



**WOMEN'S HEALTH IN THE SOUTH EAST
HEALTH PROMOTION PLAN**

October 2006 – June 2009

Vision

Women's Health in the South East works from a feminist perspective that is committed to the principles of equity and choice in health for all women. Health promotion strategies are employed to promote and sustain the health and well being of women in the SMR, resourcing and supporting women to increase control over their lives and health to enable them to reach their full potential.

All health promotion activities, programs and projects are documented from consultations through to evaluations. This documentation is thorough and consistent with Policy.

- Any issues that need immediate attention are brought to weekly staff meetings.
- Any issues that need an organisational response are brought to the fortnightly staff team meetings.
- Organisational goals are reviewed and discussed twice yearly at staff development days (or earlier if the need arises).
- Strategic Planning is a yearly event that includes both staff and Council and quarterly reports are presented by the CEO on the progress.

The Overall organisational objectives are:

- **Capacity Building**
- **Community Participation**
- **Community Advocacy**

The Health Promotion Priority areas are:

- **Mental Health and Social Connectedness**
- **Preventing Violence against Women**
- **Sexual and Reproductive Health**

Priorities based on identified need

All priorities are based on identified and/or expressed need. WHISE considers all relevant data in Community Health Plans, Municipal Health Plans, PCP data and WHISE Needs Assessment. WHISE collects data about Women's health needs from the following: SWITCH; Community consultation; Program evaluations; Service Providers.

We provide a change agent specialist role in the system including contributing to state and regional planning, collaborative partnerships with other health providers, providing training, education and information, conducting research and piloting and initiating innovative models of service delivery. WHISE believes in the right of women to make informed choices in all aspects of their health care.

The WHISE Health Promotion Plan for 2006 – 2009 will use a model of service delivery that will be focused around the 4 Primary Care Partnerships in the Southern Metropolitan Area. These are Kingston/ Bayside PCP, ISPICH, South Eastern PCP, Frankson/Mornington PCP. WHISE will participate as a member of all 4 PCP'S and provide services equally across these sub-regions.

Rationale

We are a service with limited resources that covers a broad region:

The Strategic Planning process of 2006 identified a number of marginalised groups which are not currently being addressed equally within the current health service frameworks. These are:

- Culturally and linguistically diverse women
- Women with Disabilities
- Indigenous Women
- Young (15-25) and Older women (50+)
- Lesbian and same-sex attracted women

WHISE will address issues that impact on these groups of marginalised women.

Outcome / goal

A planned, integrated and holistic approach to improve Best Practice in Women's Health Service Delivery for marginalised women.

Impacts / Objectives

To implement a process that supports and involves staff members in the planning, decision-making processes and implementation of the initiative

- To ensure all staff member's work plans correspond with our goal.
- To actively involve WHISE Council in advocating.
- To actively direct funding proposals, projects and training into the agreed geographic area
- To work collaboratively with local service providers and women from the community in the planning and implementation of the initiatives
- To employ a dual strategy to:
 - Influence catchment planning and service delivery to include consideration of Gender and Diversity
 - Generate initiatives that address issues that impact on the health and wellbeing of marginalised women in the community.
 - To document and evaluate this model to offer recommendations for future strategic planning.

Methodology / Reach

There are 4 strategies to meet our goal:

- WHISE activities (Projects, forums, community involvement)
- Training to service providers and local women
- Influencing service delivery work
- Health promotion activities/interventions

WHISE activities

WHISE has always stated the importance of partnerships, and efforts are made to establish and/or nurture local partnerships with a focus on sharing resources, local information and expertise. In areas where these groups and/or networks already exist, WHISE workers ensure that links and consultation are well established before starting a new project. If such groups do not exist, they are formed and they usually comprise of local service providers, students on placements, local women.

The group works on a vision, objectives and activities that lay the foundation of the project. This leads us into the project well informed about the local environment and supported by local health providers and women from the community.

Methodology for WHISE activities

Information will be utilised from SWITCH Stats, anecdotal data, municipal health plans, PCP health plans, demographic profiles and Women's Health Victoria database and Women's Health and well being strategy to inform each activity.

Local information and relevant services will be identified.

The local women, Key groups and local stakeholders will be consulted

When a relevant network doesn't exist a group of local people will be formed

- Support and participation from local agencies will be sought
- A reference group will be established
- Key issues will be identified and examined
- A vision, objectives and planned outcomes with timeframes will be agreed upon
- Local resources will be identified i.e. volunteers, student on placement
- Support from local media will be sought
- Project strategies and activities will be implemented

- Process and outcomes will be reviewed and evaluated

Training to service providers and local women

WHISE now has a well established training calendar that will continue. The training will be planned to align with the three Health Promotion Priority areas and the 4 PCP catchments.

- WHISE training will be streamlined and training resources will be allocated to the chosen catchment.
- Criteria will also be developed against requests for training to be considered, which will include Gender and Diversity as a priority. This information will inform work plans and the basis of a training calendar.
- Gender and Diversity training will be continually reviewed and updated throughout the 3 year period, with recent data and information from WHV database
- Services requesting training will meet with WHISE to establish the training context and objectives
- Requests for training will be provided with a Training Outline
- Staff will utilise QIPPS as a Training proposal and Evaluation template.
- Staff will utilise internal Education and Training Program Standards to inform training
- Research local Training Needs.
- Staff will be supported in training via ongoing Professional Development and 'Modelling' by the Training and development co-ordinator.

Methodology for influencing service delivery

Influencing service delivery is a component of the dual strategy that WHISE employs to improve the health and well being of women living in the area. WHISE achieves this through training and also by working collaboratively with other services. The following strategies will also be utilised:

- WHISE will advocate for women, using the information gathered from consultation with women and local service providers
- WHISE will attend and actively participate in Regional PCP, advisory committees and networks
- A gendered critique of PCP priorities will be developed
- Staff will be trained to present this material and will be supported with effective rationale
- Further comprehensive Gender & Diversity training will be offered

Priority One

Mental Health and Social Connectedness

Goal

A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery

Objective

To improve the mental health and social connectedness of women in the Southern Metropolitan area.

Strategies:

- Connecting Women's Partnership
- Lesbian information sessions
- Women's Mental Health Day
- Depression Health Promotion Education Sessions
- International Women's Day
- Mental and Emotional wellbeing community feedback forums x3
- Why Women's Health x 10
- Health resources

Key Players

- 4 regional PCP'S -South East , FMP, BK,IS
- Cardinia and Casey Community Health Service
- Frankston, Mornington Peninsula, Casey Council and Cardinia Shire
- Neighbourhood Houses
- Schools
- MRC
- Regional and State-wide organisations

Evaluation

- Project Proposals and Evaluations for each WHISE activity.
- Evaluation will be ongoing and documented via team meetings on a monthly basis
- Supervision and monitoring of work plans between the Staff Development Coordinator and staff members
- A report will be drafted and delivered to Council at the completion of the project that will be a compilation of information from Project Evaluations, Training Evaluations, and minutes of team meetings.

Impact Indicators

- That a Team Meeting per month is allocated solely for the planning and management of the project
- That each team member has a clear understanding of the model and their role in contributing toward its implementation
- That each of the WHISE activities in the area will be steered by a committee comprised of local service providers and women from the community
- That requests for WHISE training will increase
- That Gender & Diversity training is delivered to a broad range of stakeholders
- That there will be an increase in initiatives targeting women, particularly marginalised groups of women
- That members of WHISE partnerships will develop increased knowledge and learning's about the best way to work with diverse groups of women.

Budget: \$

Priority Two

Preventing Violence against Women

Goal

A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery,

Objective One:

To prevent violence against women by capacity building, advocacy and empowerment of women through information dissemination.

Strategies:

- Gender and Diversity Training x 4
- Peer Educators Training
- Respect protect Connect
- Gender and Diversity in Family Violence

Key Players

- South East PCP
- Cardinia and Casey Community Health Service
- Casey Council and Cardinia Shire
- Neighbourhood Houses
- Schools
- MRC
- Regional and State-wide organisations

Evaluation

- Project Proposals and Evaluations for each WHISE activity.
- Evaluation will be ongoing and documented via team meetings on a monthly basis
- Supervision and monitoring of work plans between the Staff Development Coordinator and staff members
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- That a Team Meeting per month is allocated solely for the planning and management of the project
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- That each of the WHISE activities in the area will be steered by a committee comprised of local service providers and women from the community
- That requests for WHISE training will increase
- That Gender & Diversity training is delivered to a broad range of stakeholders
- That there will be an increase in initiatives targeting women, particularly marginalised groups of women
- That members of WHISE partnerships will develop increased knowledge and learning's about the best way to work with diverse groups of women.

Budget: \$

Priority 3

Improving Sexual and Reproductive Health

- Lesbian sex forum
- Gender and Diversity Training
- Community information forum

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The 4 catchment PCP's will be targeted (we now sit on committees of each one) to develop women's health and gendered assessment of health issues. The activities / programs / projects that develop from this will be documented as the year progresses.



**WOMEN'S HEALTH IN THE SOUTH EAST
HEALTH PROMOTION PLANNING GRID**

JULY 2006 – JUNE 2009

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 1:	To improve the mental health and social connectedness of women in the SMR.			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Improved mental health and social connectedness evidenced by the evaluations			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
<p>Screening, individual risk assessment and immunisation</p> <p>Social marketing and Health information To offer women members an opportunity to become involve in their community To provide volunteers with an induction to the Service To provide an opportunity for volunteers to meet other volunteers To improve the personal development and self esteem of volunteers To provide an environment where volunteers can gain or update their skills To inform women about the services offered by WHISE</p>	20 women per year	Women's Health Worker Program Trainer and Facilitator Health information worker June 2007	Women's Health Worker 120 hours per annum Program Trainer and facilitator 120 hours per annum Health information worker 120 hours per year \$19,800.00 per annum Consumables \$1000	
Total Budget per Objective			\$19,800.00	
			\$28,500.00	

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 1:	To improve the mental health and social connectedness of women in the SMR.			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Improved mental health and social connectedness evidenced by the evaluations			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Afghani Women's Group – Focus on Women Support Group WHOW Women Hearing Other Women Russian Women's group Violence recovery group Women living with mental illness –young women focus Health education and skill development Community action Settings and Supportive Environments Organisational Development Workforce Development	20 20 30 15 20 20 per annum	Women's Health Workers x 4 ongoing	Staff Hours Total 480 hours \$26,400.00 Peer facilitators \$2000 Consumables \$600.00	
Total Budget per Objective			\$29,400.00	
			\$57,900.00	

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 1:	To improve the mental health and social connectedness of women in the SMR.			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Improved mental health and social connectedness evidenced by the evaluations			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶

Social marketing and Health information Health education and skill development Community action Community Building/Leadership Program- Network support groups To nurture, support and provide training to local women in order for them to adopt a broad range of roles within the organisation and the health sector Settings and Supportive Environments Organisational Development Workforce Development Resources	30 women	Women's Health worker's and Program Trainer and facilitator June 2007	Staff hours 200 hours \$11,000.00	\$5,000.00
Total Budget per Objective			\$11,000.00	\$5000.00
			\$68,900.00	\$5000.00

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women. with CALD women being a priority, in the SMR Catchment

Objective 1:	To improve the mental health and social connectedness of women in the Casey Cardinia catchment.			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Improved mental health and social connectedness evidenced by the evaluations			
Health Promotion Interventions & Capacity Building strategies ²	Estimated Reach ³	Timelines & by whom ⁴	Estimated Budget from C& WH program ⁵	OPTIONAL Estimated Other Funding sources ⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development International Women's Day A variety of health promotion activities to celebrate IWD Settings and Supportive Environments Organisational Development Workforce Development Resources	100 per year	WHISE Staff and other services yet to be confirmed March each year	Staff 150 hrs \$8,250.00 Consumables \$1000.00	\$2,000.00
Total Budget per Objective			\$9,250.00	\$2,000.00
			\$96,650.00	\$7000.00

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery,			
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women.			
Objective 1:	To improve the mental health and social connected ness of women in the SMR			
Estimated Impacts ¹ (Qualitative &/or Quantitative) for Objective 1	Improved mental health and well being of women in the SMR as indicated by evaluations			
Health Promotion Interventions & Capacity Building strategies ²	Estimated reach	Timelines and by whom	Estimated budget form C&WH program	OPTIONAL estimated other funding source
Screening, individual risk assessment and immunisation Social marketing and Health information Whise Newsletter 2 nd monthly WHISE resource kits – information and library resources Health education and skill development Gender and diversity training x2 Community action Settings and Supportive Environments Organisational Development Workforce Development Resources	300 members 1,500 kits per year 30	Health Information worker ongoing Women's health workers June 2007	Staff hours- 300 \$16,500.00 Mail out \$2000.00 Printing \$1000.00 New library resources \$1000 Staff hours- 160hrs \$8,800 Consumables \$300	
Total Budget per Objective			\$20,500.00	
			\$129,980.00	\$7000.00

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 1:	To improve the mental health and social connectedness of women in the SMR.			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Improved mental health and social connectedness evidenced by the evaluations			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
<p>Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development</p> <p>The Respect, Protect, Connect Program is a peer education program that works with young women in secondary schools in the SMR in the prevention and early intervention program providing workshops on anti-violence and bullying strategies, building healthy relationships and resiliency and drug and alcohol issues</p> <p>Settings and Supportive Environments</p> <p>Organisational Development Workforce Development Resources</p>	<p>2,500 students Average 110 workshops per annum</p>	<p>Young women's Health worker ongoing</p>	<p>Staff hours 1190hrs \$65,450.00 Consumables \$10,000.00 Peer educators \$5,500.00</p>	<p>\$22,500.00 per annum</p>
Total Budget per Objective			\$80,950.00	\$22,500.00
			\$210,930.00	\$29,500.00

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.			
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.			
Objective 2:	To prevent violence against women			
Estimated Impacts ¹ (Qualitative &/or Quantitative) for Objective 1	Discrimination and violence against women decreases and women become more empowered evidenced by the evaluations			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
<p>Screening, individual risk assessment and immunisation Social marketing and Health information</p> <p>Health education and skill development Community action "Keep our families safe" A whole of community forum to highlight the issue of violence in families and provide access and information about service providers in the Frankston catchment</p> <p>Settings and Supportive Environments</p> <p>Organisational Development Workforce Development Resources</p>	300	Women's health worker's Frankston City Council Victoria Police November 2006	Staff hours 34 hrs \$1870 Facilitator \$2000	
Total Budget per Objective			\$3,870.00	
			\$214,800.00	\$29,500

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women.

Objective 2:	<i>To prevent violence and discrimination against women</i>			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Gender and Diversity being included in Catchment Planning and programs			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development Gender and Diversity Training x 1 Community action Settings and Supportive Environments Organisational Development Workforce Development Resources	15	Women's health workers ongoing	Staff hours -80 hrs \$4400 Consumables \$150.00	
Total Budget per Objective			\$4590.00	
			\$219,390.00	\$29,500.00

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Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 2:	<i>Prevent violence against women</i>			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	<i>Improved understanding of issues related to Sexual and reproductive health</i>			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development Family violence sessions for Community development course at Chisholm to focus on gender issues and multiculturalism Community action Settings and Supportive Environments Organisational Development Workforce Development Resources	100	Project worker December 2006, ongoing in 2007	Staff hours \$5000.00	Chisholm \$10,000
Total Budget per Objective			\$5000.00	
Total			\$224,390.00	\$39,500

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 2:	<i>Prevent violence against women</i>			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	<i>Improved understanding of issues related to Sexual and reproductive health</i>			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
Screening, individual risk assessment and immunisation Social marketing and Health information A community forum to provide women with information about the Victoria Police code of conduct and Violence against women review team Health education and skill development Community action Settings and Supportive Environments Organisational Development Workforce Development Resources	70	All workers Victoria Police	Staff hours 200hrs \$11,000.00 Consumables \$300	
Total Budget per Objective			\$11,300.00	
Total			\$235,690.00	\$39,500

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 2:	<i>Prevent violence against women</i>			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	<i>Improved understanding of issues related to Sexual and reproductive health</i>			
Health Promotion Interventions & Capacity Building strategies ²	Estimated Reach ³	Timelines & by whom ⁴	Estimated Budget from C& WH program ⁵	OPTIONAL Estimated Other Funding sources ⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development Community action Settings and Supportive Environments Provide support for women whose partners are engaged in Behaviour change program for partner violence Organisational Development Workforce Development Resources	90 women per year	Women's Health worker Lifeworks Men's behaviour change program -ongoing	Staff hours- 520hrs \$15,000.00	Lifeworks \$20,000
Total Budget per Objective			\$15,000.00	
Total			\$250,690.00	\$59,500

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 1:	<i>Improve women's Sexual and reproductive health</i>			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Improved understanding of issues related to Sexual and reproductive health as indicated by evaluations			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development Community action Settings and Supportive Environments Development of Women's Health Reference Group In Casey/Cardinia Catchment focussing on younger women Organisational Development Workforce Development Resources	20 service providers approx 2 sessions per year targeting young women's issues 200 young women	Young women's health worker ongoing	384 hours \$21,120.00 Consumables \$1000.00	\$5000.00
Total Budget per Objective			\$22,120.00	
Total			\$272,810.00	\$64,500.00

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 2:	Improved sexual and reproductive health			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	<i>Staff will have an increase understanding of issues for lesbian/same sex attracted women relating to sexual and reproductive health</i>			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development Information and feed back session for women on sexual and reproductive health Community action Settings and Supportive Environments Workforce Development Training and support for all WHISE Staff Resources	100	ongoing Women's health workers	150 hours \$8250.00 Consumables \$500.00	
	11	June 2007 by external facilitator	Lesbian and same sex attracted health issues training \$3000	
Total Budget per Objective			\$11,750.00	
			\$284,560.00	\$64,500.00

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women.

Objective 3:	Improved awareness of sexual and reproductive health issues for women in the SMR			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Increased awareness of sexual and reproductive issues for women by health professionals			
Health Promotion Interventions & Capacity Building strategies²	Estimated Reach³	Timelines & by whom⁴	Estimated Budget from C& WH program⁵	OPTIONAL Estimated Other Funding sources⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development Lesbian visibility training for health professionals focussing on Sexual and reproductive health. Community action Organisational Development Workforce Development Resources	25	Womens Health worker June 2007	Staff hours -80 hours \$4400.00 Consumables \$1000	
Total Budget per Objective			\$5400.00	
Total			\$324,110.00	\$64,500.00

Part 3: Health Promotion Summary planning grid: **To summarise this planning process including budget details (for each priority).**

Organisational HP Goal:	A planned and integrated whole-of-organisation approach to improve Best Practice in Women's Health Service Delivery.
Population Target Group/s:	WHISE will address issues that impact on all marginalised groups of women and aim to empower women by advocacy and by building capacity of other service providers.

Objective 1: Objective 2: Objective 3:	To improve the mental health and social connectedness of women in the SMR. To prevent violence against women To Improve women's understanding of sexual and reproductive issues			
Estimated Impacts¹ (Qualitative &/or Quantitative) for Objective 1	Improved mental health and social connectedness evidenced by the evaluations			
Health Promotion Interventions & Capacity Building strategies ²	Estimated Reach ³	Timelines & by whom ⁴	Estimated Budget from C& WH program ⁵	OPTIONAL Estimated Other Funding sources ⁶
Screening, individual risk assessment and immunisation Social marketing and Health information Health education and skill development "How to run groups for women" training for service providers and womens groups -3 per year Community action Settings and Supportive Environments Why Women's Health x 5 sessions To provide an understanding of why women's health is important; provide an understanding of the social model of health and information about WHISE Organisational Development Workforce Development Resources	60 50 approx	Women's health workers June 2007 Women's health worker ongoing	Staff hours 450hrs \$24,750 Staff hours-175hrs \$9625.00 Consumables \$500	
Total Budget per Objective			\$35,375.00	
			\$359,485.00	\$64,500.500