accounting policies have been consistently applied, unless otherwise stated.

(a) Income Tax

The Association is an Income Tax Exempt Charity in terms of Subdivision 50-5 of the Income Tax Assessment Act 1997.

(b) Clearinghouse Resource Collection

The collection consists of books, journals and audiovisuals that have been capitalised. The collection has significant and ongoing value to the organisation with the effective useful life estimated at 8 years. The collection is measured at cost or fair value less, where applicable, any accumulated depreciation.

(c) Property, Plant and Equipment

Each class of property, plant and equipment is measured at cost or fair value less, where applicable, any accumulated depreciation and any impairment in value.

Plant and Equipment

Plant and equipment are measured on the cost basis with Clearinghouse resource collection measured at deemed cost.

Impairment

The carrying values of property, plant and equipment are reviewed for impairment when events or changes in circumstances indicate the carrying value may not be recoverable, and at least annually by the Association.

If such an indication of impairment exists and where the carrying values exceed the recoverable amount, the asset is written down to the recoverable amount.

Depreciation

The depreciable amount of all fixed assets are depreciated on a straight line basis over the useful lives of the assets to the Association commencing from the time the asset is held ready for use.

The depreciation rates used for each class of depreciable asset are:

Class of Fixed Asset	Depreciation Rate
Office and computer equipment	7.0% - 40%
Furniture & Fittings	10.0% - 20%
Clearinghouse Resource Collection	12.5%
Leasehold Improvements	12.5% - 40%

(d) Leases

The Association has no current finance leases.

(e) Employee Benefits

Provision is made for the Association's liability for employee benefits arising from services rendered by employees to balance date. Employee benefits expected to be settled within one year together with benefits arising from wages and salaries, have been measured at their nominal amount. Employee benefits payable later than one year have been measured at the present value of the estimated future cash outflows to be made for those benefits. No provision for sick leave benefits has been recognised as amounts expected to be claimed are not anticipated to exceed benefits accruing in future periods. Sick leave is non-vesting.

Contributions are made by the Association to employee accumulated superannuation funds and are charged as expenses when incurred. The particular funds have no unfunded liabilities.

Notes to the Financial Statements

For the year ended 30 June 2009

(f) Cash

For the purposes of the Cash Flow Statement, cash includes cash on hand, at bank and on deposit.

(g) Revenue

Revenue is recognised to the extent that it is probable that the economic benefits will flow to the entity and the revenue can be reliably measured. The following specific recognition criteria must also be met before revenue is recognised:

Grants

Revenue of an unconditional nature is recognised when control of the contribution or right to receive the contribution is obtained. Grants received and provided for special purposes are recognised under current liabilities to the extent of unspent funds where there is an obligation to repay the unexpended portion of the grant.

Sale of goods

Revenue from the sale of goods is recognised upon delivery of goods to customers.

Interest

Interest revenue is recognised on an accrual basis taking into account the interest rates applicable to the financial assets.

Donations

Revenue is recognised when the monies are received by Women's Health Victoria. In kind donations or donations of assets are recorded at fair value.

All revenue is stated net of the amount of goods and services tax (GST).

(h) Financial Instruments

(a) Terms, Conditions and Accounting Policies

The accounting policies and terms and conditions of each class of financial asset, financial liability and equity instrument at the balance date are consistent with those regularly adopted by businesses in Australia.

(b) Financial Risk Management

The financial instruments consist mainly of deposits with banks, and accounts receivable and payable. The Association does not trade or speculate in derivatives. The main purpose of the financial instruments is to raise funds for normal activities and invest excess funds in an appropriate manner.

(i) Financial risks and risk management

The main risks the entity is exposed to through its financial instruments are liquidity risk, credit risk and interest rate risk.

Liquidity Risk

The liquidity risk is managed by monitoring forecast cash flows and ensuring that adequate short term funds are maintained. All financial liabilities are expected to be settled within 30 days.

Credit risk

Credit risk refers to the risk that counterparty will default on its contractual obligations resulting in the entity suffering a financial loss. The maximum exposure to credit risk, is the carrying amount, net of any provisions for impairment of those assets, as disclosed in the balance sheet and notes to the financial statements. This risk is monitored and managed by management reviewing financial assets and ensuring collections are made on a timely basis and that unacceptable concentrations of credit risk are avoided. The entity has no significant credit risk at year end.

Interest rate risk

The entity's exposure to interest is managed by the entity reviewing the interest rate profile. Current interest rates and the market outlook, and taking action as necessary to ensure that risk levels are maintained at a satisfactory level. The Association has no material exposure to interest rate risk on its financial instruments.

(c) Net Fair values

The aggregate net fair values and carrying amounts of financial assets and financial liabilities are disclosed in the Balance Sheet and in the notes to the financial statements.

(i) Intangibles

Computer Software

Computer software is classified as intangible assets, except where the software is an operating system component. Software classified as intangible is amortised over the period of estimated useful life.

(i) Change in Accounting Policy

The Women's Health Victoria Fund has previously been classified as an investment asset of Women's Health Victoria. During the year a decision was made to de-recognise this asset in the Balance Sheet due to the nature of the Melbourne Community Foundation Trust Deed and the sub-fund held by the Melbourne Community Foundation.

Notes to the Financial Statements

For the year ended 30 June 2009

In accordance with Accounting Standard AASB 108 "Accounting Policies, Changes in Accounting Estimates and Errors", the following comparative balances for the 2008 financial year have been restated to reflect this change.

Balance Sheet

Opening Balance at 1 July 2007

	Reported	Adjustment	Restated
Investment- Women's Health Victoria Fund	46,202	(46,202)	0
Total Assets	1,066,207	(46,202)	1,020,005
Retained Profits	731,202	(46,202)	685,000
Total Equity	777,500	(46,202)	731,298

Income Statement

Net profit for the year ended 30 June 2008

	Reported	Adjustment	Restated
Net profit for the year ended 30 June 2008	95,585	(4,100)	91,485
Balance at 30 June 2008			
Investment- Women's Health Victoria Fund	50,302	(50,302)	0
Total Assets	1,279,601	(50,302)	1,229,299
Retained Profits	822,192	(50,302)	771,980
Total Equity	873,085	(50,302)	822,783

Note 2: Profit/(Loss) from ordinary activities

Profit/(Loss) from ordinary activities before income tax includes the following revenues and expenses whose disclosure is relevant in explaining the financial performance of the entity.

	2009 \$	2008 \$
(a) Expenses		
- Remuneration of auditor		4,550
- Audit services	5,000	
- Rental expense		169,470
- Lease	179,097	
- Information & Communication Technology Systems (ICT)	62,532	36,418
- Organisational	42,054	39,889
- Workforce Development	60,063	25,287
- Project/Program costs mainly related to BreaCan, Women with Disabilities Network Advocacy Information Service and the Women's Health Program	114,788	130,077

In relation to remuneration of the auditor there are no other benefits provided.

Note 3: Receivables

Sundry debtors

8,377	113,984
--------------	----------------

Note 4: Property, Plant and Equipment

Office & computer equipment- at cost	2009	2008
Less accumulated depreciation	\$	\$
	153,696	139,025
	72,009	119,089
	81,687	19,936
Furniture & Fittings- at cost	15,555	20,241
Less accumulated depreciation	14,420	18,647
	1,135	1,594
Clearinghouse Resources - at cost/deemed cost	66,098	71,900
Less accumulated depreciation	35,631	35,427
	30,467	36,473
Leasehold Improvements- at cost	240,530	231,313
Less accumulated depreciation	127,835	87,433
	112,695	143,880
Total	225,984	201,883

(a) Movements in carrying amounts

Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year:

	Office and Computer Equipment	Furniture and Fittings	Clearinghouse Resource Collection	Leasehold Improvements	Total
	\$	\$	\$	\$	\$
Balance at beginning of year	19,936	1,594	36,473	143,880	201,883
Additions	76,975	0	3,203	10,807	90,985
Written Off	(499)	0	0	(265)	(764)
Depreciation Expense	(14,725)	(459)	(9,209)	(41,727)	(66,120)
Carrying amount at end of year	81,687	1,135	30,467	112,695	225,984

(b) Movement in carrying amounts – previous year comparison

Movement in the carrying amount for each class of property, plant and equipment between the beginning and the end of the 2007-2008 financial year.

	Office and Computer Equipment	Furniture and Fittings	Clearinghouse Resource Collection	Leasehold Improvements	Total
	\$	\$	\$	\$	\$
Balance at beginning of year	42,931	2,053	37,470	182,963	265,417
Additions	1,220	0	8,571	6,561	16,352
Written Off	(370)	0	0	0	(370)
Depreciation Expense	(23,845)	(459)	(9,568)	(45,644)	(79,516)
Carrying amount at end of year	19,936	1,594	36,473	143,880	201,883

Note 5: Intangibles

Computer Software/Licences - at cost
Less accumulated amortisation

	2009	2008
	\$	\$
Computer Software/Licences - at cost	14,900	18,650
Less accumulated amortisation	12,567	12,231
	2,333	6,419

(a) Movements in carrying amount

Movement in the carrying amount between the beginning and the end of the current financial year:

	Computer Software/Licences
Opening Balance	6,419
Computer software/licences - additions	0
Less amortisation	(4,086)
Closing Balance	2,333
	6,419

Note 6: Payables

Current

Trade creditors and accruals
Grants received in advance
Funds held on trust

	2009 \$	2008 \$
Trade creditors and accruals	116,073	120,579
Grants received in advance	130,274	154,520
Funds held on trust	20,000	0
	266,347	275,099

Reference is to Note 10(b) for an explanation of Grants received in advance and Note 10(c) for Funds held on trust.

Note 7: Provisions

Current

Provision for employee benefits

Non-Current

Provision for employee benefits

Provision for employee benefits	145,371	111,324
Provision for employee benefits	33,514	20,093

Note 8: Reserves

Specific purpose reserve

Opening Balance
Transfer to/from Retained Profits
Donations- Women's Health Victoria Fund
Transfer to Melbourne Community Foundation - Women's Health Victoria Fund
Closing Balance

Opening Balance	50,893	46,298
Transfer to/from Retained Profits	(545)	495
Donations- Women's Health Victoria Fund	3,250	4,100
Transfer to Melbourne Community Foundation - Women's Health Victoria Fund	(3,250)	0
Closing Balance	50,348	50,893

The specific purpose reserve records balance of donations received and held in trust by the Melbourne Community Foundation Women's Health Victoria sub fund.

Note 9: Retained Profits

Retained profits at the beginning of the financial year
Net profit/(loss) attributable to the Association
Transfer to/from Specific Purpose Reserve
Retained profits at the end of the financial year

Retained profits at the beginning of the financial year	771,890	685,000
Net profit/(loss) attributable to the Association	22,788	91,485
Transfer to/from Specific Purpose Reserve	(2,705)	(4,595)
Retained profits at the end of the financial year	791,973	771,890

Note 10: Commitments

(a) Operating Lease Commitments

Being for rent of offices
Payable:
- not later than 1 year
- later than 1 year but not later than 5 years

	2009 \$	2008 \$
Being for rent of offices	165,686	154,646
Payable:	74,191	117,656
	239,877	272,302

The current property lease for Level One, 123 Lonsdale Street, Melbourne commenced in May 2005 for a five-year term, with an option for a further five years. Rent is payable monthly in advance. The lease contains a reinstatement clause upon termination of the lease.

The property lease for part of the Ground Floor, 210 Lonsdale Street commenced in January 2006. An option for a further three years was taken up from January 2009. Rent is payable monthly in advance. Security was not required under the terms of the lease.

Being for rent of photocopiers

Payable:

- not later than 1 year
- later than 1 year but not later than 5 years

Being for rent of photocopiers	9,128	9,128
Payable:	8,280	17,408
	17,408	26,536

A rental agreement for two photocopiers based at Level One, 123 Lonsdale Street, Melbourne commenced in July 2006 for a period of five years. A rental agreement for a photocopier based at the Ground Floor, 210 Lonsdale Street commenced in February 2006 for a period of five years.

Being for rent of postage meter equipment

Payable:

- not later than 1 year
- later than 1 year but not later than 5 years

Being for rent of postage meter equipment	1,596	1,596
Payable:	1,097	2,693
	2,693	4,289

The rental agreement for two desktop mailing postage meters commenced in March 2006 for a period of five years.

(b) Grants Received in Advance

Summary of Grants Received in Advance at balance date:

Grant Source	Balance 2008	Received	Expended	Balance 2009
	\$	\$	\$	\$
Cancer Council Victoria- Financial Assistance Program- BreaCan	3,370	0	2,354	1,016
Cancer Australia- Gynaecological Cancers- Innovations in Supportive Care	24,973	7,500	6,634	25,839
VicHealth- 1 year Prevention of Violence Against Women Project	1,417	0	1,417	0
VicHealth- 3 year Prevention of Violence Against Women Project	90,000	90,000	76,581	103,419
Heleen McPherson Smith Trust- Women's Health and Wellbeing Data Index Project	3,594	0	3,594	0
Reichstein Foundation- VWDN AIS Framework for Influencing Change Project	6,166	0	6,166	0
State Department of Human Services- VWDN AIS strategic planning and evaluation	20,000	0	20,000	0
State Office of Women's Policy- Advocacy Skills Building Workshops	5,000	0	5,000	0
Totals	154,520	97,500	121,746	130,274

(c) Funds Held on Trust

Grant Source	Balance 2008	Received	Expended	Balance 2009
	\$	\$	\$	\$
Victorian Women's Trust- VWDN History Project	0	20,000	0	20,000
Totals	0	20,000	0	20,000

Reference is to Note 13 for an explanation of funds held by Women's Health Victoria on behalf of the Victorian Women with Disabilities Network.

Note 11: Contingent Assets/Liabilities

Women's Health Victoria has provided a Bank Guarantee for \$42,150 in the event of default in terms of the property lease for Level One, 123 Lonsdale Street, Melbourne. The Council are not aware of any other contingencies requiring disclosure in the financial statements.

	2009	2008
	\$	\$
	800	800
	5,444	8,499
	244,615	147,714
	800,000	750,000
Total	1,050,859	907,013

Note 12: Cash flow Information**(a) Reconciliation of Cash**

Cash on hand	800	800
Cash at Bank	5,444	8,499
Cash on Call Deposit	244,615	147,714
Cash on Term Deposit	800,000	750,000
Total	1,050,859	907,013

(b) Reconciliation of net cash provided by operating activities to profit from ordinary activities.

Profit/(Loss) from ordinary activities	22,788	91,485
Non cash flows in profit from ordinary activities		
Depreciation and amortisation	70,206	85,108
Net Profit/(Loss) on sale/write off of disposal of plant and equipment	764	370

Changes in assets and liabilities

(Increase)/decrease in Receivables	105,607	(113,591)
(Increase)/decrease in Other financial assets	(3,250)	0
Increase/(Decrease) in Trade creditors & accruals	(4,506)	12,360
Increase/(Decrease) in Payables- Income in Advance	(4,246)	124,242
Increase/(Decrease) in Provisions	47,468	(18,793)

Net Cash provided by/(used in) operating activities

234,831	181,181
----------------	----------------

(c) The Association has no credit stand-by or financing facilities in place.

(d) There were no non-cash financing or investing activities during the period.

Note 13: Events after Balance Sheet Date -Transmission of Business - Victorian Women with Disabilities Network (VWDN)

On 1 July 2009 the VWDN assumed accountability and responsibility for Department of Human Services (DHS) Service Agreement components related to the VWDN Advocacy Information Service and other grant funds held. A total of \$54,306.20 was transferred to the VWDN during July 2009 representing balance of grant funds held, funds held on trust, employee provisions and transfer of non-current assets as at balance date 30 June 2009.

The following table indicates the impact of the transmission of business on Women's Health Victoria (WHV).

	WHV	VWDN	Total
Revenue			
Grant Revenue	1,643,715	256,212	1,900,227
Other	104,856	7,463	112,319
Total Revenue	1,748,571	263,975	2,012,546
Expenses	1,749,681	240,077	1,989,758
Net Profit	(1,110)	23,898	22,788

Balance Sheet

Assets			
Cash and Bank	988,765	62,094	1,050,859
Property, plant & equipment	220,529	7,788	228,317
Other Assets	8,264	113	8,377
Total Assets	1,217,558	69,995	1,287,553
Liabilities			
Payables	246,347	20,000	266,347
Provisions	163,596	15,289	178,885
Total Liabilities	409,943	35,289	445,232
Net Assets	787,615	34,706	842,321

Cash Flow Statement

Net cash provided by operating activities	200,108	34,723	234,831
Net cash used by investing activities	(82,486)	(8,499)	(90,985)
Net increase/(decrease)in cash held	117,622	26,224	143,846

Note 14: Related Parties

(a) Council members 2008-2009

Louise Johnson	Suzanne Young	Julie Mulvary
Sally Fawkes	Annabel Pollard	Cathy Mead
Helena Maher	Bente Jansen	Kym Daly
Lyn Allison	(co-opted June 2009)	
Verity Newnham	(resigned March 2009)	
Liz Chatham	(resigned May 2009)	
Naomi Arentz	(resigned June 2009)	

No financial advantage for members was reported during the period.

(b) Minimum Disclosure- Key Management Personnel Remuneration

	2009 \$	2008 \$
(i) Short Term Benefits		
Salary, Superannuation and non-cash benefits	105,639	102,555
(ii) Long Term Benefits		
Long Service Leave	4,623	7,311

Note 15: Economic Dependency

The Association receives the majority of its revenue from the Victorian State Department of Human Services. In 2008-2009 total recurrent grants were \$1,772,980 (Women's Health Program \$984,393, Victorian Women with Disabilities Network Advocacy Information Service \$225,346 and BreaCan \$563,241).

Notes to the Financial Statements

For the year ended 30 June 2009

Statement by Members of the Council

Note 16: Principal Activities & Operations

Women's Health Victoria (WHV) is a statewide women's health promotion, information and advocacy service. We are a non government organisation with most of our funding coming from various parts of the Victorian Department of Human Services. We work with health professionals and policy makers to influence and inform health policy and service delivery for women.

In addition, we provide information and support to people with a breast or gynaecological cancer through our BreaCan service. We also work with the Victorian Women with Disabilities Network to provide an advocacy information service.

Our work at Women's Health Victoria is underpinned by a social model of health. We are committed to reducing inequities in health which arise from the social, economic and environmental determinants of health. These determinants are experienced differently by women and men. By incorporating a gendered approach to health promotion work that focuses on women, interventions to reduce inequality and improve health outcomes will be more effective and equitable.

Women's Health Victoria's vision is for a society that takes a proactive approach to health and wellbeing, is empowering and respectful of women and girls and takes into account the diversity of their life circumstances.

Women's Health Victoria's ways of working are guided by four principles:

- We work from a feminist framework that incorporates a rights based approach.
- We acknowledge the critical importance of an understanding of all of the determinants of health and of illness to achieving better health outcomes.
- We understand that the complexities involved in achieving better health outcomes for women require well-considered, forward thinking, multi-faceted and sustainable solutions.
- We commit to 'doing our work well'; we understand that trust and credibility result from transparent and accountable behaviours.

Note 17: Association details

The principal place of business of the association is:

Women's Health Victoria Inc.
Level One, 123 Lonsdale Street
Melbourne VIC 3000

In the opinion of the Council:-

1. The financial statements present fairly the financial position of Women's Health Victoria Inc. as at 30 June 2009 and its performance for the year ended on that date in accordance with Australian Accounting Standards, mandatory professional reporting requirements and other authoritative pronouncements of the Australian Accounting Standards Board.

2. At the date of this statement there are reasonable grounds to believe that Women's Health Victoria Inc. will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Council and is signed for and on behalf of the Council by:


Council Member
Bente Jansen


Council Member
Suzanne Young

Dated this 24th day of August 2009

**INDEPENDENT AUDIT REPORT
TO THE MEMBERS OF WOMEN'S HEALTH VICTORIA INC.**

Report on the Financial Report

We have audited the accompanying financial report of Women's Health Victoria Inc. (the association) which comprises the Balance Sheet as at 30 June 2009 and the Income Statement, Statement of Changes in Equity and Cash Flow Statement for the year ended on that date, a summary of significant accounting policies and other explanatory notes and the Statement by Members of the Council.

Council's Responsibility for the Financial Report

The Council of the association is responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards (including the Australian Accounting Interpretations) and the Associations Incorporation Act (Vic) 1981. This responsibility includes establishing and maintaining internal control relevant to the preparation and fair presentation of the financial report that is free from material misstatement, whether due to fraud or error; selecting and applying appropriate accounting policies; and making accounting estimates that are reasonable in the circumstances.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. These Auditing Standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Council, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Liability limited by a scheme approved under Professional Standards Legislation.

Level 8, 607 Bourke Street
Melbourne, Vic. 3000
GPO Box 1735
Melbourne, Vic. 3001

t + 61 3 9629 4700
f + 61 3 9629 4722
e mail@mh.vhyn.com.au
w www.uhyn.com.au

Chartered Accountants:
Harold Lourie
Richard J Lindner
Rodney H Hurton

AM 48 259 373 375
Adam G Roberts
Joella F Gould

An association of independent firms throughout Australia and a member of UHY, an international association of independent accounting and consulting firms

**INDEPENDENT AUDIT REPORT
TO THE MEMBERS OF WOMEN'S HEALTH VICTORIA INC.**

Independence

In conducting our audit, we have complied with the independence requirements of Australian professional ethical pronouncements.

Auditor's Opinion

In our opinion:

The financial report of Women's Health Victoria Inc. is in accordance with Section 30(3A) of the Associations Incorporation Act (Vic) 1981, including:

- (a) giving a true and fair view of the Association's financial position as at 30 June 2009 and of their performance for the year ended on that date; and
- (b) complying with Australian Accounting Standards (including the Australian Accounting Interpretations) and the Associations Incorporation Act (Vic) 1981.

UHY Haines Norton

UHY Haines Norton
Chartered Accountants

Joella F Gould

Joella F Gould
Partner

Melbourne

Dated this 25th day of August 2009



Women's Health Victoria
Level 1, 123 Lonsdale Street
Melbourne VIC Australia 3000

T (03) 9662 3755
F (03) 9663 7955
E whv@whv.org.au
W www.whv.org.au

Postal Address
GPO Box 1160
Melbourne VIC Australia 3001

Reg. No. A0029795W
ABN 33365284944