ABORIGINAL WOMEN

Aboriginal and Torres Strait Islander adolescents and their attitudes and behaviours around relationships, contraception and pregnancy: lessons for policy and practice [Conference paper] / Larkins, Sarah; Page, Priscilla; Panaretto, Kathryn; et al.; 3. - Canberra : National Rural Health Alliance, 2009, 1-13
URL: http://eprints.jcu.edu.au/5314/1/Sarah_Larkins_rural_health_referred.pdf

The 'U Mob Yarn Up' project emerged from expressed needs of young Indigenous mothers at Townsville Aboriginal and Islander Health Service (TAIHS), and investigated attitudes and behaviours of young Indigenous people around relationships and pregnancy. This article discusses the implications of the findings in terms of health care providers and policy makers.

(Subjects: Aboriginal women / Reproductive health / Contraception / Pregnancy / Australia)

(Catalogue ID=30616)

Indigenous women's preference for climate change adaptation and aquaculture development [Monograph] / Petheram, Lisa; ...et al.. - Gold Coast, Qld : National Climate Change Adaptation Research Facility, 2013, 70 pages

Research was carried out on South Goulburn Island, Northern Territory, to improve understandings of local, Indigenous people's dependency on marine resources, and of their perspectives on climate change, and aquaculture as a means towards adapting to climate change. Workshops and interviews were carried out mostly with women, but also some men with an emphasis on the use of participatory and visual techniques to encourage discussion of the future.

(Subjects: Aboriginal women / Food security / Climate change / Northern Territory)

(Catalogue ID=30722)

Oral health and other characteristics of pregnant Aboriginal women compared with general population estimates [Serial article] / Australian Research Centre for Population Oral Health Australian Dental Journal vol. 58 no. 1, 2013, 120-124

This report examines the oral health and other key characteristics of pregnant Aboriginal women and compares against population benchmarks. This is a nested study within an over-arching randomized control trial known as 'Baby Teeth Talk'. The findings indicate that social and oral health inequalities among a population of pregnant Aboriginal women are profound and that 'Closing the Gap' initiatives in regards to oral health have some way to go before reaching their target aim.

(Subjects: Aboriginal women / Pregnancy / Oral health / Health inequity / South Australia)

(Catalogue ID=30762)

Unfinished business: Koori women and the justice system [Monograph] /

Summary of a report by the same name on the Commission's research into the experiences of Koori women and the justice system in Victoria. The increasing incarceration of Koori women - caused by a lack of appropriate diversion options and post-release support, compared to men - offends the right to equality before the law. It may also breach the positive duty to eliminate discrimination contained in the Equal Opportunity Act 2010 (Vic.). This requires work on behalf of all relevant agencies to identify and end systemic discrimination on the basis of race and/or gender. Similarly, failing to address the underlying factors that lead to increasing rates of imprisonment undermines the rights of Koori women, and their children, protected in the Charter of Human Rights and Responsibilities Act 2006 (Vic.). It also places significant financial costs on the Victorian public and works against government efforts to promote community safety.

(Subjects: Aboriginal women / Justice system / Discrimination / Human rights / Equal opportunity / Victoria)

(Catalogue ID=30707)

Using qualitative methodology to inform an Indigenous-owned oral health promotion initiative in Australia [Serial article] / Jamieson, L.M.; Parker, E.J.; Richards, L.

Health Promotion International vol. 23 no. 1, 2007, 52-59

URL: http://heapro.oxfordjournals.org/content/23/1/52.long

Indigenous Australians experience poor oral health. Oral health perceptions among a group of rural-dwelling Indigenous Australians were explored so that a culturally appropriate, community-owned oral health promotion initiative might be developed. Focus
group methodology was used, with prompt questions including oral health knowledge, oral health's role in general health, how community oral health had changed in recent times, the causes of poor oral health and ways to prevent poor oral health at a community level. Some 34 participants took part; age range 21-72 years. A core category emerged from the data and was labelled 'cultural adaptation'. Five sub-categories were also identified - lifestyle changes, oral health behaviours, barriers to dental care, impact of poor oral health and oral health literacy. Participants felt that historical legacy impacted on the oral health of community members, through continued practices of being told what to do, where to live and what oral health services were available to them. Participants perceived they had little power over their oral health or oral health care decisions.

Findings from the focus group discussions were used in the development of a context-specific, oral health promotion initiative, which involved construction of an audiovisual tool in Phase I and a series of interactive, context-specific seminars focused on key issues raised in the focus groups in Phase II. Oral health promotion initiatives among rural-dwelling Indigenous Australians may be more successful if perceptions of the anticipated audience are considered in the design stage of such strategies. [Author abstract]

(Subjects: Aboriginal women / Oral health / Health promotion / South Australia)

(Catalogue ID=30763)

ABORTION

Abortion and conscientious objection the new battleground [Serial article] / O'Rourke, Anne; de Crespigny, Lachlan; Pyman, Amanda
Monash University Law Review vol. 38 no. 3, 87-109

This paper examines the vexed issue of conscientious objection and abortion. It begins by outlining the increasing claims to conscientious objection invoked by physicians in reproductive health services. After an examination of developments overseas, the paper turns to the acrimonious debate in Victoria concerning the conscience clause and the 'obligation to refer' contained in the Abortion Law Reform Act 2008 (Vic) ('ALRA'). This paper questions the interpretation by the Catholic Church that the clause breaches its right to freedom of conscience and freedom of religion. We argue that the unregulated use of conscientious objection impedes women's rights to access safe lawful medical procedures. As such, we contend that a physician's withdrawal from patient care on the basis of conscience must be limited to certain circumstances. The paper then examines international and national guidelines, international treaties and recommendations of treaty monitoring bodies, laws in other jurisdictions, and trends in case law. The purpose of this examination is to show that the conscientious objection clause and the 'obligation to refer in ALRA is consistent with international practice and laws in other jurisdictions. Finally, the paper turns to the problematic interpretation of conscience and moral responsibility in the context of abortion. We believe that narrow interpretations of conscience must be challenged, in order to incorporate patients' rights to include the choice of abortion and other lawful treatments according to their conscience. We conclude that the conscientious objection provisions in ALRA have achieved the right balance and that there is no justifiable legal reason upon which opponents can challenge the law. [Author abstract]

(Subjects: Abortion / Conscientious objection / Law reform / Victoria)

(Catalogue ID=30758)

Abortion in Victoria [Serial article] / Malone, Jessica
Newsletter (Gippsland Women's Health Service Inc.) no. Winter, 2013, 4
Even though abortion is now legal in Victoria, there is a need for us to remain vigilant in the face of ongoing anti-choice activity, including persistent lobbying to repeal the law. The fight for safe and accessible abortion didn’t end with law reform. We need ongoing advocacy and commitment from government to improving access to abortion. [Article extract]

(Catalogue ID=30664)

Outside of marriage, the family court has no jurisdiction to prevent abortions
[Serial article] / Winterton, Jade
Australian Health Law Bulletin, June 2012, 64-65

Where the father of an unborn child is seeking to prevent an abortion, but has never been married to the mother of the child, the Family Court has no jurisdiction in the matter.

(Catalogue ID=30662)

Reproductive Health (Access to Terminations) Act 2013 : no. 72 of 2013
This legislation regulates the termination of pregnancies by medical practitioners in the state of Tasmania, and at the same time decriminalises abortion by amending the Criminal Code Act 1924 and the Guardianship and Administration Act 1995.

(Catalogue ID=30760)

BODY IMAGE

Genitalia


The book aims to question the historical taboo surrounding vaginas and the sense of shame associated with the female genitalia. 101 Vagina explores the diverse and varying stories, experiences, opinions and feelings of women from a broad range of backgrounds in regards to their sense of body image relating to their genitals.

(Catalogue ID=30621)

I'll show you mine [Monograph] / Robertson, Wrenna. - Vancouver : Show off books, 2011, 120 pages

Conceived as a reaction to increased anxiety witnessed in women regarding their genitalia, the book deconstructs societal constructions and perceptions of female genitalia. By showing images of a diverse range of female genitalia and an equally
diverse breadth of female experience, the project aims to empower women through education and by fostering communication about the reality of the female anatomy, as opposed to artistic rendering.

(Catalogue ID=30620)

Labiaplasty, race and the colonial imagination [Serial article] / Nurka, Camille; Jones, Bethany
Australian Feminist Studies vol. 28 no. 78, 2013, 417-442
URL: http://www.tandfonline.com/doi/abs/10.1080/08164649.2013.868332

This article seeks to interrogate the cultural meaning of cosmetic labiaplasty surgery (CLS) in the Western context through a historical examination of the symbolic function of the labia in relation to the construction of racial difference in early colonial race science discourse. It seeks to think through CLS as materially invested in a transnational masculinist imperial encounter with indigenous women from the Cape of Good Hope, who were identified in the race sciences of the eighteenth to nineteenth centuries as 'Hottentots (and sometimes 'Bushwomen). We suggest that the production of desire in contemporary CLS practice and discourse has its roots in colonial anthropological Western representations of black female sexuality. The fear of abnormality so strikingly invoked in the medical literature and contemporary accounts of women's desire for CLS appears as a displacement of racial abjection onto the genitals and a production of the female body as the border object upon which the desire for whiteness is transcribed. We identify two interlocking features of this production of white desire: the rejection of the animal body and the correction of sexual deviancy, both of which are articulated through race, specifically the racialised 'Hottentot' bodies conjured up by the white, colonial imagination. [Author abstract]

(Catalogue ID=30757)

BREAST CANCER


This project is a collaborative effort from several cancer support organisations in the San Francisco area. Together they invited more than seventy artists and writers who had faced breast cancer to submit work for exhibition and publication. The result is Art.Rage.Us. - a powerful collection of journal entries, poems, paintings, sculptures, photographs and craftworks. These are stirring expressions of anguish, fear, love and hope - giving creative expression to each of the contributors' experience of breast cancer.

(Catalogue ID=30672)

CANCER

Assertiveness [CD-ROM] / Astl, Belinda / BreaCan vol. 89. - Melbourne : BreaCan,
Do you consider yourself an assertive woman, but faced with a cancer diagnosis found it hard to express your needs clearly and calmly? Assertiveness is a vital life skill that enables us to look after our own best interests while remaining respectful to others. Belinda Astl, a psychologist in private practice, presents this session on learning and practising assertiveness skills.

(Catalogue ID=30734)


One of three resources in the Cancer Australia 'Consumer resource kit'. It provides information about the skills required for people who are facilitating a peer support group.

(Catalogue ID=30732)


One of three documents comprising the Cancer Australia 'Consumer resource kit'. Provides general information about Cancer Australia, and tips about participation as a consumer representative at a national level within Cancer Australia.

(Catalogue ID=30730)


In July 2009, Jim Stynes was diagnosed with cancer and given six months to live. The diagnosis caught him by surprise. He was 42, healthy, fit, and he didn't have time for illness He was Director of the Reach Foundation, President of Melbourne Football Club, father of two primary school-aged kids, and husband of Sam. Knowing his odds weren't good, but with so much to lose, Jim put everything he had into trying to beat the disease. Jim's ability to use mind over matter, to never give in, to overcome pain, to believe in himself and his will to succeed gave him two extra years on the prognosis. He had more than 25 tumours removed from his brain and stomach, and defied expectations time and time again. Based on diary entries, this book tells what Jim found out about himself when things were at their worst - about what really counts when you're stacking it all up. It's a moving, inspiring tribute to a life lived fearlessly. [Synopsis from Angus and Robertson]

(Catalogue ID=30671)

Presents information about living with gynaecological cancer through interviews with women, family members and health care providers. Contents include: women's stories, relationships, physical aspects, fertility, menopause, sexual issues, life after gynaecological cancer, and links to further information. The women's stories include experience of cervical cancer, ovarian cancer, and endometrical cancer.  

( Subjects: Gynaecological cancer / Cervical cancer / Ovarian cancer / Endometrial cancer / New South Wales / Lifehouse )

(Catalogue ID=30704)

URL: http://breacan.org.au/services-events/information-sessions/archive

One of the challenges for many women living with advanced cancer is to maintain hope in the face of an uncertain future. In this session Tara McKinty, an experienced counsellor who has worked for many years with people dealing with life challenging illness and loss, discusses practical strategies to help us live well, nurture ourselves and regain our balance.  

( Subjects: Advanced cancer / Therapy / Wellbeing / Psychological wellbeing / Advanced breast cancer )

(Catalogue ID=30605)

Now what? : finding your new normal [CD-ROM] / Lethborg, Carrie / BreaCan vol. 88. - Melbourne : BreaCan, Women's Health Victoria, 12 June 2013, 1 disk ; 65 min.. - ( BreaCan What's On Information Session; 88 )  
URL: http://breacan.org.au/services-events/information-sessions/archive

What happens after the active treatment for cancer has ended? In this session Dr Carrie Lethborg, Clinical Leader, Cancer Social Work, and Co-ordinator of Psychosocial Cancer Care at St Vincent's Hospital, talks about the many issues common to women who have completed treatment. She also discusses strategies to assist recovery, goal setting and learning to live with uncertainty.  

( Subjects: Urinary incontinence / Faecal incontinence / Middle aged women / Women / Australia )

(Catalogue ID=30604)

Out of sight : not out of mind [CD-ROM] / Mitton, Ingrid / BreaCan vol. 87. - Melbourne : BreaCan, Women's Health Victoria, 5 June 2013, 1 disk ; 75 min.. - ( BreaCan What's On Information Session; 87 )  
URL: http://breacan.org.au/services-events/information-sessions/archive

Continence issues (bladder and/or bowel control) commonly affect women in mid-life, including those who are perimenopausal or have had gynaecological surgery. Ingrid Mitton is a Continence and Women's Health Physiotherapist, and in this session she discusses the practical management of continence.  

( Subjects: Urinary incontinence / Faecal incontinence / Middle aged women / Women / Australia )

This book is for anyone who needs to talk to a young person about an adult with cancer, providing a starting point and some ideas to ease the way. It covers the entire cancer journey, from breaking the news about a cancer diagnosis to coping with life after treatment. It includes many family stories, ideas from parents, and suggested wording for answers to questions that children could ask.

Skin cancer

Aspirin linked to lower skin cancer risk in women [Serial article] / Creagh, Sunandra
The Conversation no. 11 March, 2013, 1-1
URL: https://theconversation.com/aspirin-linked-to-lower-skin-cancer-risk-in-women-12732

Women who use aspirin for five or more years have a 30% lower risk of developing melanoma skin cancer than women who don't take aspirin, a new study has found. Previous studies have linked aspirin with a reduced risk of gastric, colorectal and breast cancer but the new study suggests its anti-inflammatory properties may play a role in skin cancer risk too. [Article extract]

Breast and melanoma: how they are linked [Webpage] / Luo, Su; Tsao, Hensin. - New York : Skin Cancer Foundation, 2011, 1 page
URL: http://www.skincancer.org/skin-cancer-information/melanoma/breast-cancer-melanoma-link

While epidemiologic studies have long noted an association between breast cancer and melanoma, the exact nature of this relationship is far from understood. It could be that DNA damage and genetic changes hindering DNA repair may affect the risk of many different types of cancers. For patients who have had breast cancer, an annual total-body skin check by a trained professional makes sense, and more frequent exams may be needed for those who have gone through radiation therapy. Likewise, post-melanoma surveillance typically should involve evaluation of the lymph nodes near the breast. Teaching patients to examine this area routinely could lead to earlier detection of breast cancer metastases. [Author conclusion]

Subjects: Cancer / Communication / Parenting / Children / Information provision / Coping strategies / Relationships / Emotions / Psychological aspects / Grief / Death / Youth / Self help / Australia

Subjects: Skin cancer / Preventive health / Drug therapy / Analgesics

Subjects: Skin cancer / Breast cancer / Women / Comorbidity / Risk factors / Screening / Self-examination

Subjects: Skin cancer / Breast cancer / Women / Comorbidity / Risk factors / Screening / Self-examination
A comparison of trends in melanoma mortality in New Zealand and Australia: the two countries with the highest melanoma incidence and mortality in the world

BACKGROUND: New Zealand and Australia have the highest incidence and mortality rates from cutaneous melanoma in the world. The predominantly fair-skinned New Zealanders and Australians both enjoy sun, tanned skin and the outdoors, and differences in these activities among generations have been important determinants of trends in melanoma mortality. We examined whether New Zealand trends in melanoma mortality mirror those in Australia, through detailed comparison of the trends in both countries from 1968 to 2007. METHODS: Five-year age-specific and age-standardised mortality rates were calculated for each country for 5-year time periods. Tests for trends in age-specific rates were performed using the Mantel-Haenszel extension chi-square test. The age-adjusted mortality rate ratios for New Zealand/Australia were plotted against period of death to show relative changes in mortality over time. Age-specific mortality rates were plotted against period and the median year of birth to illustrate age-group and birth cohort effects. To compare the mortality of birth cohorts, age-adjusted melanoma mortality rate ratios were calculated for the birth cohorts in the quin-quennial tables of mortality rates. RESULTS: The age-standardised mortality rate for melanoma increased in both sexes in New Zealand and Australia from 1968 to 2007, but the increase was greater in New Zealanders and women in particular. There was evidence of recent significant decreases in mortality in younger Australians and less so in New Zealand women aged under 45 years. Mortality from melanoma increased in successive generations born from about 1893 to 1918. In Australia, a decline in mortality started for generations born from about 1958 but in New Zealand there is possibly a decrease only in generations born since 1968. CONCLUSIONS: Mortality trends in New Zealand and Australia are discrepant. It is too early to know if the pattern in mortality rates in New Zealand is simply a delayed response to melanoma control activities compared with Australia, whereby we can expect the same downward trend in similar age groups in the next few years. Specific research is needed to better understand and control the increases in mortality and thickness of melanoma in New Zealand.

Developmental research for National Skin Cancer Campaign

This research project informed the development of the National Skin Cancer Awareness Campaign. Group discussions and in-depth interviews were conducted with adolescents, young adults, parents and adults aged 50 years and over, and people who had had a skin cancer removed. The research explored knowledge, attitudes, awareness and understanding of sun protection and early detection of skin cancer.

Subjects: Skin cancer / Health promotion / Health behaviours / Attitudes / Surveys / Preventive medicine / Australia

(Catalogue ID=30696)

URL: http://ije.oxfordjournals.org/content/27/5/751.short

BACKGROUND: Evidence linking female hormones to the development of malignant melanoma has been contradictory. The purpose of this study was to examine the risk of melanoma in relation to exogenous and endogenous hormonal variables in women, including oral contraceptives, replacement oestrogens, pregnancy, and menopause.

METHODS: Hormonal and reproductive factors were evaluated using data from a personal-interview population-based case-control study of melanoma in women conducted in Connecticut during 1987-1989. Caucasian female incident invasive melanoma cases (n = 308) were confirmed by standardized histopathological review. Caucasian female controls (n = 233) were selected by random digit dialling and frequency-matched on age. Data were analysed using multivariate logistic regression.

RESULTS: Ever being pregnant, age at first pregnancy, current use of replacement oestrogens, ever use of oral contraceptives, duration of use of oral contraceptives, and age at first use of oral contraceptives were not associated with melanoma. Among other variables, cases were more than twice as likely as controls to report a single pregnancy lasting >6 months, but this association lacked a dose-response relationship. Menopause and body mass index were not independently associated with risk of melanoma. However, this analysis did suggest that menopause and body mass index may be interactive risk factors. Melanoma cases were three times more likely than controls to be obese and report natural menopause when compared to thin/acceptable premenopausal women (OR = 3.00, 95% CI: 1.03-8.73). CONCLUSIONS: These data do not provide strong evidence that hormonal and reproductive factors are associated with risk of melanoma in women, although the few positive results should be explored further.

Subjects: Skin cancer / Melanoma / Women / Risk factors / Hormonal contraception / Hormone therapy / Pregnancy / Menopause / Reproductive health / Obesity / United States

(Catalogue ID=30684)

URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3796942/

BACKGROUND: Women may experience distress or changes in their quality of life following treatment for early-stage melanoma. In order to plan future interventions and identify areas of primary concern, we conducted a cross-sectional survey to describe the experiences of women treated for clinically localized melanoma.

METHODS: We examined quality of life, levels of distress, appearance perceptions, body image, fear of
recurrence, and reproductive concerns in 100 patients (age 21-90 years, M = 54.34 years). Most (61%) had melanoma of the extremity, with a median depth of 1.1 mm (range, 0-10.5 mm). RESULTS: Significant depressive symptomatology occurred in 10% of patients, and 12% reported a clinically established high level of intrusive thoughts related to melanoma. Quality-of-life scores indicated more disruption on psychological, compared with social and physical functioning. Also, 64% of women rated their appearance as worse post-treatment; 23% were unsatisfied with the appearance of the surgical site. Recurrence concerns indicated significant worry about health and death. Most patients (>85%) were not concerned about fertility, but 52% worried that future children would have an increased risk of cancer. CONCLUSIONS: Some women treated for clinically localized melanoma reported high levels of distress associated with their altered body image and fear of recurrence. Improvements in patient education prior to surgical intervention may reduce the distress associated with the diagnosis and treatment of melanoma.

(Catalogue ID=30676)


BACKGROUND: Radiotherapy was commonly used to treat benign conditions, especially skin diseases, during the first half of the twentieth century. Previous studies have shown that radiotherapy for some of these conditions increases the risk of developing breast cancer. Although breast cancer associated with previous radiotherapy for acne has been reported, no statistically significant correlation has been established. OBJECTIVE: The aim of this study was to determine whether radiotherapy for acne is a risk factor for subsequent development of breast cancer. METHODS: A retrospective nested case-control study was conducted using the cohort of all patients referred for Mohs micrographic surgery to the senior author (R. G. B.) from 1978 to 2003. The case group consisted of 244 women who were skin cancer patients and who had received radiotherapy for acne. The control group consisted of 244 age-matched women skin cancer patients from the same records randomly selected within the initial Mohs micrographic surgery treatment year. Clinical data from both groups regarding cancer history and radiotherapy were extracted and statistically analyzed. RESULTS: Women skin cancer patients who had received radiotherapy for acne have a prevalence of breast cancer of 15% compared with 6.6% in control women skin cancer patients, for an odds ratio (OR) of 2.5 (P = .0033; 95% confidence interval, 1.3-4.6). Increased prevalence is correlated with age at treatment younger than 20 years (age-adjusted OR, 2.9; age-adjusted P = .002), treatment sessions numbering 5 or more (age-adjusted OR, 3.5; age-adjusted P = .005), and treatment year occurring before 1950 (age-adjusted OR, 2.9; age-adjusted P = .00013). LIMITATIONS: The data used are based primarily on patient history and physical examinations and are therefore limited by the accuracy of the patient and the caregiver. CONCLUSION: Women with skin cancer exposed to previous radiotherapy for acne are significantly more likely to develop breast cancer than their age-matched controls with skin cancer. Therefore all women previously treated for acne with radiotherapy should be identified and closely monitored for subsequent breast cancer development. [Author abstract]

(Catalogue ID=30678)

Despite attempts to regulate the tanning industry, indoor tanning is a relatively common practice, particularly in the USA and other Western countries. Young women who tan to enhance their appearance are the most common patrons of tanning salons. Indoor tanning has been linked to the development of melanoma and non-melanoma skin cancers, and a disturbing increase in the incidence of melanoma among young adult women has been observed recently. This chapter reviews the literature concerning some of the key facts about indoor tanning including the prevalence of indoor tanning around the world, evidence supporting the association of indoor tanning with skin cancers, the historical context of indoor tanning, psychological motivations for indoor tanning including tanning dependence, and attempts to regulate the tanning industry.

Subjects: Tanning / Solariums / Risk factors / Women / Skin cancer / Health behaviour / Body image / Cosmetic procedures / Regulation and control / Psychological wellbeing

(Catalogue ID=30693)


Covers effective interventions at a national level for prevention of skin cancer in Australia from UV radiation. Policy priorities include: (1) Need for a long-term national skin cancer awareness campaign; (2) Perceptions of tanning; (3) Changing adolescents? sun exposure patterns; (4) Vitamin D: a balanced approach to UV risks and benefits; (5) Promoting the SunSmart UV Alert; (6) Climate change; (7) Eradication of solariums; (8) Supporting GPs in skin cancer control; and (9) Screening for melanoma.

Subjects: Skin cancer / Sunburn / Health policy / Preventive medicine / Health promotion / Australia

(Catalogue ID=30699)

URL: http://www.aihw.gov.au/publication-detail/?id=6442468158

Non-melanoma skin cancer (NMSC) is the most common cancer diagnosed in Australia, with around 400,000 new cases per year. However, data on incidence and prevalence are not routinely collected. This report analyses data on NMSC available from the national general practice, hospitalisation and mortality collections to illustrate the burden of NMSC in Australia. Differentials by population subgroup (geographic region, socioeconomic status and country of birth) are provided where possible.

Subjects: Non-melanoma skin cancer / Burden of disease / Mortality / General practice / Statistics / Australia

(Catalogue ID=30689)

Policy at a glance: skin cancer prevention policy [Monograph] / Public Health
Skin cancer rates in Australia are amongst the highest in the world and account for 80% of all new cancers diagnosed each year. PHAA will continue to consult with an alliance of academics, allied health professionals, relevant industry groups, interested non-government organisations and key stakeholders to work towards a national framework for Skin Cancer Health Promotion for action at Australian Government and State levels. PHAA will promote the development of a coordinated national approach to prevention and early detection of skin cancer.

Portrayal of tanning, clothing fashion and shade use in Australian women's magazines, 1987-2005 [Serial article] / Dixon, Helen; Dobinson, Suzanne; Wakefield, Melanie; et al. 
Health Education Research vol. 23 no. 5, 2008, 791-802
URL: http://her.oxfordjournals.org/content/23/5/791.abstract

To examine modelling of outcomes relevant to sun protection in Australian women's magazines, content analysis was performed on 538 spring and summer issues of popular women's magazines from 1987 to 2005. A total of 4949 full-colour images of Caucasian females were coded for depth of tan, extent of clothing cover, use of shade and setting. Logistic regression using robust standard errors to adjust for clustering on magazine was used to assess the relationship between these outcomes and year, setting and model's physical characteristics. Most models portrayed outdoors did not wear hats (89%) and were not in shade (87%). Between 1987 and 2005, the proportion of models depicted wearing hats decreased and the proportion of models portrayed with moderate to dark tans declined and then later increased. Younger women were more likely to be portrayed with a darker tan and more of their body exposed. Models with more susceptible phenotypes (paler hair and eye colour) were less likely to be depicted with a darker tan. Darker tans and poor sun-protective behaviour were most common among models depicted at beaches/pools. Implicit messages about sun protection in popular Australian women's magazines contradict public health messages concerning skin cancer prevention.


Individuals who choose to use fake tan should be aware that: (1) Fake tan stains the skin a darker colour, but this colour does not provide protection against UV radiation; (2) Fake tan products that contain sunscreen will provide protection for only a few hours after application - not for the duration of the ‘tan’; and (3) There is no fake tanning product
available that has been scientifically proven to stimulate the production of melanin.

(Catalogue ID=30691)

URL: http://heapro.oxfordjournals.org/content/19/3/369

The incidence of skin cancer is increasing worldwide. Protecting the skin from the sun by wearing protective clothing, using a sunscreen with appropriate sun protection factor, wearing a hat, and avoiding the sun are recommended as primary preventive activities by cancer agencies. In this paper the recent data relating to skin cancer primary preventive behaviour in Australia and other countries is reviewed. Comparison of the studies in a table format summarizing the methods, objectives, participants, findings and implications may be obtained from the corresponding author. The sun protection knowledge, attitudes and behaviour patterns observed in Australia are similar in other countries, although Australian studies generally report higher knowledge levels about skin cancer and higher levels of sun protection. The findings suggest that sunscreen is the most frequent method of sun protection used across all age groups, despite recommendations that it should be an adjunct to other forms of protection. While young children's sun protective behaviour is largely influenced by their parents' behaviours, they are still under protected, and sun protective measures such as seeking shade, avoiding the sun and protective clothing need to be emphasized. Adolescents have the lowest skin protection rates of all age groups. Within the adult age range, women and people with sensitive skin were most likely to be using skin protection. However, women were also more likely than men to sunbath deliberately and to use sun-tanning booths. The relationship between skin protection knowledge and attitudes, attitudes towards tanning and skin protection behaviour needs further investigation. Further studies need to include detailed assessments of sunscreen use and application patterns, and future health promotion activities need to focus on sun protection by wearing clothing and seeking shade to avoid increases in the sunburn rates observed to date.

(Catalogue ID=30686)

Psychosocial correlates of sunburn among young adult women [Serial article] / Heckman CJ; Darlow S; Cohen-Filipic J; et al. International Journal of Environmental Research and Public Health vol. 9 no. 6, 2012, 2241-51
URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3397375/?report=classic

Skin cancer is an increasingly common disease, particularly among young adult women. Sunburn early in life is a risk factor for skin cancer. Few studies have reported on psychosocial correlates of sunburn. The current study consisted of an online survey of undergraduate women from a university in the northeastern part of the USA. A logistic regression demonstrated that young women who reported a history of four or more sunburns were significantly more likely to report fair skin, higher perceived susceptibility to skin cancer, greater perceived benefits of tanning (e.g., appearance enhancement), lower perceived control over skin protection, and more frequent sunscreen use. Sunbathing was not associated with a greater number of sunburns. These results suggest that young women who sunburn more often possess other skin cancer risk
factors, are aware of their susceptibility to skin cancer, and try to use sunscreen, but feel limited control over their skin protection behavior and are not less likely to sunbathe than others. Therefore, interventions are needed to assist high risk young women in asserting more control over their sun protection behavior and perhaps improve the effectiveness of the sunscreen or other skin protection methods they do employ.

(Subjects: Skin cancer / Young women / Risk factors / Sunburn / Tanning / Health behaviour / Tertiary students / United States)

(Catalogue ID=30682)

Skin cancer facts and stats [Monograph] / SunSmart Victoria. - Carlton, Vic.: SunSmart Victoria, 2013, 1 page

A brief overview of skin cancer morbidity and mortality in Victoria, produced by SunSmart Victoria. The SunSmart program is jointly funded by Cancer Council Victoria and the Victorian Health Promotion Foundation (VicHealth).

(Subjects: Skin cancer / Melanoma / Statistics / Burden of disease / Mortality rates / Australia)

(Catalogue ID=30675)


Sections include: (1) the case for changes, and the policy, legislative and regulatory context; (2) population target groups, settings, and potential partners and key stakeholders; (3) strategic directions - specific actions and programs to reduce skin cancer incidence and mortality in Victoria; and (4) governance and reporting.

(Subjects: Skin cancer / Health policy / Public policy / State government / Health promotion / Preventive medicine / Victoria)

(Catalogue ID=30698)

URL: http://www.nature.com/bjc/journal/v106/n5/full/bjc201222a.html

BACKGROUND: The SCREEN (Skin Cancer Research to provide Evidence for Effectiveness of Screening in Northern Germany) project involved population-wide skin cancer screening with whole-body examination by general physicians and dermatologists. It was conducted in the German state of Schleswig-Holstein (July 2003-June 2004), but not in the German state of Saarland. METHODS: The population-based registries of Schleswig-Holstein and Saarland provided data on melanoma incidence before, during, and after SCREEN to assess the association of skin cancer screening with incidence. RESULTS: Approximately 19% of the Schleswig-Holstein population participated in SCREEN (women: 27%, men: 10%). A total of 52% of all melanomas
diagnosed during SCREEN in Schleswig-Holstein were detected as part of the project. Melanoma incidence increased during SCREEN (invasive melanoma in women: +8.9 per 100,000 (95% confidence intervals (CI): 6.1; 11.7); men: +4.0 per 100,000 (95% CI: 1.6; 6.4)) and decreased afterwards (women: -10.6 per 100,000 (95% CI: -13.3; -7.9); men: -4.1 per 100,000 (95% CI: -6.5; -1.7)). Similar changes were not observed in Saarland that had no such project. The differences between the two states were greatest among women, the group with the greater SCREEN participation. CONCLUSION: The SCREEN project had a substantial impact on melanoma incidence. This is consistent with the impact of effective screening for other cancers. [Author abstract]

(Catalogue ID=30687)


URL: http://www.swpho.nhs.uk/resource/item.aspx?RID=40483

Discusses sun protection and policy issues; behavioural goals; theoretical foundations; target populations; probable behavioural triggers; recommended interventions; communication strategies, detection strategies, monitoring effectiveness; and research recommendations. The target populations are: (1) teenagers / young adults; (2) mothers of young children / childcare facilities; (3) schools and parents of school children; (4) sporting participants and spectators; and (5) outdoor workers. Draws on learnings from many other sun protection health promotion programs in the United Kingdom, United States, and Australia.

(Catalogue ID=30697)


Sunbeds and solariums do not provide a safe tan. Ultraviolet (UV) radiation from solariums can increase your risk of developing skin cancer. Solariums can also cause eye damage and immediate skin damage such as sunburn, irritation, redness and swelling. Commercial tanning units in Victoria will be banned from December 31, 2014 in line with similar provisions in New South Wales and South Australia.

(Catalogue ID=30692)

Sunscreen, skin cancer and the Australian summer [Webpage] / Slevin, Terry

The Conversation no. 23 Jan, 2013, 1 page

Discusses the importance of sunscreen as a useful adjunct to other sun protection measures. Rather than being our first line of defence, it should be the last. Not only do we seldom use enough, but it is easily sweated off and rubbed off as we towel down or rub water from our eyes.

(Subjects: Skin cancer / Risk factors / Sunburn / Health behaviours / Australia)

(Catalogue ID=30690)

Tanning behaviors and determinants of solarium use among indoor office workers in Queensland, Australia [Serial article] / Gordon, Louisa G.; Hirst, Nicholas G.; Green, Ada le C.; et al.
Journal of Health Psychology vol. 17 no. 6, 2012, 856-865
(Preprint version)

Using cross-sectional survey data from Brisbane, Australia, this study identifies prevalence and factors associated with indoor tanning in office workers. Over 12-months, 72/2867 (2.5%) survey participants used solaria. Twenty-eight sunbed users (39%) tanned outdoors and used spray-tans and 42 (58%) reported burns after indoor tanning. Results from regression modelling suggests the strongest predictors of sunbed use were beliefs that tanning was safer indoors than outdoors (OR 6.1, 95%CI: 2.6-14.0) and engaging in outdoor tanning (OR 4.1, 95%CI: 1.8-9.0). We recommend that health authorities promote health gains by reducing ultraviolet radiation exposure or substituting indoor tanning with a spray-on tan.

(Subjects: Tanning / Solariums / Cosmetic procedures / Sunburn / Risk factors / Attitudes / Queensland)

(Catalogue ID=30681)

Use of tanning beds and incidence of skin cancer [Serial article] / Zhang, M.; Qureshi, A.; Geller, A. C.; et al.
Journal of Clinical Oncology vol. 30 no. 14, 2012, 1588-93
URL: [http://jco.ascopubs.org/content/30/14/1588](http://jco.ascopubs.org/content/30/14/1588)

PURPOSE: We sought to evaluate the risk effect of tanning bed use on skin cancers among teenage and young adults. We also expected to determine whether a dose-response relationship was evident. PATIENTS AND METHODS: We observed 73,494 female nurses for 20 years (from 1989 to 2009) in a large and well-characterized cohort in the United States and investigated whether frequency of tanning bed use during high school/college and at ages 25 to 35 years were associated with a risk of basal cell carcinoma (BCC), squamous cell carcinoma (SCC), and melanoma. We used Cox proportional hazards models and carefully adjusted for host risk factors, ultraviolet index of residence, and sun exposure behaviors at a young age. RESULTS: During follow-up, 5,506 nurses were diagnosed with BCC, 403 with SCC, and 349 with melanoma. The multivariable-adjusted hazard ratio (HR) of skin cancer for an incremental increase in use of tanning beds of four times per year during both periods was 1.15 (95% CI, 1.11 to 1.19; P < .001) for BCC, 1.15 (95% CI, 1.01 to 1.31; P = .03) for SCC, and 1.11 (95% CI, 0.97 to 1.27; P = .13) for melanoma. Compared with tanning bed use at ages 25 to 35 years, we found a significantly higher risk of BCC for use during high school/college (multivariable-adjusted HR for use more than six times per year compared with no use was 1.73 during high school/college v 1.28 at ages 25 to 35 years; P for heterogeneity < .001). CONCLUSION: Our data provide evidence for a dose-response relationship.
between tanning bed use and the risk of skin cancers, especially BCC, and the association is stronger for patients with a younger age at exposure. [Author abstract]

(Subjects: Skin cancer / Solariums / Tanning / Risk factors / Age factors / United States)

(Catalogue ID=30688)

What influences the uptake of information to prevent skin cancer? A systematic review and synthesis of qualitative research [Serial article] / Garside, Ruth; Pearson, Mark; Moxham, Tiffany
Health Education Research vol. 25 no. 1, 2010, 162-182
URL: http://her.oxfordjournals.org/content/25/1/162.abstract

Skin cancer is an increasing problem in Europe, America and Australasia, although largely preventable by avoiding excessive ultraviolet (UV) exposure. This paper presents the findings of a systematic review of qualitative research about the prevention of skin cancer attributable to UV exposure. The aim is to understand elements that may contribute to the successful or unsuccessful conveyance of skin cancer prevention messages and their uptake by the public. A systematic review was undertaken using evidence identified through searching electronic bibliographic databases and Web sites and reference list checks. Predefined inclusion and exclusion criteria were used. Sixteen study reports (relating to 15 separate studies) were included from the United Kingdom, United States, Australia, Canada and New Zealand. Each included study was quality appraised, and the findings were extracted into an evidence table. A coding scheme, framed by the Health Belief Model, was developed by the reviewers and informed analysis and synthesis. This showed that most people perceived their susceptibility to skin cancer, and its severity, as low. While benefits of adopting changed behaviour were acknowledged, there were substantial barriers to this, including positive perceptions of a tan as healthy and attractive and the hassle of covering up or using sunscreen. Peers, parents and media may offer cues to action that encourage adoption of preventative behaviour and finally self-efficacy or the perceived ability to make such changes. Effective health education messages will need to address the barriers to adopting protective behaviours identified through this review. [Author abstract]

(Subjects: Skin cancer / Health promotion / Health education / Health literacy / Health behaviours / Preventive medicine / Communication / International comparisons)

(Catalogue ID=30679)

DISABILITY

Menstrual and contraceptive management in women with an intellectual disability [Serial article] / Grover, Sonia R.

Management of the menstrual and contraceptive needs of young women with an intellectual disability is similar in most cases to the management of non-disabled women. Surgical management is required infrequently.

(Subjects: Women with disabilities / Contraception / Menstruation / Australia)

(Catalogue ID=30614)

EATING DISORDERS
Eating disorders and oral health: a review of the literature [Serial article] / Frydrych, AM; Davies, GR; McDermott, BM. Australian Dental Journal vol. 50 no. 1, 2005, 6?15.

This article is a review of the recent literature pertaining to the oral sequelae of eating disorders (EDs). Dentists are recognized as being some of the first health care professionals to whom a previously undiagnosed eating disorder patient (EDP) may present. However, despite the prevalence (up to 4 per cent) of such conditions in teenage girls and young adult females, there is relatively little published in the recent literature regarding the oral sequelae of EDs. This compares unfavourably with the attention given recently in the dental literature to conditions such as diabetes mellitus, which have a similar prevalence in the adult population. The incidence of EDs is increasing and it would be expected that dentists who treat patients in the affected age groups would encounter more individuals exhibiting EDs. Most of the reports in the literature concentrate on the obvious clinical features of dental destruction (perimolysis), parotid swelling and biochemical abnormalities particularly related to salivary and pancreatic amylase. However, there is no consistency in explanation of the oral phenomena and epiphenomena seen in EDs. Many EDPs are nutritionally challenged; there is a relative lack of information pertaining to non-dental, oral lesions associated with nutritional deficiencies. [Author abstract]

(Catalogue ID=30744)

ENVIRONMENT

Case study report: implementing climate change adaptation for Women's Health In the North: VCCCR Implementation Adaptation Project [Monograph] / Millin S.; et al.. - Melbourne: RMIT University, Victorian Centre for Climate Change Adaptation Research, Women's Health in the North, 2013.

The Implementing Adaptation project was funded by the Victorian Government. It sought to gain a better understanding of the adaptation capabilities and needs of different types of government service providers and funded agencies. Women's Health In the North was one of ten organizations which took part to facilitate the implementation and testing of tools and methodologies for climate change adaptation planning and decision-making.

(Catalogue ID=30723)

Climate change: how it will put women's health at risk globally [Serial article] / Armstrong, Fiona. Women's Agenda [Blog] no. May 9, 2013, 1.

This is an edited extract of Fiona Armstrong's keynote address 'Implications of Climate Change for Women's Health' to the 7th Australian Women's Health Conference: 'Gender Matters: Determining Women's Health' on 9 May 2013. In both developed and developing nations, women face greater risks from climate change because of the social construction...
of women's roles, their lower economic participation and poverty, a lack of access to power, and their longer life expectancy. Female empowerment is key to societal health and wellbeing, and vital for effective action on climate change. Contends that more can be done in Australia to ensure women occupy enough civil, corporate and political leadership positions to get the sort of action on climate change that is needed.

(Catalogue ID=30716)


This report addresses the 'human face' of climate change - what it means for the mental health of individuals, families and communities in Australia. Increasing disruption to the global environment will gradually weaken the environmental and social conditions that underpin our physical and psychological health. The symptoms seen already, in individuals and communities beleaguered by fire, storms, floods and drought, are the early warning signs. There is still time to avoid the human and other costs of global warming blowing out, time to realise the many health and social benefits of action, and so time to restore wellbeing and hope.

(Catalogue ID=30718)


This report examines the distinct impacts of climate change on women in both developed and developing countries, women's contribution to climate change, and their involvement in decision making about tackling climate change. The report concludes that remedial action is required on three fronts: gender-sensitive strategies to mitigate climate change; addressing gender inequality; and gender-sensitive strategies for adapting to climate change. Argues that one of the most effective ways of ensuring that all three of the above priorities are met is increasing the representation of women in decision-making bodies, particularly at the national and international levels. Other strategies include a gender audit of stakeholders, and inclusive mainstreaming policies and resources for women-centred solutions.

(Catalogue ID=30715)

Climate change adaptation is necessary to reduce vulnerability to its harmful effects. Climate change exhibits a gendered element, in that the respective vulnerabilities of men and women tend to differ, reflecting men's and women's socially and culturally defined roles and responsibilities. Furthermore, these gendered roles vary from place to place. The gendered nature of vulnerability needs to be examined at the local level, ideally using gender analysis to yield sex-disaggregated data. Such analysis ensures that adaptation interventions take account of gender differences and thus do not inadvertently reproduce gender inequalities in vulnerability.

(Catalogue ID=30724)


URL: http://www.who.int/globalchange/publications/reports/gender_climate_change/en/

This report provides a first review of the interactions between climate change, gender and health. It documents evidence for gender differences in health risks that are likely to be exacerbated by climate change, and in adaptation and mitigation measures that can help to protect and promote health. The aim is to provide a framework to strengthen World Health Organization (WHO) support to Member States in developing health risk assessments and climate policy interventions that are beneficial to both women and men.

(Catalogue ID=30725)


Discusses in detail the principal gender considerations that must be taken into account in the face of climate change. Includes an extensive annotated bibliography which summarizes and organizes information sources about: how climate change and gender are linked, policy formulation challenges, and good practices that confirm that gender equality is a catalyst for success when confronting climate change. Analyses the key international frameworks that provide a reference for integrating the gender approach into responses to climate change.

(Catalogue ID=30714)

**Sustainability Festival 2012 : women and climate change** [Quiz] [Monograph] /
Women's Health In the North is concerned about environmental justice! How much do you know about women and climate change? Test your knowledge with this quick quiz.

(Catalogue ID=30721)

What can a gender lens add to research on climate change mitigation and adaptation? [panel session] [AV Presentation] / Alston, Margaret; Lee-Koo, Katrina; Lahiri-Dutt, Kuntala. - Canberra : Australian National University. Crawford School of Public Policy, 3 May 2010, Audio file (MP3) and argument summaries; 2 pages. - ( RE and D Argument Series )

This panel discussion, held on 13 May 2010, is part of a 3-part seminar series on the relevance of gender for the development of strategies to deal with climate change. Margaret Alston contends that while women should play a greater role in the formation of climate change policy, climate change is largely gender blind. Dr Katrina Lee-Koo contends that as the consequences of climate change are deeply gendered, gender should be an important consideration in any attempt to understand or address the social, political, economic and cultural impacts of climate change. Dr Kuntala Lahiri-Dutt contends that the gender inequalities already prevalent in the developing world will only be exacerbated by the effects of climate change, and that these vulnerabilities must be considered and integrated into climate change interventions.

(Catalogue ID=30719)

Women and environmental justice : a literature review [Monograph] / Weiss, Cathy / Women's Health in the North; Women's Health Goulburn North East. - Thornbury, Vic. : Women's Health in the North, 2011, 29 pages

In order to ascertain the effects that climate change and other environmental problems are having and will have on women and girls in Melbourne's northern region, WHIN is producing a wide-ranging literature review which addresses a number of topics that relate to women and environmental justice. These topics include the role of women's economic participation; women's specific vulnerability to natural disasters and heatwaves; the relationship of women's mental health to climate change; the specific situation of rural women; effects on the elderly, children and disabled; and women's leadership. Our research has shown that women are unduly affected by environmental problems for three main reasons: because they live longer, because they are generally poorer than men, and because of the social construction of womanhood. The interaction of these factors with forms of discrimination such as sexism, racism and ageism result in social conditions that put women at risk of environmental injustice. These findings have the potential to inspire policy that will work towards equalising the now unfair distribution of environmental burdens.
Women, gender equality and climate change: factsheet [Webpage]

WomenWatch. - New York: UN WomenWatch, 2009, 11 pages. - (Factsheet (UN WomenWatch))

URL: http://www.un.org/womenwatch/feature/climate_change/factsheet.html#change

The first section covers the need for gender-sensitive responses to the effects of climate change, including: agriculture and food security; biodiversity; water resources; health; settlement and migration; and human rights. The second section discusses how to incorporate gender-sensitive perspectives and involving women as agents of change through: energy distribution; the use of technology to adapt to climate change; financing of mitigation, adaptation and technology; and emergency measures during natural disasters.

(Equal opportunity / Transsexuals / Employment / Discrimination / Human rights / Standards / Victoria / Transgender Victoria)


This guideline outlines obligations under the Equal Opportunity Act 2010 regarding discrimination against transgender people in employment. It provides practical guidance for employers on how to be proactive in preventing discrimination against transgender employees.

(Feminism / Mothers / Families / Ethnicity / Racism)

How my mother’s fanatical views tore us apart [Serial article] / Walker, Rebecca

Daily Mail, 23 May 2008

Rebecca Walker, daughter of feminist writer Alice Walker, details her childhood experiences growing up amidst her mother’s ideologies and reluctant role as a mother, which led to being estranged from her mother in adulthood.

(Feminism / Gender roles / Gender equality / Northern Metropolitan Region, Vic. / Goulburn North East Region, Vic.)
FINANCIAL SECURITY


This project comprised a literature review, policy review, development of discussion papers, and consultations (forums and workshops) to identify the issues and community understandings surrounding economic abuse. Themes explored were: credit and debt, income security, child support, financial capability, and community sector collaboration. The report recommends taking a nationally coordinated approach to economic abuse in terms of: (1) tackling the problem; (2) further research; (3) producing resources and tools; (4) general and specific sector education; (5) advocating for structural change; and (6) service responses.

(Subjects: Financial security / Domestic violence / Women / Surveys / Australia)
(Catalogue ID=30666)

Mothers on the margins: income restrictions, deprivation of needs and barriers to employment [Monograph] / Corrales, Tatiana; Wise, Sarah. - Collingwood, Vic. : Anglicare Victoria, 2013, 11 pages

The Hardship Survey 2013 aimed to record the struggles experienced by women with children who sought assistance from Anglicare Victoria due to financial hardship, as well as the challenges they face in moving from welfare to a situation of self-reliance. It found an unacceptably high proportion of women with children were unable to afford items and services that most Australians would consider 'essential living needs'. Mothers, regardless of partner status, experienced greater disadvantage than all other client groups. [Extract from author conclusion].

(Subjects: Financial security / Mothers / Children / Social welfare / Poverty / Disadvantaged groups / Australia)
(Catalogue ID=30669)

HEALTH POLICY


This research strategy has been developed to be the national guide for the preventive health research, policy and practice community in Australia, and to guide the use of the National Preventive Health Research Fund. The strategy's primary purpose is to foster approaches to research and evaluation which better enable all sectors to implement the most effective preventive health programs and enable individual choices to be evidence-informed, to better support and build policy and program capacity. It recognises that the change that is sought will evolve over some years and this strategy constitutes the first
Homosexuality is no longer pathologised and criminalised in Australian society. Homosexuality has essentially been normalised within Australian society, but attitudes towards homosexuals range from outright homophobia, to tolerance, to acceptance. Ambiguities and anxieties continue to exist regarding the place of homosexuality in modern day Australia, for example the ongoing gay marriage debate, and the issue of IVF access for homosexuals and same-sex adoption. Homosexual issues continue to be on the front pages of newspapers and the subject of opinion pieces, which suggests that while homosexuality has been normalised within Australia in the past few decades, its place is still contentious and unstable within the Australian consciousness.

ORAL HEALTH

The goal of Action plan for oral health promotion 2013-2017 is to improve the oral health of all Victorians including population groups at higher risk. Emphasis is on partnership opportunities and alliances to build a prevention and early intervention system for oral disease. A major focus of this action plan is to promote oral health in settings such as early childhood, education, health services, residential aged care and disability settings. As over 80 per cent of dental services in Victoria are provided in the private sector this action plan recognises the key role private dental practices play in promoting good oral health. Our general approach to prevention is to encourage people to lead healthier lives and build environments that help them do so. [Introduction, extract]


This publication reports oral health and dental visiting patterns of Australian adults in 2010, and trends from 1994 to 2010. While most adults reported good oral health in 2010...
and 60% had visited a dentist in the previous 12 months, almost 38% reported a financial barrier or hardship associated with dental visits. Adults from lower income households, or those who held a concession card, reported poorer oral health status, more toothache, less dental visiting and greater difficulty in paying a $150 dental bill than those from higher income households and non-cardholders.

(Subjects: Oral health / Dental care / Men / Women / Surveys / Australia)

(Catalogue ID=30745)

The avoidance and delaying of dental visits in Australia [Serial article]/Australian Research Centre for Population Oral HealthAustralian Dental Journal no. 57, 2012, 1-5
URL: http://www.ada.org.au/App_CmsLib/Media/Lib/1211/M459423_v1_Attach.%20B.%20Avoidance%20and%20Delay%20in%20Visits.pdf

This research indicates that almost two-thirds of Australian adults actively avoid or delay visiting the dentist. The reasons behind this avoidance are multi-factorial, but predominantly relate to the perceived barriers of cost and anxiety, as well as a general apathy towards dental visiting. In particular, perceptions of the cost of going to the dentist stand out as the primary reason why people avoid or delay visiting. Approximately 45% of all adults claimed that they avoided or delayed dental visits because of the associated cost or because it was considered too expensive. However, approximately one-half of adults avoid for more than one reason and avoidance was also related to a large number of possible concerns relating to attending a dentist. The results indicate that numerous barriers, real or perceived, need to be overcome in order to meet existing unmet needs.

[Article extract]

(Subjects: Oral health / Dental care / Access / Anxiety / Affordability / Australia)

(Catalogue ID=30756)

Cigarette smoking and tooth loss in a cohort of older Australians: the 45 and Up Study [Serial article]/Arora, Manish; Schwarz, Eli; Sivaneswaran, Shanti; et al.Journal of the American Dental Association vol. 141 no. 10, 2010, 1242-1249

BACKGROUND: Data regarding the long-term effects of smoking, smoking cessation and environmental tobacco smoke (ETS) on tooth loss are limited. METHODS: The authors collected information about tooth loss and other health-related characteristics from a questionnaire administered to 103,042 participants in the 45 and Up Study conducted in New South Wales, Australia. The authors used logistic regression analyses to determine associations of cigarette smoking history and ETS with edentulism, and they adjusted for age, sex, income and education. RESULTS: Current and former smokers had significantly higher odds of experiencing edentulism compared with never smokers (prevalence odds ratio [OR], 2.51; 95 percent confidence interval [CI], 2.31-2.73 and OR, 1.50; 95 percent CI, 1.43-1.58, respectively). Among former smokers, the risk declined significantly with increasing time since smoking cessation; however, the risk remained elevated even in those who ceased smoking 30 or more years previously compared with that in never smokers (OR, 1.10; 95 percent CI, 1.02-1.19). Furthermore, among never smokers, the OR for edentulism was 1.37 (95 percent CI, 1.17-1.60) in those who reported having exposure to ETS for six or more hours per week versus those who were not exposed to any ETS. CONCLUSIONS AND CLINICAL IMPLICATIONS: Although the risk of experiencing tooth loss declines with time since smoking cessation, the effects of smoking may persist for at least 30 years. The effect of ETS requires further
Effects of endogenous sex hormones on the periodontum: review of literature
[Serial article] / Güncü, G.N.; Tözüm, T.F.; Çaglayan, F.
Australian Dental Journal vol. 50 no. 3, 2005, 138?145

Hormones are specific regulatory molecules that have potent effects on the major determinants of the development and the integrity of the skeleton and oral cavity including periodontal tissues. It is clear that periodontal manifestations occur when an imbalance of these steroid hormones take place. The authors conducted a Medline search up to 2004 and in addition, a manual search was also performed including bibliographies of relevant papers, review articles and books. This review focuses on the effects of endogenous sex hormones on the periodontium and the goal was to inform and update practitioners' knowledge about the impact of these hormones on periodontal status. In addition, this review article will analyze how these hormones influence the periodontium at different life stages such as puberty, menstruation, pregnancy, menopause and post-menopause. Moreover, the effects of contraceptives and hormone replacement therapies on the periodontium will be discussed. It is clear that endogenous sex steroid hormones play significant roles in modulating the periodontal tissue responses. A better understanding of the periodontal changes to varying hormonal levels throughout life can help the dental practitioner in diagnosis and treatment.


The resource summarises the most effective health promotion strategies for prevention of oral health problems. It will assist health professionals, policy makers, planners and health promotion practitioners to further promote oral health in Victoria.

Explaining gender differences in caries: a multifactorial approach to a multifactorial disease [Serial article] / Ferraro, Maria; Vieira, Alexandre R.
URL: http://www.hindawi.com/journals/iid/2010/649643/

Many studies have demonstrated that caries rates are higher in women than in men. This review attempts to provide an explanation for this trend by examining each factor which contributes to caries and how the factor differs in men and women. Evidence has been provided to demonstrate that caries risk factors for women include a different salivary
composition and flow rate, hormonal fluctuations, dietary habits, genetic variations, and particular social roles among their family. Systemic diseases that have been found to be associated with caries have also been found to have an association with the female gender. An extended exposure to the oral cavity or a more cariogenic oral microflora has not been proven to contribute to higher caries in women. Further research in these areas could be done in the future to explain their contribution, or lack thereof, to a higher caries rate in women. [Author abstract]

(Catalogue ID=30752)


These guidelines were developed in response to an audit of SA Dental Services in 2008. They are designed to support staff to plan and implement effective health promotion activities in their clinics and local communities. The guidelines summarize clinical and community based promotion strategies that are effective (should be adopted) and strategies that are ineffective should be avoided). The guidelines address health promotion to each of the target population groups.

(Catalogue ID=30766)


The Department of Health and Dental Health Services Victoria (DHSV) have developed a local government action guide for improving oral health and preventing oral disease in the community. This guide outlines a range of evidence-informed actions that councils can consider when preparing their Municipal Public Health and Well-being Plans, Municipal Early Years Plans and other strategies.

(Catalogue ID=30749)


INTRODUCTION: Residents of Appalachia may benefit from oral cancer screening given the region’s higher oral and pharyngeal cancer mortality rates. The current study examined the oral cancer screening behaviors and recent dental care (since dentists perform most screening examinations) of women from Ohio Appalachia. METHODS: Women from Ohio Appalachia were surveyed for the Community Awareness Resources Education (CARE) study, which was completed in 2006. A secondary aim of the CARE
baseline survey was to examine oral cancer screening and dental care use among women from this region. Outcomes included whether women (n=477; cooperation rate = 71%) had ever had an oral cancer screening examination and when their most recent dental visit had occurred. Various demographic characteristics, health behaviors and psychosocial factors were examined as potential correlates. Analyses used multivariate logistic regression.

RESULTS: Most women identified tobacco-related products as risk factors for oral cancer, but 43% of women did not know an early sign of oral cancer. Only 15% of women reported ever having had an oral cancer screening examination, with approximately 80% of these women indicating that a dentist had performed their most recent examination. Women were less likely to have reported a previous examination if they were from urban areas (OR=0.33, 95% CI: 0.13?0.85) or perceived a lower locus of health control (OR=0.94, 95% CI: 0.89?0.98). Women were more likely to have reported a previous examination if they had had a dental visit within the last year (OR=2.24, 95% CI: 1.03?4.88). Only 65% of women, however, indicated a dental visit within the last year. Women were more likely to have reported a recent dental visit if they were of a high socioeconomic status (OR=2.83, 95% CI: 1.58?5.06), had private health insurance (OR=2.20, 95% CI: 1.21?3.97) or had consumed alcohol in the last month (OR=2.03, 95% CI: 1.20?3.42). CONCLUSION: Oral cancer screening was not common among women from Ohio Appalachia, with many missed opportunities having occurred at dental visits. Education programs targeting dentists and other healthcare providers (given dental providers are lacking in some areas of Ohio Appalachia) about opportunistic oral cancer screening may help to improve screening in Appalachia. These programs should include information about populations at high risk for oral cancer (eg smokers) and how screening may be especially beneficial for them. Future research is needed to examine the acceptability of such education programs to healthcare providers in the Appalachian region and to explore why screening was less common among women living in urban areas of Ohio Appalachia. [Author abstract]


URL: http://www.aihw.gov.au/publication-detail/?id=60129543390

This report presents the most recent information on the oral health and dental care of Australians. Data are presented on tooth decay, tooth loss, dental appearance, dental visits, insurance cover and the dental workforce. Data show that in 2010, around 64% of people aged 5 and over had visited a dentist in the previous year and 54% had some level of private dental insurance. [Publisher abstract]

Oral health and menopause: a comprehensive review on current knowledge and associated dental management [Serial article] / Dutt, P.; Chaudhary, S.R.; Kumar, P. Annals of Medical and Health Science Research vol. 3 no. 3, 2013, 320-323

URL: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3793432/

The menopause is physiological changes in women that give rise to adaptive changes at
both systemic and oral level. As we all begin to reach an older age, dental health and hygiene becomes a major concern. The dentist is often the first person to appreciate numerous changes that are experienced throughout the body during menopause. The teeth and gums are extremely susceptible to any hormonal changes that take place just before menopause and readily decrease body's ability to fight off minor infections or maintain a healthy balance of useful and harmful bacteria within the oral environment. This review aimed to develop better understanding for major oro-dental complications observed in women during menopause, and schematic approach towards the different dental management protocols used during these periods. Various internet based popular search engines were used to explore related data from literature, which includes PubMed, PubMed Central, Cochrane, Google, Medknow, Ebsco, Science Direct, and IndMed. Upon compilation of relevant data, it was observed that periodontal health is most severely affected (up to 60%) followed by dry mouth (25%) and burning mouth (glossodynia; 15%) which, in turn, may increase the occurrence of oral mucosal and dental diseases, such as candidiasis. Though, the usage of hormone replacement therapy is effective but it does not necessarily prevent or help women with oral symptoms. Therefore, well controlled long-term randomized studies are needed to establish more authentic clinical guidelines for successful management of such conditions.

(Subjects: Oral health / Menopause / Postmenopause / Middle aged women / Dental care)

(Catalogue ID=30743)

Oral health care during pregnancy : a national consensus statement
URL: http://www.mchoralhealth.org/materials/consensus_statement.html

This consensus statement provides guidance on oral health care for pregnant women for both prenatal care health professionals and oral health professionals, pharmacological considerations for pregnant women, and guidance for health professionals to share with pregnant women. It was developed with input from the Health Resources and Services Administration, the American College of Obstetricians and Gynecologists and the American Dental Association.


(Catalogue ID=30741)

Oral health during pregnancy [Serial article] / Silk, Hugh; Douglass, Alan B.; Douglass, Joanna M.; et al. American Family Physician vol. 77 no. 8, 2008, 1139-1144
URL: http://www.aafp.org/afp/2008/0415/p1139.html

Oral health care in pregnancy is often avoided and misunderstood by physicians, dentists, and patients. Evidence-based practice guidelines are still being developed. Research suggests that some prenatal oral conditions may have adverse consequences for the child. Periodontitis is associated with preterm birth and low birth weight, and high levels of cariogenic bacteria in mothers can lead to increased dental caries in the infant. Other oral lesions, such as gingivitis and pregnancy tumors, are benign and require only reassurance and monitoring. Every pregnant woman should be screened for oral risks,
counseled on proper oral hygiene, and referred for dental treatment when necessary. Dental procedures such as diagnostic radiography, periodontal treatment, restorations, and extractions are safe and are best performed during the second trimester. Xylitol and chlorhexidine may be used as adjuvant therapy for high-risk mothers in the early postpartum period to reduce transmission of cariogenic bacteria to their infants. Appropriate dental care and prevention during pregnancy may reduce poor prenatal outcomes and decrease infant caries. [Author abstract]

(Catalogue ID=30739)


BACKGROUND: Current evidence highlights the importance of oral health during pregnancy. However, little is known about the oral health of pregnant women in Australia. The aim of this study was to report the oral health status, knowledge and practices of pregnant women in south-western Sydney. METHODS: A cross-sectional survey of 241 pregnant women attending a large hospital in south-western Sydney. RESULTS: More than half (59.3%) reported dental problems during pregnancy, less than a third (30.5%) saw a dentist in the last six months, only 10% had received any information about perinatal oral health and many (>50%) were unaware of the potential impact of poor maternal oral health on pregnancy and infant outcomes. Analysis revealed a significant difference (<0.05) in the uptake of dental services among pregnant women who had higher household incomes, private health insurance, received information about perinatal oral health and knowledge about maternal oral health. CONCLUSIONS: The participants reported significant barriers to obtaining dental care including limited access to affordable dental services and lack of awareness about the importance of maternal oral health. The findings suggest the need for preventive strategies involving dentists and antenatal providers to improve maternal oral health in Australia. [Author abstract]

(Catalogue ID=30747)

URL: http://www.nature.com/bdj/journal/v209/n7/abs/sj.bdj.2010.883.html

This brief review highlights the lack of evidence relating to sex and gender differences in oral health as well as the widespread conceptual confusion and conflation that often underlies them. A broader biomedical understanding of these issues will offer a valuable framework within which differences in oral health between women and men can be further explored. This in turn would facilitate the development of the evidence base necessary to optimise the efficacy of dental practice in meeting the needs of both women and men patients. [Author abstract]

(Catalogue ID=30753)
Women are periodontally healthier than men, but why don't they have more teeth than men? [Serial article] / Meisel, Peter; Reifenberger, Jenni; Haase, Romy; et al.; ... et al.
URL: [http://stubber.math-inf.uni-greifswald.de/~bandt/pub/meiselreifenbergeretal.pdf](http://stubber.math-inf.uni-greifswald.de/~bandt/pub/meiselreifenbergeretal.pdf)

**OBJECTIVE:** Periodontal diseases are more prevalent in men than in women. However, in a population-based epidemiological study, we found that, on average, women have fewer teeth than men. The aim of this study was to test different hypotheses that could explain this obvious paradox. **DESIGN:** In 4,290 randomly selected participants from the normal population (Study of Health in Pomerania), we determined diagnostic periodontal parameters, attachment loss, and number of teeth. Behavioral and environmental risk factors were assessed by interviews and questionnaires. Use of estrogens was assessed, and urinary excretion of collagen cross-links was determined. **RESULTS:** Multiple regression analyses adjusted for caries and periodontitis revealed that in the women of this population, there is an inverse association between the number of children born and the number of teeth (PG 0.01). This relationship depends on socioeconomic status, bone metabolism, and the use of estrogens. In the group of the youngest (20-40 years), the bone turnover rate is positively related to the number of children born (PG 0.01). In postmenopausal women treated with estrogens, the number of teeth was higher than in men of the same age group. Only in women without hormone treatment were there fewer teeth. **CONCLUSION:** The apparent paradox of having fewer teeth despite better periodontal health in women compared with men is related to an increased bone turnover rate and socioeconomic conditions such as low education and low social status. Periodontal health is even worse if these factors are combined.

(Catalogue ID=30737)

Women's attitudes to and perceptions of oral health and dental care during pregnancy [Serial article] / Keirse, Marc J.N.C.; Plutzer, Kamila

**AIMS:** To assess pregnant women's opinions on and perceptions of oral health and their relationship to oral hygiene and dental care practices. **METHODS:** Questionnaire survey on perceived oral health, oral hygiene and utilization of dental services among 649 nulliparæ attending for antenatal care at all public antenatal clinics in Adelaide, South Australia. **RESULTS:** Women rated their general health significantly better than their oral health (P<0.001) and attributed more importance to healthy teeth for their baby than for themselves (P<0.001). Only 35% had dental care during pregnancy; 35% had no dental visit for at least two years and 27% reported cost as a major deterrent. Eighteen percent had experienced gingival bleeding before pregnancy and 41% during pregnancy. Gingival bleeding outside pregnancy was clearly related to perceived oral health (P<0.001), but this was less so for bleeding during pregnancy. The latter was not related to age, level of education, employment, marital status, or smoking habits. Only 38% of women with gingival bleeding in pregnancy had a dental care visit in pregnancy and 28% considered their oral health as very good. **CONCLUSIONS:** Many pregnant women do not perceive gingival bleeding as indicating inflammatory disease and seek no professional help for it. Maternity care providers need to devote more attention to oral health in antenatal clinics and antenatal education. [Author abstract]
Women have special oral health needs and considerations. Hormonal fluctuations have a surprisingly strong influence on the oral cavity. Puberty, menses, pregnancy, menopause and the use of contraceptive medications all influence women's oral health and the way in which a dentist should approach treatment. This document discusses hormonal effects on the oral cavity during various stages in women's lives, as well as the special dental needs and considerations that will be encountered. Problems such as osteoporosis, Sjögren's disease, temporomandibular disorders, eating disorders and thyroid disease, prevalent in the female population, are also addressed.

The evidence base for women's oral health is emerging from legislative action, clinical research, and survey documentation. The Women's Health in the Dental School Curriculum study (1999) followed a similar study (1996) of medical school curricula. Both of these major efforts resulted from statutory mandates in the National Institutes of Health Revitalization Act of 1993 (updated October 2000). A major study of the Institute of Medicine (IOM) National Academy of Sciences in 2001 concluded that 'the study of sex differences is evolving into a mature science'. This IOM study documented the scientific basis for gender-related policy and research and challenged the dental research enterprise to conduct collaborative, cross-disciplinary research on gender-related issues in oral health, disease, and disparities. This report chronicles some of the factors that have and continue to influence concepts of women's oral health in dental education, research, and practice. Gender issues related to women's health are no longer restricted to reproductive issues but are being considered across the life span and include psychosocial factors that impact women's health and treatment outcomes.
This Government-commissioned report summarizes new and emerging research which may challenge traditional approaches to weight-reduction. It has been written to generate an informed discussion on health practice and policy to promote healthy weights, while protecting and promoting the mental well-being of British Columbians. The paper addresses three key questions: 1. What is the relationship between current approaches to promoting healthy weights and body image, weight bias, stigma and discrimination and mental health? 2. What are the linkages and relationships across the life course among overweight, obesity and mental health, mental illness, and the social determinants of health? 3. What practices are conducive to promoting healthy weights and mental well-being?

(Catalogue ID=30727)

PHYSICAL ACTIVITY

Older, fitter, stronger [CD-ROM] / Oldfield, Libby / BreaCan vol. 86. - Melbourne : BreaCan, Women's Health Victoria, 22 May 2013, 1 disk ; 80 min.. - ( BreaCan What's On Information Session; 86 )

URL: http://breacan.org.au/services-events/information-sessions/archive

In this session, Libby Oldfield, Director of Fitwise Physiotherapy, discusses why it's important to maintain good health, bone density and fitness as we age. Research shows gentle weight bearing exercises can improve well-being and reduce falls, risk of fractures and osteoporosis, and help us lead an active and healthy life.

(Catalogue ID=30603)

REPRODUCTION


URL: http://www.aihw.gov.au/publication-detail/?id=60129545702

Australia's mothers and babies 2011 is the twenty-first annual report on pregnancy and childbirth in Australia providing national information on women who gave birth and the characteristics and outcomes of their babies. In 2011, 297,126 women gave birth to 301,810 babies in Australia. This was an increase of 2,247 births (0.8%) than reported in 2010, and a total increase of 18.3% since 2002. Nationally, the proportion of teenage mothers (younger than 20) declined from 3.9% in 2010 to 3.7% in 2011, compared with 4.9% in 2002. [Author abstract]

( Subjects: Pregnancy / Childbirth / Statistics / Demographics / Aboriginal women / CALD people / Hospitals / Multiple births / Mortality / Birth weight / Caesarean birth / Perinatal mortality / Stillbirth / Australia )

This book draws on the Californian radical self-help women's health movement in the 1970s. It explores how feminists engaged with emerging technoscience to "do" reproductive health. Relates the discussion to three specific technologies: the plastic speculum, the Pap smear, and manual suction abortion. Examines how the women's health movement both changed the relations of, but was implicated within, the 'biopolitics' surrounding reproduction. The book provides a timely reminder that health, technologies and power remain integrally connected, and that reproductive health practices remain contentious today. [Extract from review by Karen Willis in the Australian and New Zealand Journal of Public Health 2013; 37(3): 297]

Subjects: Reproductive health / Feminism / Vagina / Self-examination / Pap smears / Cervical cancer / Contraception / Abortion / Women's health clinics / United States

Contraception


The National women's health policy 2010 seeks to continue to improve the health and wellbeing of Australian women, especially those at greatest risk of poor health. Priority is given to: (i) maintaining and developing health services and prevention programs to treat and avoid disease through targeting health issues that will have the greatest impact over the next 20 years, and (ii) aiming to address health inequities through broader reforms addressing the social determinants of health. Contents: 1. History of the policy and policy principles; 2. Key health challenges for Australian women today and into the future; 3. Women's experiences of health issues; 4. Current and future government action against the four priority health issues; 5. Social factors influencing women's health and wellbeing; and 6. Goal areas.

Subjects: Contraception / Safe sex / Women's policy / Women's health / Health policy / Australia

Contraceptive use and associations with intimate partner violence among a population-based sample of New Zealand women [Serial article] / Fanslow, Janet; Whitehead, Anna; Silva, Martha; et al. Australian and New Zealand Journal of Obstetrics and Gynaecology vol. 48, 2008, 83-89


AIM: To outline the use of contraception among a representative sample of New Zealand
women, and explore associations with intimate partner violence (IPV), and contraception and condom use. METHODS: Face-to-face interviews were conducted with a random sample of 2790 women who had ever had sexual intercourse, aged 18?64 years old in two regions (urban and rural) in New Zealand. RESULTS: Almost all women had used contraception at some point in their life, and almost one half of all women 18?49 years were currently using methods of contraception. Contraceptive Use and methods varied significantly by location. Women who had ever experienced IPV were significantly more likely to report having ever used contraception, compared with women who had not experienced IPV (91% vs 85.2%). While having a partner who refused to use or tried to stop women from using a method of contraception was rare, it was significantly more common among women who had ever experienced IPV (5.4% vs 1.3%). CONCLUSIONS: Most women have used contraception at some point. Women who have ever experienced IPV were: more likely to have used contraception than women who have not experienced IPV, and to have had partners who refused to use condoms or prevented women from using contraception. Partner refusal may be a key indicator of IPV. These findings emphasise the importance of family violence screening at routine health consultations. [Author abstract]

(Catalogue ID=30615)

Contraceptive use in the United States [Monograph] / Guttmacher Institute. - New York : Guttmacher Institute, August 2013, 4 pages. - ( Guttmached Institute Fact Sheet )
URL: http://www.guttmacher.org/pubs/fb_contr_use.html

Sections include: who needs contraception?; who uses contraception?; methods used by women; teen use of contraceptives; contraceptive effectiveness; broad benefits of contraceptive use; emergency contraception; and who pays for contraception.

(Catalogue ID=30607)

URL: http://humrep.oxfordjournals.org/content/23/6/1338.abstract

BACKGROUND: Long-acting reversible contraceptive (LARC) methods are highly effective in preventing unintended pregnancies. However, their uptake is low in much of the developed world. This study aimed at assessing the cost-effectiveness of LARC methods from the British National Health Service (NHS) perspective. METHODS A decision-analytic model was constructed to estimate the relative cost- effectiveness of the copper intrauterine device (IUD), the levonorgestrel intrauterine system (LNG-IUS), the etonogestrel subdermal implant and the depot medroxyprogesterone acetate injection (DMPA). Comparisons with the combined oral contraceptive pill (COC) and female sterilization were also performed. Effectiveness data were derived from a systematic literature review. Costs were based on UK national sources and expert opinion. RESULTS: LARC methods dominated COC (i.e. they were more effective and less costly). Female sterilization dominated LARC methods beyond 5 years of contraceptive
protection. DMPA and LNG-IUS were the least cost-effective LARC methods. The incremental cost-effectiveness ratio of implant (most effective LARC method) versus IUD (cheapest LARC method) was £13 206 per unintended pregnancy averted for 1 year of use and decreased until implant dominated IUD in 15 years. Discontinuation was a key determinant of the cost-effectiveness of LARC methods. **CONCLUSIONS:** LARC methods are cost-effective from the British NHS perspective. Practices improving user satisfaction and continuation of LARC method use should be identified and promoted.

(author abstract)

(Subjects: Hormonal contraception / Contraceptive implants / IUDs / Injections / Unintended pregnancy / United Kingdom)

(Catalogue ID=30617)

**Cost savings from the provision of specific methods of contraception in a publicly funded program** [Serial article] / Greene Foster, Diana; Rostovtseva, Daria P.; Brindis, Claire D.; et al.


URL: [http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2661445/](http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2661445/)

**OBJECTIVES:** We examined the cost-effectiveness of contraceptive methods dispensed in 2003 to 956,000 women in Family PACT (Planning, Access, Care and Treatment), California's publicly funded family planning program. **METHODS:** We estimated the number of pregnancies averted by each contraceptive method and compared the cost of providing each method with the savings from averted pregnancies. **RESULTS:** More than half of the 178,000 averted pregnancies were attributable to oral contraceptives, one fifth to injectable methods, and one tenth each to the patch and barrier methods. The implant and intrauterine contraceptives were the most cost-effective, with cost savings of more than $7.00 for every $1.00 spent in services and supplies. Per $1.00 spent, injectable contraceptives yielded savings of $5.60; oral contraceptives, $4.07; the patch, $2.99; the vaginal ring, $2.55; barrier methods, $1.34; and emergency contraceptives, $1.43. **CONCLUSIONS:** All contraceptive methods were cost-effective—they saved more in public expenditures for unintended pregnancies than they cost to provide. Because no single method is clinically recommended to every woman, it is medically and fiscally advisable for public health programs to offer all contraceptive methods. [Author abstract]

(Subjects: Contraception / Cost-effectiveness / Family planning / Public health / United States)

(Catalogue ID=30618)

**In search of breakthroughs: renewing support for contraceptive research and development** [Serial article] / Barot, Sneha


URL: [http://www.guttmacher.org/pubs/gpr/16/1/gpr160124.html](http://www.guttmacher.org/pubs/gpr/16/1/gpr160124.html)

In the five decades since the birth control pill was first marketed in the United States, the number of contraceptive products available to women has expanded substantially. Still, these innovations overwhelmingly have been adaptations of existing technologies that offer variations on hormone dosages and routes of delivery, rather than true technological breakthroughs. At the same time, there is an ongoing and serious problem of high unintended pregnancy rates in the United States and around the globe. In addition, an expanding body of knowledge suggests that improving and expanding contraceptive use requires more than just access to existing methods, but also meeting women's needs and preferences for effective and satisfactory methods. For all of these reasons, new investments in contraceptive research and development are critical to achieving
consistent and correct contraceptive use and lowering unintended pregnancy rates.
(Subjects: Contraception / Women / Research / Funding / United States)

(Catalogue ID=30608)

Prevalence of and characteristics associated with use of withdrawal among women in Victoria, Australia [Serial article] / Ong, Jason; Temple-Smith, Meredith; Wong, William; et al. Perspectives on Sexual and Reproductive Health vol. 45 no. 2, 74-78 URL: http://onlinelibrary.wiley.com/doi/10.1363/4507413/abstract (Subscription required to access online full text.)

CONTEXT: Popularly regarded as ineffective, withdrawal is a form of contraception largely ignored by health professionals. Thus, little is known of the prevalence and correlates of its use. METHODS: A survey of 1,006 sexually active women aged 16?50 and not intending to conceive was conducted in three Family Planning Victoria clinics in 2011. The questionnaire asked about contraceptive behavior and characteristics associated with contraceptive use. Univariate and multivariate analyses were conducted to assess prevalence of withdrawal use and characteristics associated with reliance solely on this method. RESULTS: Ninety-six percent of women reported having used some form of contraception in the last three months, most commonly male condoms (67%), the pill (49%) and withdrawal (32%); use of withdrawal was especially common among the youngest women. Of women reporting withdrawal use, 40% relied solely on this method. Eighty percent of sole users of withdrawal were also inconsistent users. Women who used only withdrawal had elevated odds of saying that they were dissatisfied with their current method (odds ratio, 1.6), had had more than one partner in the last three months (1.7), had no access to contraceptives when needed (2.4) and found it too inconvenient to use contraceptives (2.1). CONCLUSION: Withdrawal use is common, but there is a need for better education on proper use. Health professionals should discuss the risks and benefits of withdrawal, along with those of other methods, when discussing contraception with their patients. Further research is needed into why women choose withdrawal. [Author abstract]
(Subjects: Contraception / Withdrawal methods / Women / Usage / Risk factors / Health behaviour / Victoria)

(Catalogue ID=30646)

Pregnancy


Pregnancy itself does not have a negative effect on oral health, but may increase the risk of dental problems (e.g: frequent vomiting may raise acidity in the mouth and contribute to caries). As well, high levels of hormones increase blood flow to the gums and may cause inflammation and bleeding (gingivitis). In the absence of local plaque build up, healthy gums will not show changes during pregnancy but the risk of periodontitis (inflammation and destruction of supporting tissues around the teeth) is increased. Measures to prevent caries and periodontal disease include regular brushing and flossing and regular dental checkups, with teeth cleaning and treatment as required. [Background]
(Subjects: Pregnancy / Oral health / Antenatal care / Clinical practice guidelines /
Cutaneous melanoma during pregnancy: is the controversy over? [Serial article] / Lens, Marko; Rosdahl, Inger; Newton-Bishop, Julia

*Journal of Clinical Oncology* vol. 27 no. 19, 2009, e11-e12

URL: [http://jco.ascopubs.org/content/27/19/e11](http://jco.ascopubs.org/content/27/19/e11)

The influence of pregnancy on survival in melanoma has long been a controversial issue. However, the results of two large population-based studies have shown that pregnancy does not adversely influence survival in women with melanoma.

(About extract)

(Catalogue ID=30683)

Midwives and oral health care during pregnancy: perceptions of pregnant women in south-western Sydney, Australia [Serial article] / George, Ajesh; Johnson, Maree; Duff, Margaret; et al.

*Journal of Clinical Nursing* vol. 21 no. 7-8, 2011, 1087-1096


AIMS AND OBJECTIVES: This study sought to explore the perceptions of pregnant women in Australia towards oral health care during pregnancy and their views regarding midwives providing oral health education, assessment and referrals as part of antenatal care. BACKGROUND: Maintaining oral health during pregnancy is important. Yet, many pregnant women do not access dental services during this time. Antenatal care providers are now recommended to promote maternal oral health, and various countries have adopted this strategy. However, in Australia, a lack of emphasis is placed on maternal oral health especially by antenatal care providers. Currently, a preventive programme is being developed to promote maternal oral health with the help of midwives in Australia. Very little is known about the perceptions of such an approach from pregnant women.

METHOD: Qualitative approach. METHOD: Data were collected via semi-structured telephone interviews with 10 pregnant women residing in south-western Sydney.

RESULTS: Thematic analyses of the data suggest a high prevalence of poor oral health among pregnant women, especially those socioeconomically disadvantaged. The findings also highlight various barriers deterring these women from seeking dental care. The most significant being lack of dental awareness, high treatment costs and misconceptions about dental treatment during pregnancy. The absence of affordable dental care remains a major barrier in Australia. The proposed preventive programme was well received by women although issues such as education for midwives and referral pathways were highlighted.

CONCLUSIONS: The findings suggest that a tailored midwifery-initiated oral health programme has potential in Australia, especially for low-income families as it addresses many existing barriers to dental care. Relevance to clinical practice. Antenatal care providers in Australia should provide more information about oral health. These health professionals should be adequately educated to promote oral health. Health services should also consider offering pregnant women affordable and accessible dental services.

(Author abstract)

(Catalogue ID=30764)
Asthma in pregnant women may have adverse effects on maternal, fetal and infant outcomes, particularly if expectant mothers experience an exacerbation of asthma while pregnant. Pregnancy, in turn, may have adverse effects on asthma control among expectant mothers. This report outlines a proposed approach to monitoring asthma during pregnancy by capitalising on existing data sources as well as identifying data development opportunities. [Author abstract]

(Catalogue ID=30606)


BACKGROUND: The aims of this study were to assess women's knowledge and experiences of dental health in pregnancy and to examine the self-care practices of pregnant women in relation to their oral health. METHODS: Women in the postnatal ward at the Women's and Children's Hospital, Adelaide, completed a questionnaire to assess their knowledge, attitudes and practices to periodontal health. Pregnancy outcomes were collected from their medical records. Results were analysed by chi-square tests, using SAS. RESULTS: Of the 445 women enrolled in the survey, 388 (87 per cent) completed the questionnaire. Most women demonstrated reasonable knowledge about dental health. There was a significant association between dental knowledge and practices with both education and socio-economic status. Women with less education and lower socio-economic status were more likely to be at higher risk of poor periodontal health compared with women with greater levels of education and higher socioeconomic status.

CONCLUSION: Most women were knowledgeable about oral and dental health. Lack of knowledge about oral and dental health was strongly linked to women with lower education achievements and lower socioeconomic backgrounds. Whether more intensive dental health education in pregnancy can lead to improved oral health and ultimately improved pregnancy outcomes requires further study. [Author abstract]

(Catalogue ID=30765)

SEXUAL HEALTH

Sexually transmitted infections

Invisible and at risk: STDs among young adult sexual minority women in the United States [Serial article] / Lindley, Lisa L.; Walsemann, Katrina M.; Carter, Jarvis W. Perspectives on Sexual and Reproductive Health vol. 45 no. 2, 66-73

CONTEXT: Sexual minority women are not adequately assessed by national STD surveillance systems, and research regarding STD burden in nationally representative samples of such women is rare. Moreover, few studies have assessed STD risk exclusively among young adult women. METHODS: Wave 4 (2007-2008) data from the National Longitudinal Study of Adolescent Health on 7,296 females aged 24-32 were used to examine the relationship between sexual orientation and receipt of an STD diagnosis in the past year. Multivariate logistic regression analyses used two measures of sexual orientation: sexual identity and gender of sex partners. RESULTS: Eighty percent of women considered themselves straight, 16% mostly straight; and 4% bisexual, mostly gay or gay. Eighty-five percent had had only male partners, while 7% had had one female partner, and 8% two or more female partners. In unadjusted models, women who identified themselves as mostly straight were more likely than straight women to have had an STD (odds ratio, 1.4); mostly gay or gay women were at lower risk (0.4). Women who had had two or more female partners had a higher STD risk than did women who had had only male partners (1.7). Adjusting for social and demographic characteristics did not substantially alter these results; however, the associations between sexual identity, gender of sex partners and STD diagnosis were eliminated after adjustment for sexual behaviors (e.g., having had anal sex). CONCLUSIONS: Sexual identity, gender of sex partners and sexual behaviors should be taken into account in assessments of women's STD risk. [Author abstract]
Armed forces

**Armed forces (Folder)** [File folder]. - Melbourne : Internal compilation by Women's Health Victoria, 1 file folder

(Subjects: Armed forces / Navy / Airforce / Army / Veterans / Women / Health promotion / Health behaviour / Preventive medicine)

(Catalogue ID=30702)

**Army task force : Female soldiers need better health care** [Serial article] / Zoroya, Gregg
USA Today, 16 June 2012, 1 page

The military is falling short in providing equal health care for women on the battlefield even as public pressure grows to allow them a broader role in combat, an Army task force led by female officers concluded.

(Subjects: Armed forces / Veterans / Women / Health care / Health services / Gender equality / United States)

(Catalogue ID=30653)

**Australia's servicewomen and female veterans : do we understand their health needs?** [Serial article] / Neuhaus, Susan J.; Crompvoets, Samantha L.
Medical Journal of Australia vol. 199 no. 8, 2013, 530-532

As we approach the centenary of ANZAC, it is appropriate to reflect on the lessons of history and the changing nature of the ADF. As the number of female soldiers and veterans increases, and their roles expand, it is important that the Australian medical profession, including primary health care physicians, women's health specialists and psychiatrists in particular, are aware of the gender-specific health effects of service on this emerging female veteran cohort. [Author conclusion, extract]

(Subjects: Armed forces / Veterans / Women / Health care / Gender differences / Australia)

(Catalogue ID=30654)

URL: [http://www.library.ca.gov/crb/09/09-009.pdf](http://www.library.ca.gov/crb/09/09-009.pdf)

This report was commissioned by the California Commission on the Status of Women. The report identifies the challenges women veterans face, the primary services they need, and barriers they encounter. It was informed by the participation of over 170 women veterans who shared their experiences and opinions through a survey. To better understand these experiences and issues, the report also provides a brief overview of
women in the military and explains the federal, state, and local service delivery structures that provide the benefits and services available to veterans, including some targeted to women. The report includes recommendations and proposals relating to women veterans that have been put forth by both public and private commissions and organizations during the past several years. It also includes websites and other resources for further information. [Introduction, extract]

(Catalogue ID=30649)

A call to action for evidence-based military women's health care: developing a women's health research agenda that addresses sex and gender in health and illness [Serial article] / Trego, Lori; Wilson, Candy; Steele, Nancy

Biological Research for Nursing vol. 12 no. 2, 26 August 2010, 171-177

Although women have received military health care over the past three decades, sex-and gender-specific care has been limited to reproductive needs and has rarely addressed military-specific health risks and outcomes. The complexity of military jobs and increased deployments to combat operations has led to increased occupational and health risks for women. A sex-and gender-based research agenda for military women's health will be a valuable instrument to those who are dedicated to the health of this population, including members of the Army, Navy, and Air Force military nursing community.

(Catalogue ID=30640)

Comprehensive programs and services to address the needs of women veterans and women on active duty [Monograph] / Hawaii Women Military Veterans Task Force (HWMVTF). - Honolulu, Hawaii : Hawaii. Office of Veterans Services, January 2013, 1 webpage


The Hawaii Military Women's Task Force has met since April 2012 every month. It has concluded that military women face multiple inter-related complex problems; among them a high rate of Military Sexual Trauma (MST) and for Veterans the related re-entry issues of adequate health care, high rates of Post-Traumatic Stress Disorder, homelessness and joblessness. Our findings are preliminary and will require further in-depth study.

(Catalogue ID=30633)

The concerns of women currently serving in the Afghanistan Theater of Operations : white paper [Monograph] / Naclerio, Anne; Stola, Julie; Trego, Lori; et al. / Health Service Support Assessment Team, IJC, Afghanistan. Women's Health Assessment Team. - San Antonio, Texas? : United States. Army Medical Department, 10 October 2011, 36 pages

the Afghanistan Theater of Operations White Paper /

Reports on the concerns of women both during and after deployment with the United States Army. Covers: women's health education; barriers to seeking health care; uniform/personal protective gear fit; psychosocial effects of deployment; effects of deployment on children and families; sexual harassment/assault response and prevention.

(Catalogue ID=30652)

Deployment and post-deployment experience of women in the East Timor and Bougainville Deployment Health Studies [Serial article] / Treloar, Susan; McGuire, Annabel; Kirk, Katherine
Journal of Military and Veterans' Health vol. 19 no. 1, 2011, 32-33

Summary of a paper presented at the 2010 Australian Military Medicine Association (AMMA)/Joint Health Command Symposium. This study investigated possible differences between female and male serving and ex-serving respondents in 1) perception of stressful factors on deployment; 2) perceptions of positive and negative aspects of deployment; and 3) post-deployment experiences. Implications of similarities and differences are discussed in the context of women's roles and tasks on operational deployment with the Australian Defence Force.

(Catalogue ID=30638)

Does the military have a breast cancer crisis? : not quite [Webpage] / Drummond, Katie
Forbes Business, 5 October 2012, 1 page
URL: http://www.forbes.com/sites/katiedrummond/2012/10/05/does-the-military-have-a-breast-cancer-crisis-not-quite/

Military personnel contend with more than their fair share of health problems, from the mental anguish wrought by combat to the physical ailments caused by unique exposures to hazardous chemicals or waste incinerated on-base. But do soldiers and veterans, as a widely-circulated story published last week states, also have a breast cancer crisis to cope with? Not exactly, according to one of the military's top breast cancer experts.

[Article introduction]

(Catalogue ID=30639)

Gender differences among veterans deployed in support of the wars in Afghanistan and Iraq [Serial article] / Street, Amy; Gradus, Jaimie; Giasson, Hannah; et al.
Journal of General Internal Medicine vol. 28 no. 2, 27 June 2013, 556-562

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The changing scope of women's roles in combat operations has led to growing interest in women's deployment experiences and post-deployment adjustment. The article outlines that although there are important gender differences in deployment stressors (including women's increased risk of interpersonal stressors) and post-deployment adjustment, there are also significant similarities. The post-deployment adjustment of the United States' growing population of female Veterans seems comparable to that of the country's male Veterans.

(Catalogue ID=30625)

Gender differences in prescribing among veterans diagnosed with posttraumatic stress disorder [Serial article] / Bernardy, Nancy; Lund, Brian; Alexander, Bruce; et al.
Journal of General Internal Medicine vol. 28 no. 2, 27 June 2013, 542-548

The article examines prescribing frequencies over an 11-year period prior to the release of the new guideline to determine gender differences in pharmacotherapy treatment in veterans with posttraumatic stress disorder (PTSD). The findings showed a consistent pattern of increased prescribing of psychotropic medications among women with PTSD, compared to men. Prescribing frequency for benzodiazepines showed a marked gender difference with a steady increase for women despite guideline recommendations against use and a decrease for men. Common co-occurring disorders and sleep symptom management are important factors of PTSD pharmacotherapy and may contribute to gender differences seen in prescribing benzodiazepines in women but do not fully explain the apparent disparity.

(Catalogue ID=30626)


This report presents findings from a three year in depth study into the health and wellbeing of Australian female veterans. Empirical research was collected through face-to-face interviews with 60 female veterans who had deployed from the Vietnam era onwards, including Vietnam, Rwanda, the Gulf War, Cambodia, Timor Leste, Bougainville, Solomon Islands, Iraq and Afghanistan. The sample were a heterogeneous group comprising women from Army, Airforce and Navy, soldier and officer categories, and a range of ages, ranks and lengths of service. A third of women in the study had deployed more than once, some up to four times. Women represented a range of occupational categories, including health, administration, communications, transport, logistics, signals, engineering, and intelligence. Participants gave complex accounts of their experiences of deployment, broader military career and life since discharging from
the ADF. This complexity has been summarised and translated. [Executive summary, extract]

{ Subjects: Armed forces / Veterans / Women's health / Army / Navy / Air force / Australia }

(Catalogue ID=30629)

Health indicators for military, veteran, and civilian women [Serial article] /
Lehavot, Keren; Hoerster, Katherine; Nelson, Karin; et al.
American Journal of Preventive Medicine vol. 42 no. 5, November 2012, 473-480
URL: http://www.ajpmonline.org/webfiles/images/journals/amepre/AMEPRE_3339%5B3%5D-stamped.pdf

Women who have served in the military are a rapidly growing population. The purpose of the study is to provide estimates of several leading U.S. health indicators by military service status among women. Veterans reported poorer general health and greater incidence of health risk behaviors, mental health conditions, and chronic health conditions than civilian women.

{ Subjects: Armed forces / Navy / Airforce / Veterans / Women / Health equality / Health outcomes / Gender analysis / Gender equality / Psychological wellbeing / Mental health / Chronic conditions / United States }

(Catalogue ID=30637)

How we're failing our female veterans [Serial article] / Fitzpatrick, Laura
Time Magazine, 30 June 2010, 1-3
URL: http://content.time.com/time/printout/0,8816,2001011,00.html

Women are indispensable to the U.S. military. But when they get home, often suffering from mental or physical injuries, the veterans face a new battle: coping with a medical system still tailored to men. [Article byline]

{ Subjects: Armed forces / Veterans / Women / Post traumatic stress disorder / Mental health / Health services / United States }

(Catalogue ID=30648)

Incorporating lesbian and bisexual women into women veterans' health priorities [Serial article] / Lehavot, Keren; Simpson, Tracy
Journal of General Internal Medicine vol. 28 no. 2, 27 June 2013, 609-614

Relative to the general population, lesbian and bisexual (LB) women are overrepresented in the military and are significantly more likely to have a history of military service compared to all adult women. Due to institutional policies and stigma associated with a gay or lesbian identity, very little empirical research has been done on this group of women veterans. Available data suggest that compared to heterosexual women veterans, LB women veterans are likely to experience heightened levels of prejudice and discrimination, victimization, including greater incidence of rape, as well as adverse health and substance use disorders. They are also likely to encounter a host of unique issues when accessing health care, including fears of insensitive care and difficulty disclosing sexual orientation to Veterans Health Administration (VHA) providers. Training of staff and providers, education efforts, outreach activities, and research on this subpopulation are critical to ensure equitable and high quality service delivery.
Mental health of women in the Near North Area of Influence Deployment Health Studies

Summary of a paper presented at the 2010 Australian Military Medicine Association (AMMA)/Joint Health Command Symposium. This study investigated possible differences between female and male serving and ex-serving respondents in self-rated health, self-reported psychological distress, and posttraumatic symptoms.

Pilot study of reintegration and service needs for women veteran mothers

Abstract only. The overall objective of this pilot study was aimed at deepening our understanding of the concerns and stressors that accompany reintegration into civilian life for OIF/OEF Reserve and Guard women veterans who were or were not mothers of dependent children at deployment. Specifically, we wanted to gain insight into concerns and stressors pertaining to (a) reintegration issues related to family, (b) reintegration issues related to work, and (c) barriers to use of current services and how to improve these services.

Prospective evaluation of mental health and deployment experience among women in the US military

Previous research has shown that military women often experience potentially severe health outcomes following deployment. The authors examine positive screens for depression, anxiety, panic, and posttraumatic stress disorder in relation to deployment in support of the operations in Iraq and Afghanistan. The primary aim of this study was to focus on behavioral, health, and demographic factors in a large cohort of military women during a period of high operational tempo, and to examine how these factors and deployment-related stressors may influence the onset of mental health symptoms.
Relationship between ADF member's health, partner's health, and child health outcomes: findings from the Timor-Leste Family Study on Australian Families

Summary of a presentation given at the 2012 AMMA Conference. Summary of a presentation given at the 2012 AMMA Conference. Key findings from the Timor-Leste Family Study suggest that physical and psychological health of the ADF member and their partner were associated. The study also found an association between the ADF member's health and their child's health, and between the at-home parent and child's health. The conclusions and implications of these findings are addressed. [Article extract]


The Review represents the first independent examination of Australian Defence Force Academy since its inception in 1986. Despite considerable improvements since the culture of the 1990s, the Review found widespread, low-level sexual harassment; inadequate levels of supervision, particularly for first year cadets; an equity and diversity environment marked by punishment rather than engagement; and cumbersome complaints processes. The Review's ambition for ADFA is that it be a model learning and training institution, where all midshipmen and cadets have an equal voice, an equal place and are of equal value. All midshipmen and cadets should be able to live and work in an environment that is safe and free from harassment and violence.


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Chapters include: (1) The case for change; (2) Recruitment and retention of women; (3) ADF culture and attitudes towards women; (4) Workforce representation and progression; (5) Workforce structure: opportunities, pathways and barriers; (6) Combining a military career with family; (7) Sexual harassment, sex discrimination and sexual abuse; (8) Adequacy and accessibility of support mechanisms; (9) Review of practices in comparable international militaries.

Subjects: Armed forces / Veterans / Women / Violence / Sexual assault / Sexual harassment / Discrimination / Human rights / Gender equality / Inquiries / Australia

Catalogue ID=30655

Reproductive health, rights and justics in the military [Monograph] / Law Students for Reproductive Justice (LSRJ). - Oakland, California : Law Students for Reproductive Justice (LSRJ), 2013, 10 pages

Summarises the healthcare available to United States serving military and veterans. Sections include: military population demographics; healthcare options for active military members and veterans; access to reproductive healthcare services for women (abortion, adoption, reproductive technologies, birth control, disparity in care, military sexual trauma, pregnancy, cancer prevention and therapy, sexual dysfunction, and sexually transmitted diseases); reproductive healthcare services for men; sexual orientation and gender variance in the military; and people of color in the military.

Subjects: Armed forces / Veterans / Women / Reproductive health / Reproductive rights / Health equality / Access / United States

Catalogue ID=30657

Risk and resilience in Australian military families [Conference paper] / McGuire, Annabel; Runge, Catherine; Anderson, Renee; et al.- Hobart : Australian Military Medicine Association (AMMA), 2012, 74-75

Summary of a presentation given at the 2012 AMMA Conference. Discusses the potential risk and protective factors associated with the physical, mental, and family health of partners and children including family functioning, coping, social support, quality of relationship, and intimate partner violence. Risk and protective factors may exacerbate or ameliorate effects associated with military life for partners and children. The findings support aspects of prior research particularly from the United States and provide new insights on the health and wellbeing of Australian military families and their family dynamics. Factors associated with risk and resilience for military families may be amenable to policy and practice interventions. [Article extract]

Subjects: Armed forces / Veterans / Families / Women's health / Parenting / Risk factors / Resilience / Australia

Catalogue ID=30643

URL: http://sitemaker.umich.edu/airforce_study/files/pierce_women_2006.pdf

Policy makers can benefit from research that provides evidence regarding issues of
gender so traditional stereotypes of feminine and masculine traits and behavior can either be dispelled or addressed head-on to better meet the challenges of today's military. Physiological and psychological evidence has shown us that women are not just a smaller, shorter, weaker version of men, but that women have unique features that might prove advantageous in certain circumstances such as fine motor movement or multitasking. It is also important to learn more about gender differences that may exist in responding to military stressors so that interventions can be tailored to support adaptive coping responses. Evidence is also needed to support family-friendly policies that support lower ranking women through the childbearing years where the demands of job and family may exceed their resources, resulting in the decision to leave military service. The debate and controversy regarding the role of women in the military among psychologists, sociologists, legislators, journalists, and feminists, does not take into account the most critical stakeholder and that is the experienced women themselves. [Article extract]

(Subjects: Armed forces / Veterans / Women / Gender roles / Gender analysis / United States)

Setting the stage: research to inform interventions, practice and policy to improve women veterans' health and health care [Serial article] / Bastian, Lori; Bosworth, Hayden; Washington, Donna; et al. Journal of General Internal Medicine vol. 28 no. 2, 27 June 2013, 491-494

With increasing participation of women in the U.S. military, and more than 2.2 million U.S. women Veterans, the health and health care of military and Veteran women is an important Veterans Health Administration (VA) priority. This supplement outlines new research findings; highlighting research that can lead to improvements in care; as well as raise awareness of, stimulate interest in, and increase research about the health care of women Veterans and women in the military.

(Subjects: Armed forces / Veterans / Women / Older women / Airforce / Navy / Army / Women's health / Health care / United States)

URL: http://www.va.gov/vhapublications/ViewPublication.asp?pub_ID=2455

This volume describes sociodemographic characteristics and health care utilization patterns of women veteran patients in the VHA. Key findings include the rapid growth of the VHA women veteran population, the shifting age distribution in VHA women veterans, high levels of service-Connected disability status in VHA women veterans, frequent use of VHA care by VHA women veterans, as well as an increase in women veterans using VHA care.

(Subjects: Armed forces / Navy / Airforce / Veterans / Women / Older women / Health equality / Health outcomes / Gender analysis / Gender equality / United States)

Surviving sexual assault [Webpage] / Collins, Elizabeth M.
News (United States Army) no. Article 44333, 27 August 2010, 1 page

Discusses the widespread sexual assault of women within the United States military, and the steps being taken to try to combat the problem. A number of women victims share their stores.

(Subjects: Armed forces / Women / Sexual assault / United States)

(Catalogue ID=30647)

URL: https://www.acog.org/~/media/Committee%20Opinions/Committee%20on%20Health%20Care%20for%20Underserved%20Women/WomeninMilitary.pdf

Military service is associated with unique risks to women's reproductive health. As increasing numbers of women are serving in the military, and a greater proportion of United States Veterans are women, it is essential that obstetrician-gynecologists are aware of and well prepared to address the unique health care needs of this demographic group. Obstetrician-gynecologists should ask about women's military service, know the Veteran status of their patients, and be aware of high prevalence problems (e.g., posttraumatic stress disorder, intimate partner violence, and military sexual trauma) that can threaten the health and well-being of these women. Additional research examining the effect of military and Veteran status on reproductive health is needed to guide the care for this population. Moreover, partnerships between academic departments of obstetrics and gynecology and local branches of the Veterans Health Administration are encouraged as a means of optimizing the provision of comprehensive health care to this unique group of women.

(Subjects: Armed forces / Veterans / Women's health / Gynaecology / Obstetrics / Reproductive health / Sexual health / Post traumatic stress disorder / Sexual assault / Family violence / United States)

(Catalogue ID=30636)

Women's business in men's business: women's health in military service in Australia [Monograph] / Summers, Annette
ADF Health vol. 1 no. Sep 25, 1999, 9-12

The suitability of women to participate fully in military service continues to be argued, mostly on the basis of reproductive and gynaecological issues, and the impact that these allegedly have on women's role in military service. Scientific study of the differences between men and women, as well as social constraints imposed by the female role in reproduction and child rearing, has been used since the 17th century to justify women's unsuitability for many professions and the public sphere generally. Recent study of women in the military, while acknowledging the differences between the sexes, is showing that the traditional exclusion of women from many male-dominated positions cannot be justified. [Author abstract]

(Subjects: Armed forces / Gender roles / Equal opportunity / Employment /
Women veterans' healthcare delivery preferences and use by military service era: findings from the national survey of women veterans [Serial article] / Washington, Donna; Bean-Mayberry, Bevanne; Hamilton, Alison; et al. Journal of General Internal Medicine vol. 28 no. 2, 27 June 2013, 571-576

The number of women veterans utilising the Veterans Health Administration (VA) has doubled over the past decade, heightening the importance of understanding healthcare delivery preferences and utilization patterns. The article highlights the importance of ensuring access to specialty services closer to home for women veterans, which may require technology-supported care. The higher use of mental health care by younger women veterans reinforces the need for integration and coordination of primary care, reproductive health and mental health care.

Subjects: Armed forces / Veterans / Women / Older women / Airforce / Navy / Women's health / Mental health / Psychological well being / Gender analysis / United States


Throughout America’s history, women have served honorably and sacrificed tremendously. And they continue this effort in Iraq and Afghanistan today. Yet, the nation is not doing enough to support them here at home. Collectively, bold steps must be taken to improve health care for female troops and veterans - taking their unique health care needs into account - and expand existing support services and transitional resources. Female veterans should no longer have to choose between a homeless shelter and the streets at night. The military must also work aggressively to eliminate sexual assault and harassment from within its ranks, and widen career opportunities for women. This will make our military stronger and our country more secure. [Conclusion, extract]

Subjects: Armed forces / Veterans / Women / Sexual assault / Health care / Health services / Gender sensitivity / Employment / Gender equality / United States

Work-family conflicts of women in the air force: their influence on mental health and functioning [Serial article] / Vinokur, Amiram D.; Pierce, Penny F.; Buck, Catherine L. Journal of Organizational Behaviour vol. 20 no. 6, 1999, 865-878

Examines conflicts found in female members of the U.S. Air Force between their work and family roles. Reviews evidence that the increased presence of women in the workforce is not accompanied by a corresponding reduction in their perceived family role and responsibilities. Describes and proposes extensions to models for examining the effects of work and family stressors. Describes in detail the research method and the measurement of: job and family stress; distress and involvement; work-family conflict; depression; role and emotional functioning. Analyses in-depth the results. Finds that
work-family conflict is a determinant of family distress, rather than job distress and depression as in previous studies. Mentions other findings. Concludes that none of the three types of role involvement - job, marital, parental - increases work-family or family-work conflicts. [EmeraldGate abstract]

(Catalogue ID=30759)

Ethnic groups


This report is about refugee women and their settlement experience in Australia. Contains facts and figures and a range of good practice ideas that have been shown to be effective in the successful settlement of women and their families. Includes recounted real life stories of some of the women themselves. The report highlights the vital role that support services provide in the successful settlement of refugees in Australia.

(Catalogue ID=30610)

**Promoting the engagement of interpreters in Victorian health services** [Monograph] / Vanstone, Rachel; Szwarc, Josef; Casey, Sue; et al.. - Melbourne : Foundation house, June 2013, 167 pages


Effective communication between health practitioners and their clients is fundamental to ensure the safety and quality of health care. Thousands of Victorians with low English proficiency cannot achieve effective communication in a health setting without a skilled interpreter. Evidence shows there are many occasions when credentialled interpreters are not engaged when needed, creating risks for both clients and health practitioners. The evidence also indicates that there is insufficient supply of credentialled interpreters who have skills in working in complex health environments. There is a compelling case for a broad national workforce and industry review.

(Catalogue ID=30622)

Rural


The National Rural Women's Summit brought together eighty two women from rural, regional and remote areas to participate in policy debate and provide quality advice on issues affecting remote, rural and regional communities in Australia. The report makes 109 recommendations for the following themes: climate change, environment and water; women in decision making; education; health; employment and business development; families and children; community building, reconciliation and new arrivals; young people; infrastructure, transport and telecommunications; and training and skill development.

(Catalogue ID=30720)

VIOLENCE

URL: http://www.ajgiph.com/content/3/1/13

Reports on the Australian arm of a large-scale study of the patterns and prevalence of co-occurrence of family violence and problem gambling in Australia, New Zealand and Hong Kong. The current study screened 120 help-seeking family members of problem gamblers in a range of clinical services for both family violence and problem gambling. The main results showed that 52.5% reported some form of family violence in the past 12 months: 20.0% reported only victimisation, 10.8% reported only perpetration and 21.6% reported both victimisation and perpetration of family violence. Parents, current and ex-partners were most likely to be both perpetrators and victims of family violence. There were no gender differences in reciprocal violence but females were more likely to be only victims and less likely to report no violence in comparison to males. Most of the 32 participants interviewed in depth, reported that gambling generally preceded family violence. The findings suggest that perpetration of family violence was more likely to occur as a reaction to deeply-rooted and accumulated anger and mistrust whereas victimisation was an outcome of gambler’s anger brought on by immediate gambling losses and frustration. While multiple and intertwined negative family impacts were likely to occur in the presence of family violence, gambling-related coping strategies were not associated with the presence or absence of family violence. The implications of the findings for service providers are discussed.

(Catalogue ID=30611)

Intimate partner violence

A collaboration to enhance oral health care for survivors of domestic violence: Women's Domestic Violence Shelters and Nova Southeastern University's College of Dental Medicine [Serial article] / Abel, Stephen; Kowal, Heni Crosby; Brimlow, Deborah; et al. Journal of Dental Education vol. 76 no. 10, 2012, 1334-1341
URL: http://www.jdentaled.org/content/76/10/1334.full
Nova Southeastern University College of Dental Medicine (NSU-CDM) has developed a program to educate its Advanced Education in General Dentistry (AEGD) residents to provide oral health services to survivors of domestic violence. NSU-CDM worked in collaboration with three community-based sites in Florida's Dade and Broward counties that provide residential and outpatient services to women survivors of domestic violence. The educational program includes didactic instruction and clinical rotations utilizing portable dental equipment assembled at the community-based sites. The central element of the program was the establishment of a partnership between NSU-CDM and local community-based organizations that serve women who have experienced domestic violence. This collaboration enabled the school to involve a range of key stakeholders in program development and implementation and to successfully establish dental clinics at two shelter sites. In total, NSU-CDM provided dental care to over 250 women, and twenty AEGD residents completed both the didactic and clinical rotations of the domestic violence education program. Elements identified as being essential to successful collaborations between oral health clinics and shelter settings are described.

(Catalogue ID=30738)

Justice or judgement: the impact of Victorian homicide law reforms on responses to women who kill intimate partners [Monograph] / Kirkwood, Debbie; McKenzie, Mandy; Tyson, Danielle : Domestic Violence Resource Centre Victoria (DVRCV), 2013, 58 pages. - (DVRCV Discussion Paper; No.9)

Reforms to homicide laws in Victoria were introduced in 2005 to improve legal responses to women who kill abusive intimate partners. This discussion paper examines whether the reforms are working as intended. The research identifies that 31 men and eight women have been prosecuted for killing an intimate partner since the reforms were introduced. It provides a detailed analysis of court transcripts in seven cases of women who have killed their intimate partners or ex-partners. [Publisher abstract]

(Catalogue ID=30673)

Researching the gaps: the needs of women who have experienced long-term domestic violence [Monograph] / Healey, Lucy. - Melbourne : Good Shepherd Youth and Family Services, 2009, 129 pages

The introduction of the Victoria Police Family Violence Code of Practice is often identified as the beginning of the third wave of family violence reform in Victoria. Prior to its implementation, and a new systems approach, there was no common understanding of good practice when responding to family violence incidents. Healey aims to assist policy makers, service providers and women to identify the next steps we must take to ensure family violence reform is truly effective.

(Catalogue ID=30673)
Psychological wellbeing / Melbourne)

(Catalogue ID=30623)

Rising to the case for change: domestic violence Victoria facilitating coordinated responses to Victorian Government sector reform agenda [Serial article] / Masters, Jacinta
Parity vol. 26 no. 2, 2013, 15-16

The VAW service system in Victoria has set precedents nationally and internationally for integrated family violence responses and for the primary prevention of VAW. The integrated family violence service system has a significant advantage to the current state reform agenda in that cross-system integration, early intervention and primary prevention of VAW have already taken significant steps forward to better client outcomes for women and children. We can now use these reforms as a springboards to further develop and entice optimal responses and outcomes for Victorian women and children. [Author conclusion).

(Subjects: Family violence / Intimate partner violence / Women / Public policy / Women's policy / Policy development / Health reform / Victoria)

(Catalogue ID=30708)

Why do some men use violence against women and how can we prevent it: quantitative findings from the UN Multi-country Study on Men and Violence in Asia and the Pacific [Monograph] / Fulu, Emma; Warner, Xian; Miedema, Stephanie; et al.. - Bangkok: UNDP, UNFPA, UN Women and UN Volunteers, September 2013, 107 pages
URL: http://www.partners4prevention.org/node/517

This study was conducted in Bangladesh, Cambodia, China, Indonesia, Sri Lanka and Papua New Guinea. Over 10,000 men were asked about their use and experiences of violence, attitudes and practices, childhood, sexuality, family life and health. Nearly half of the men interviewed reported using physical or sexual violence against a female partner, ranging from 26 percent to 80 percent across the sites. Nearly a quarter of men interviewed reported perpetrating rape against a woman or girl, ranging from 10 percent to 62 percent across the sites. The findings show what factors make men more or less likely to use violence, and indicate that the majority of the factors associated with men's use of violence can be changed. The report makes recommendations about what can be done to prevent violence against women, based on new evidence from men themselves on what needs to change and the specific entry points for these changes. [Summary of publisher abstract]

(Subjects: Family violence / Intimate partner violence / Men / Surveys / Prevention / Health promotion / International perspectives / Asia / Pacific Region / Partners for Prevention)

(Catalogue ID=30609)

WOMEN'S HEALTH SERVICES

URL: http://whwest.org.au/resource/data/

(subjects: Women / Health status / Population statistics / Social conditions / Gender differences / Women’s health services / Health planning / Western Metropolitan Region (Vic))

(Catalogue ID=30674)

WORK


This fact sheet provides a statistical snapshot of the gender pay gap in Australia, based primarily on ABS data, for the following categories: national; state and territory; earnings by industry; earnings by occupation; private and public sector; and age range.

(subjects: Employment / Workforce / Women / Income / Gender equality / Discrimination / Australia)

(Catalogue ID=30612)

YOUTH

Building the scaffolding : strengthening support for young people in Victoria [Monograph] / Grogan, Paula; Colvin, Kate; Rose, Jen; et al.. - Melbourne : Victorian Council of Social Service (VCOSS) and Youth Affairs Council of Victoria Inc. (YACVic), April 2013, 146 pages

Report on research conducted by the Victorian Council of Social Service (VCOSS) and the Youth Affairs Council of Victoria (YACVic). The purpose of the research was to (1) identify current gaps in youth support services in Victoria; (2) assess the impact of those gaps on young people’s health and wellbeing; (3) identify relevant government policies and program initiatives; (4) identify solutions or actions to address youth support service needs; and (5) recommend policy changes to improve young people’s health and wellbeing.

(subjects: Youth / Social policy / Policy development / Social welfare / Best practice / Surveys / Victoria)

(Catalogue ID=30665)