



NEWS

APRIL
2003

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for the Body...
and Mind**

**10 Top Tips
for Building a
More Positive
Body Image**

**You can
Exercise
at any Age**

**In Touch...
In Formed...
Out There...
Out Back**



The Jean Hailes Foundation gratefully acknowledges the support of The Commonwealth Department of Health and Aging

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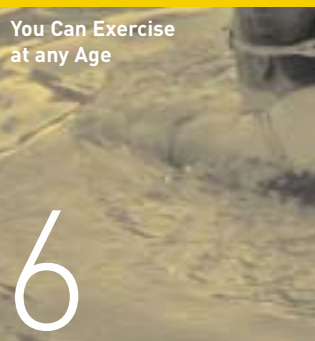
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The Jean Hailes Foundation Newsletter
Editor: Aleeza Zohar
Queries: tollfree 1800 151 441

Dear Friend of Jean Hailes

2003 marks the beginning of tremendously exciting times for The Jean Hailes Foundation, especially with our recent establishment of the Centre for Research Excellence (CCRE). This is an important step forward for The Foundation and an accolade to our Director of Research, Associate Professor Susan Davis, who heads up the CCRE's multidisciplinary team of investigators.



In this issue we explore body image for the midlife woman and we look at the colours of the rainbow in terms of nutrition and discover that, nutritionally, we should be eating almost everything, especially a variety of vibrant colours and textures. This is good news for anyone watching his or her intake and interested in learning about what goes into your system.

We also look at exercise and learn that exercise is almost more than an option in life – it has become a necessity - one that we should all take up on a regular basis. Our often busy and complex lives means that we don't schedule in time to 'move'. Once, this would have been automatic, as we walked everywhere and hunted our daily food. But, exercise doesn't need to be a sweaty work out at the gym, or a 20km bike ride. It can be as simple as a walk down a country lane or several trips of carrying shopping bags from the local shops, or walking up several flights of steps. Every little bit of activity throughout the day helps us to maintain our fitness levels and sense of wellbeing.

I am very proud to announce that our Rural Health Kit, which has been an enormous project over the past two years, has finally come to fruition, under the guidance of Education Director Sarah Hardy and Project Manager, Mandy Hudson. Find out how The Foundation has been able to deliver quality, up to date, midlife resources to health professionals living in rural and remote parts of Victoria. We hope that this amazing program becomes the pilot for an Australia wide project in the future.

I also offer my congratulations to The Jean Hailes Medical Centre Director, GP Dr Sue Reddish, who was recently named Boroondara Citizen of the Year. Sue sets a wonderful example to many younger women and her message is clear. There is a definite and clear link between a woman's health and playing sport. The Jean Hailes Foundation is very proud to support Sue's netball team in the state league. We wish them a successful and winning year.

Wishing all our supporters a wonderful, happy and healthy year ahead.

Janet Michelmore AO
Director

Healthy Eating for the Body... and Mind

By Dr Alice Murkies, co-author of the book *Color Me Healthy* and weight management specialist, Dr Rick Kausman, author of *Calm Eating* and award-winning *If Not Dieting, Then What?*

Feeling healthy is a combination of good nutrition and having a realistic image of our own bodies. At menopause there is often a shift in fat deposits from the lower (buttocks and thighs) to the central body (stomach region). Negative body image can develop as a result of this shift as there is often an increase in weight. Body image can also influence self esteem and sexuality. Western society's negative views of ageing women can also be very undermining.

What is body image?

Body image can be quite an elusive, even an intangible, term. Yet our body image is central to us all. Think of it as a combination of our perceptions and our attitudes towards our body. Put simply, it is the awareness of our own body.

Negative Influences on Our Body Image

While it is normal for our body image to change over our lifetime, unfortunately it has also become increasingly 'normal' for many women to develop negative feelings about their bodies. This dissatisfaction with our bodies can permeate numerous parts of our every day life. We certainly weren't born with a negative body image, but these feelings can evolve from a number of factors that all seem to have a cumulative effect.

If we can understand more about the process of how our own body image has evolved, we give ourselves more power to be able to deal in the most appropriate way with how we feel about our body image.

The understanding of past and present negative influences may enable us to better protect ourselves, and make a difference to how we feel. We may even be able to exert an influence over some of these negatives.

The role of nutrition

Diet has many roles apart from the nutritional value. The foods we eat, and perhaps more importantly the foods we avoid, have a far reaching impact on our health and wellbeing.

The ideal nutritional intake for a woman at midlife should be low in saturated fat (as found in animal fat), sugar and salt (as found in many fast foods), high in fibre (cereals, grains, rice, fruit and vegetables) and rich in calcium. In some women drinking less alcohol may also help to reduce some of the symptoms associated with menopause.

What to eat?

Eat. Don't eat. Don't eat that. Eat more. Eat less.

Each piece of advice seems to contradict the last and every new diet sends out another message. Low fat. High fibre. Don't worry about fibre. High carbohydrate. Low carbohydrate. High protein. Low protein.

There are diets to cleanse parts of the body that are designed to cleanse themselves, diets to cheer you up, diets for your blood type, body shape, astrological sign.

No wonder everyone is confused!

The number of diets available suggests this: when it comes to healthy eating, there is no single blueprint.

One size does not fit all.



Far left: Dr Rick Kausman
Left: Dr Alice Murkies

The role of fats

Yellow and gold are the colours of oils and fats, including seed oils and olive oil, and fat-rich foods, such as butter and egg yolks. Their nutrient values are an important part of a healthy diet.

Research into fats as a source of energy and nutrients has progressed dramatically. They used to be regarded as dietary villains, but current knowledge has modified that view. It is true that too much fat is not good for us. A high fat diet increases the risk of being overweight (with all the health risks that brings).

But we do need some fat for normal cell function.

THERE ARE THREE KINDS OF FATS:

- Saturated
- Monounsaturated
- Polyunsaturated

Many foods contain all three kinds, in differing proportions.

Although low fat is the guideline for our eating patterns we do need to eat the right type of fat.

Fats have a role beyond energy storage and are involved in cell processes such as cell membrane functions, signal messaging and interestingly gene expression. Specific fats are involved in these effects and dietary intake is vital, as we cannot manufacture some of these fats.

Fat comes from plants, seeds and animals.

Saturated fats – keep intake low

Saturated fats are usually solid at room temperature and predominantly animal in origin. They are found in high fat dairy products, butter, and yellow cheeses and on meat from domestic livestock. Intake should be limited as a high intake is associated with heart disease. Interestingly coconut and palm oil are high in saturated fatty acids.

What can we do?

Reduce butter, butter/oil blends, cream, sour cream, mascarpone, coconut cream/milk, fat selvage on meat and skin on chicken. Also limit foods with hidden saturated fats, such as sausages, bacon, devon, salami and other deli meats, meat pies, sausage rolls, potato crisps, corn chips, salty packet snacks.

Polyunsaturated fats – include in regular intake

These are found predominantly in nuts and seeds. There are two classes - linoleic fatty acid (also called omega 6 fatty acid) and alpha linoleic (called omega 3 fatty acids) which are particularly beneficial and found in plants and fish, particularly cold water fish.

What do we need to do?

Increasing polyunsaturated fats is important and also increasing the ratio of omega 3 fatty acids to omega 6 fatty acids. This can be achieved by increasing fish consumption. Fresh salmon, tuna, squid, mackerel and herring are good sources, as well as canned salmon, sardines and tuna. Plant sources include flaxseed and canola oil.

Two fish meals per week is now recommended by the National Heart Foundation

Monounsaturated fats – increase intake

These fats are less susceptible to oxidative damage and have been shown to reduce LDL cholesterol levels (high levels are undesirable) while also increasing HDL levels (high levels are desirable). High proportions of monounsaturated fatty acids are found in olive oil, canola oil, avocados, pine nuts, pistachio nuts, peanuts, sesame seeds, egg yolk and some meats.

TIPS

- Use a variety of oils for cooking and salad dressings
- Consider alternative spreads such as avocado, hummus and peanut butter

Good News!

Australians have decreased fat intake from 40% of energy consumption to 30% and our heart attack prevalence has decreased.

Research from the Nurses Health Study, which analysed 84,000 female nurses, shows that there is evidence among women that higher consumption of omega 3 fatty acids is associated with a lower risk of heart disease, particularly coronary heart disease deaths.

There are also benefits for rheumatoid arthritis. Doses up to several gram per day of fish derived fatty acids may be of benefit for treating longstanding rheumatoid arthritis and lower doses reduce mortality from heart disease. Polyunsaturated fatty acids also decrease the risk of diabetes, as does maintaining normal body weight.

Any other benefits?

Fats serve as a 'carrier' of fat-soluble vitamins (vitamins A, D, E and K) and fat-soluble antioxidants like beta-carotene and other carotenoids. There are at least 500 carotenoids. These are pigments responsible for the colour through the world: birds, fish and plants. We need fats to assist with absorption and metabolism of these essential nutrients.

What about eggs?

Eggs are sometimes neglected in the knowledge that they contain dietary cholesterol. Even for people for whom cholesterol is a concern, eggs should still be eaten, because they contain so much more than cholesterol.

They are a good source of protein and easily digestible. They contain iron, phosphorous, thiamine, vitamins A, D, E, K and a dose of carotenoids, especially lutein and zeaxanthin.

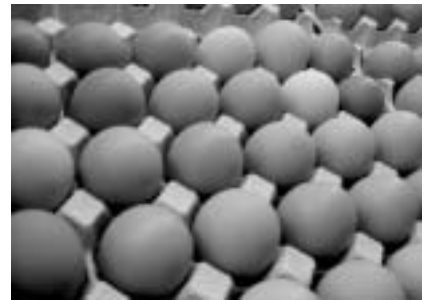
Omelettes and other egg dishes may be particularly valuable for older people because they are easy to prepare, easy to eat and highly nutritious. A French omelette is also fast food that is easy to prepare for one.

A herb omelette with some wholemeal, mixed grain or rye bread and a tomato salad, followed by a piece of fruit in season makes a highly nutritious meal with minimum effort.

Guess what?

Light or 'lite' oils have exactly the same fat and kilojoule content as regular oils. They are simply light in flavour or lighter in colour.

Orange and yellow are the colours of bright light and sunshine. Enjoy eating rainbows...



Omelette recipe

- Heat a thin pan over a moderate heat.
- Make the filling: chop herbs, grate cheese, slice raw mushrooms.
- Break 2 eggs into a bowl. They need no liquid. Add a little salt, whisk with a fork.
- Put a little butter (about a teaspoon) into the hot frying pan and allow it to sizzle.
- Hold the pan and swirl the melted butter round its base.
- After 10 seconds, lift one edge and tilt the frying pan, allowing the unset egg to roll on to the surface of the frying pan. Do the same with the other edge.
- While the top is still slightly runny, add the herbs/cheese/sliced raw mushroom over one side and then fold the omelette over – an egg flip will do well.
- Serve immediately.

Ingredients

2 eggs
butter
herbs
mushrooms
tasty cheese

Preparation time

10 mins

Cooking time

5 mins

It usually takes less time to make than it does to read how to make it. It must be made quickly in a hot pan; the longer it takes, the drier it will be.

10 Top Tips for Building a More Positive Body Image

1

Develop a lifestyle that keeps you healthy and vital as an ongoing, lifelong process

Invest in yourself, and have fun. Try shifting your focus from what you look like, to being comfortable in your body. It is important not to put your life on hold until you lose 'x' number of kilograms. Make choices right now, about how you wish to live your life in your body.

2

Build on other aspects of your life

Be with people who respect and accept you for yourself. Go out, meet friends for a coffee or explore art galleries. Look around for some (voluntary) work that will stimulate and satisfy you. Ring up the local community health centre and see what things they offer. Get out and do some walking in the bush, or join a sporting team. Be discerning about the amount of time you spend with people who are always focused on looks and food.

3

Recognise negative self talk about your body

Catch yourself in the act, and speak gently to yourself. Do some rephrasing of your self talk. You might even imagine your self talk as if it was coming from a television, which you choose to turn down (or off!).

4

Be interested in why you hold on to negative feelings and thoughts about your body

Talk about them with a friend or counsellor. As you learn more about the reasons why you might struggle with negative body thoughts, you can find ways to deal with them.

5

Protect yourself from cultural bombardment

Watching TV and reading magazines and newspapers can give us a false idea of what is a normal or average body shape and size. If people from another planet landed here and just watched TV and read magazines, I am sure they would assume that 99% of the women on Earth were size 8!! We only have to walk around any major shopping centre to see that people come in all different shapes and sizes.

6

Dress for now

Many people have a range of different size clothes hanging in the wardrobe. It is thought by some people that by keeping the small size clothes in the wardrobe it serves to motivate them to again get back into the smaller sizes. However, for many people just the opposite seems to happen. By going out and buying some new fashionable clothes we increase the chances of feeling better about ourselves, which in turn helps us to look after ourselves better.

7

Be on the alert for 'size' prejudice

Size prejudice manifests in many different ways, from off-handed jokes at the workplace to preschool books that give inappropriate messages. Learn to value people of all sizes. Try to create an environment that is supportive of people of all shapes and sizes.

8

Don't get health messages and thin 'ideal' messages mixed up

Thin does not equal health, and thin does not equal a healthy lifestyle.

9

Don't allow others to criticise your body

It is normal to get older. Each of our lives have a remarkable story to tell. In many ways our body reflects this story to ourselves and other people. Each of our own stories are very important.

Read Kaz Cooke's book 'Real Gorgeous', particularly chapter six on how to deal with the 'body police'. Refuse to participate if other women and/or men talk of dieting and 'body loathing'.

10

Discover who you are, learn to trust and value the self that lives in your body

Cultivate compassion for yourself and your body. You are much more than your body. As Kaz Cooke writes: 'You are not your buttocks'.

You can purchase Dr Kausman's books through The Jean Hailes Foundation, book stores or through his website www.ifnotdieting.com.au.

Dr Murkies' book (co authored with Rita Erlich) can be purchased through The Jean Hailes Foundation or book stores.

To purchase a book through The Jean Hailes Foundation you can download the order form at www.jeanhailes.org.au or call 1800 151 441.

YOU CAN EXERCISE AT ANY AGE

By Marg Sherburn, physiotherapist, Jean Hailes Medical Centre and
The School of Physiotherapy, The University of Melbourne



Don't settle back, because this article involves active participation by you!

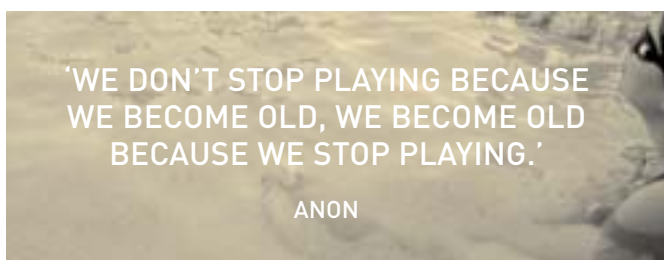
Marg Sherburn

Sit forward, away from the back of your chair, with your back long, feet on the floor and relax your shoulders. Now, circle your shoulders a few times, one at a time, then together. Drop your chin forward and draw four half circles with your neck, then relax your neck and shoulders.

Now rock your weight back and forth on the seat of the chair feeling your lower back stretch and move. Hitch your hips side to side a few times, relax, then lift your arms overhead and bring them down in a big circle back to your sides.

To finish, take three deep breaths right down to your stomach and congratulate yourself on doing some exercise!

No one is ever too old to begin exercising. There is always something you can do, although if you have not done any exercise for a long time it is wise to seek professional advice first.



Some of you might be saying to yourselves: why do I need to exercise as much as I did when I was younger? I have a bit of arthritis in my knee, sure I can't look up any more to brush cobwebs from the cornices. Or, I DO get aching feet if I walk around the shops too long BUT, I am getting older and I've got to expect that haven't I?

To an extent, yes, there is no fountain of youth. Our bodies are designed to age, but let's enjoy ageing, not endure it.

SO, WHAT ARE SOME OF THE HEALTH BENEFITS OF BEING MORE PHYSICALLY ACTIVE?

Less risk of, or less severe, cardiovascular diseases - angina, high blood pressure, stroke, heart attack.

How does exercise work in these conditions?

In two ways:

- Activity burns off fats so they are not so prone to collecting in the blood and hardening the arteries.
- By regularly making the heart work a little harder, you increase the size of the heart muscle itself and make it stronger. This means that your heart can pump more blood per beat and can rest longer between beats and it therefore tires less.

What sort of activity is best to reduce the risk of cardiovascular disease?

Sustained aerobic exercise, which is any activity that makes the heart pump a little harder for a sustained period of time. Some types of aerobic activities are brisk walking, swimming, dancing or gardening. For best effects, aerobic activities should be carried out on all or most days of the week for 20 – 30 minutes.

So, walk along the beach at sunset, walk with a friend and rediscover your neighbourhood, go bushwalking with a group, go dancing again, or surprise your family with your newly acquired tap dancing skills.

Better bone health

How does exercise work to maintain bone health?

Daily exercise helps to keep bones and muscles strong, maintain flexibility and reduce the chances of injury.

Our bone minerals are laid down in our adolescents years, maintained through adult years and then are quite suddenly reduced after menopause.

Osteoporosis is the thinning of bones and with more fragile bones the biggest problem is risk of fractures or breaks. The most common fractures are at the hip, spine and wrist following a fall.

What sort of activity is best to maintain bone health?

Weight bearing and muscle strengthening exercises.

Bones love unpredictable forces on them such as when we are dancing, playing tennis or netball, digging the garden or jumping and skipping. In fact, walking is not as good as the activities mentioned, so if you use walking for a bone health activity, try varying it.



Challenge your bones by going up and down stairs and hills, walk faster and increase the challenges when the last changes you made are becoming easier to do.

And what muscles should you strengthen?

Your thigh and calf muscles in particular. In particular do half squats, step on and off a step and do heel raises.

For your arms, try weight lifting. Yes weight lifting!

Start lifting a light weight such as a half full water bottle in each hand. Raise your arms overhead, hold momentarily and then slowly lower your arms back to the side. Of course, your posture as you do this will be ideal – with a long straight back and relaxed neck!

As you improve, gradually increase the weights you lift and the number of times you repeat the lift.

And there's more good news. Medical research has proven that strength training not only improves strength, but also your balance, gait, flexibility and coordination, which in turn improves your ability to lift, walk, bend, climb stairs and enjoy life (according to Council of the Ageing's [COTA] Living Longer Living Stronger Program)

What about activity if you have joint pain from arthritis, or any other cause?

It's best to do some daily flexibility activities for your joints and add some strengthening for the muscles that support the joints.

Your joints probably would not like the impact and weight bearing exercise required for bone health. Your knees probably could not cope with a night of dancing, but would love some gentle flexibility movements - especially in a warm hydrotherapy pool - or on land doing something like Tai Chi, which is practising meditation and relaxation to movement.

The Arthritis Foundation slogan sums it up: **'Move it or lose it'**.

Even though you might feel like you don't want to move your sore joints, it is the best thing for them, within limits of course. By the time you have finished your activity, your joints and muscles should feel worked yet relaxed.

And then there's incontinence, that leaking feeling, just when you don't want it to happen, or having to rush to the toilet NOW!

We now know more about the risk factors for incontinence during the menopause years and many of these factors, but not all, can be altered. You may have had babies and you may have had some associated surgery and each of us will pass through menopause, all of which we can't alter. But those extra kilos that have appeared from seemingly nowhere, constipation and how we lift and carry weights can be modified.

What sort of activity is best to help with incontinence?

The best thing for incontinence is pelvic floor muscle training.

But just as important is education about how you lift and carry and what foods you eat.

So many women say 'I tried that squeeze exercise, but it didn't do much good'. This is one area of health that probably needs some professional guidance to get you on your way, so your voice is not added to those who have been disappointed in the outcomes of pelvic floor muscle exercises.

HOW TO DO PELVIC FLOOR EXERCISES

- Tighten and draw in the pelvic floor muscles around the urethra, vagina and rectum. Do not push down but tighten and draw up muscles.
- Try to hold this position and count to five and then relax completely before repeating the exercise.
- Continue until you are able to do a maximum of eight to ten. This comprises one set.
- Gradually increase the amount until you are able to do three to five sets daily.
- You will feel your lower abdominal muscles working at the same time as you feel your pelvic floor muscles, but you should not feel your thighs or buttocks working.

CAN DOING SOME PHYSICAL ACTIVITY HELP WITH PSYCHOLOGICAL STRESS?

Yes it can. And it is not just all in the mind!

When we do sustained aerobic activities our bodies produce natural hormones called endorphins, which are natural opiates and which make us feel good.

Have you ever wondered why people can get hooked on exercise? Expressions like 'gym junkie' or getting the 'runner's high', come from this hormonal release which comes from aerobic exercise.

So, if you feel like life is getting harder, or you are not on top of things, or you want more energy at the end of the day, try some type of sustained aerobic exercise that you enjoy. Try walking, cycling, yoga, tai chi, an exercise class at a community house, a gym workout or bush walking.

It may seem strange, but it is actually best to burn up energy when you feel low in energy! It may be really hard to get out of your chair and put on some exercise shoes or shorts when you are feeling low, so get someone to go with you.

Now, there are all the excuses in the world when it comes to changing habits and becoming more active and I think I have heard most of them. None of these excuses count, just in case you were thinking of using any of them:

'I'm too busy'

If you don't make time for your health now, you will have to make time for ill health later on!

Do something simple like park the car further away from the shopping centre entrance and push the trolley all the way to the car (with good posture, of course). Get off the tram one stop earlier and walk the block especially if you are carrying a briefcase or bag. Walk to the milk bar or market. Use the stairs, not the lift, especially if you are just going up one floor. All this physical activity adds up in a busy person's day.

'I went to a gym once and felt out of place'

If the place is not right for you, it is not the activity that is wrong, just the place. Try somewhere else.

'I'm embarrassed...'

Understand what it is that you are embarrassed about and exercise where and when you feel most comfortable and wearing whatever clothes make you feel okay.

'I can't afford it'

With some creative thinking we can all find a type of activity that suits our budget. We don't all have to be members at commercial gyms or wear the most expensive runners in the shoe shop.

'I'm needed at ... home, work, with my family'

It is wonderful for our souls to be a needed member of any group, but we are also individuals and need space for our own inner peace. To do this we need to take time out for ourselves, especially when it impacts on our own health. Besides which, we are much better mothers/sisters/daughters/friends if we are feeling good about ourselves.

'I have a slipped disc'

Research shows that after the initial treatment for a back injury, rest is the worst treatment for back pain, so there goes that excuse too!

Remember those Workcover advertisements from a few years ago ... 'Back pain – give exercise a go', 'Walk away from back pain' and 'Back pain, don't take it lying down'.

Workcover didn't just pull those slogans from thin air. They were founded on compelling research, so turn them to your advantage.

SO NOW, GETTING STARTED IS THE NEXT ISSUE.

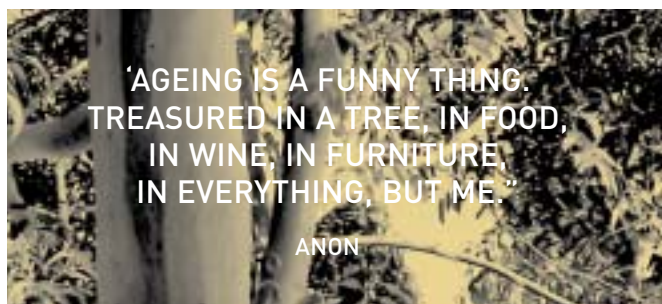
Remember:

- To seek professional advice before you start, especially if you haven't been active for quite a while.
- That moderate and regular exercise is best.
- To decide which type of physical activity suits your health goals, your abilities and your personality style.
- To set goals in stages, write them down and tell people who will support and encourage you to achieve them. Don't aim for the Olympics right away, but plan for next week, then next month's improvements.

Measure the success of this article by your actions tomorrow and beyond, not by the fact that you have just read it.

So, stand up tall now, with your feet apart and circle your hips five times in each direction. Now, stretch your arms to the ceiling, one at a time, feeling a stretch along your ribcage. Stretch up both arms together, linking your fingers and turning your palms to the ceiling. Hold that for five seconds and repeat the sequence.

Take three deep breaths and breathe out as slowly as you can while you set your physical activity goals for the rest of today.



Getting active

VICFIT Physical Activity InfoLine – 1800 638 594

This is a free telephone based service available to all Victorians providing information, exercise programs and referral services to people wanting to develop or maintain a more active lifestyle. It is also a resource for organisations involved in physical activity promotion.

VICFIT Neighbourhood Walk and Talk Program

This program is part of VICFIT's strategy to encourage people to become more active. People are recruited as 'walking guides' in local communities, who then encourage friends and neighbours to participate in regular activity.

There are currently 70 Walk and Talk programs in Victoria, involving over 2,500 walkers.

To find out about a walking group close to you please contact the Health Promotion Officer at VICFIT on 03 9412 4348.

VicHealth Active Recreation Program: Beyond the Farm Gate

This is a walking program coordinated by South West Sports Assembly, funded by VicHealth, that focuses on social interaction and mental and physical wellbeing of women in rural and isolated areas in Victoria's South West.

For further information contact Sheryl Hutchins on 03 5561 1689.

National Heart Foundation

The National Heart Foundation has various programs encouraging people to become more active.

The National Heart Foundation can be contacted on 1300 326 787 or try the Heart Foundation in your state.

Local Community Health Service

Your local community health service will also be able to recommend programs and activities in the surrounding area.

Swim for your Life

Nearly 400 swimmers turned out on Saturday 14th December for the inaugural Jean Hailes Swim for your life at the Middle Brighton Baths, with over 80 individuals completing the challenging 4km swim.

Congratulations to all who participated and thanks to all who came down to support the swimmers. Special thanks to Nicole Livingstone, our swim patron, Brad McEwen of Channel 10 who provided great commentary, and our sponsors.

Event organisers, Gina Harris (of Cousin's Travel), Brad and Nick Boyden (Lane 4 wetsuits) and Caroline Ludwell toiled to make this event a success, with their awesome effort being well rewarded by the high participation.



UPDATE ON MEDICAL CENTRE



The Jean Hailes Medical Centre has recently started several new ancillary clinics for women. Referrals are required.

The Diabetes and Cardiovascular Risk Assessment Clinic

This clinic has started on a weekly basis (Wednesday evenings) and is staffed by endocrinologists, a diabetes nurse educator, dieticians and a weight management consultant.

Bone Clinic

A bone clinic for the assessment and management of women with osteoporosis has just started on a weekly basis (Friday afternoons) and is staffed by endocrinologists and endocrine registrars.

Menstrual Management Clinic

A menstrual management for the assessment and management of women with period problems/abnormal bleeding, beginning in April on Tuesday mornings, staffed by gynaecologists.

Continence and Exercise Workshops

These workshops are for women with incontinence and/or osteoporosis and will be run jointly by a pelvic floor physiotherapist.

For people wanting to make appointments for the above mentioned clinics please contact The Jean Hailes Medical Centre on 03 9562 7555.

Women's and Men's Health Physiotherapy

The Jean Hailes Foundation is pleased to announce that Women's and Men's Health Physiotherapy has joined the Medical Centre consulting team.

This physiotherapy practice (established over 10 years ago), provides the highest standards of quality care for women with continence and pelvic floor disorders and pre and post natal conditions.

Physiotherapist Emma Dorward will provide individual consultations on Monday mornings. Pelvic floor classes will be offered later in the year in conjunction with the Education Unit.

Physiotherapy can improve or cure:

- bladder and bowel incontinence symptoms
- pelvic organ prolapse
- pain in the pelvic region related to endometriosis or sexual pain
- preparation for and recovery following gynaecological, bladder or bowel surgery
- musculo-skeletal, pelvic floor and abdominal muscle related conditions of the childbearing years

Call The Jean Hailes Medical Centre on 9562 7555 to make an appointment.

"We have established a supportive, non competitive model with general practitioners and colleagues around Australia"

*Dr Sue Reddish
Director Medical Centre*

The Jean Hailes Medical Centre's multidisciplinary team includes general practitioners, gynaecologists, endocrinologists, breast surgeon, plastic surgeon and weight management specialist.

Allied health professionals include a psychologist, sex counsellor, dietician, naturopath, pelvic floor physiotherapist and diabetes nurse educator.



Far left: Boroondara Citizen of the Year, Dr Sue Reddish. Left, JHF Power

Boroondara Citizen of the Year

Director of The Jean Hailes Medical Centre, Dr Sue Reddish, was honoured by Boroondara Council during this year's Australia Day celebrations for her life long commitment to the sport of netball. According to Boroondara Council she received the award because her commitment to the sport has provided a positive influence for players, teaching them self-confidence, organisational and administrative skills.

Sue's passion for sport, and in particular netball, is surpassed only by her determination to make a difference to women's health. And she is making a difference in more ways than one.

Her Jean Hailes role gives her the opportunity to work with a multidisciplinary team of GPs, specialists and allied health professionals, who are all passionate about improving the health of Australian women.

In 1995 Sue was instrumental in forming the Boroondara Netball Association to cater for the huge demand locally for netball. This gave junior girls from year two and up the opportunity to hone their craft as 'netta netballers', and older girls and women the chance to play right through to State League. The Association is one of the largest netball associations in Victoria and is managed entirely by volunteers.

The Jean Hailes Foundation is very proud to sponsor the two State League teams called 'JHF Power'. Many staff members follow the team with interest and pride.

Sue Reddish, Boroondara Citizen of the Year, has a simple message for women Australia wide:

"There is a clear link between women's health and sport. In addition to the obvious health benefits associated with physical activity, there are many other valuable 'life skills' learnt from involvement and participation in any sport; including the development of self esteem, leadership qualities, being a member of a 'team', loyalty, close friendships and encouraging a sense of community spirit through volunteer involvement.

Sport creates opportunities for the whole family (including teenagers who may otherwise be involved in less favourable activities!) to become involved together; and for people of all ages, appearances, intelligence and status to work and play together. You will always gain much more than you give."

Congratulations Sue on being awarded Boroondara Citizen of the Year. We wish you, and JHF Power, the best of luck in the coming year.

Do something good for your health!

What do you think about our newsletter?

In this issue you will find a questionnaire enclosed.

We would really appreciate if you could take the time to fill out the questions. You can choose to do this anonymously, but if you would like to go into the draw to win a fantastic weekend away for two, including a sumptuous buffet breakfast on both days, at any Mercure/All Seasons Hotel* in Australia or New Zealand, we need your details.

The questionnaire is simply to find out what you need from a newsletter about your health. We want to get it right and do it better!

So, pick up your pens today and tell us what you want to know...and you could be on your way to a weekend of indulgence and relaxation...and that's got to be good for your health!

* The prize is valued at up to \$500 and is subject to availability. The prize is not valid during special event periods ie New Years Eve. Mercure Resort Blue Mountains may carry an additional surcharge in peak periods.



UPDATE ON EDUCATION

12

Overseas Trained Doctor Program

The Jean Hailes Foundation provides comprehensive women's health education for overseas trained doctors in rural areas for the Rural Workforce Agency of Victoria (RWAV).

As there is a national shortage of doctors in rural areas, Rural Workforce Agencies across Australia are funded to ensure that shortages are filled and that appropriate training is offered.

Overseas trained doctors are given an overview of women's health issues in Australia, with a particular focus on the laws in Australia and the rights of women.

Community Seminars

From time to time The Foundation holds large community seminars around the country in partnership with local services, offering up to date information on current issues in women's health.

Upcoming seminars include:

April 4
Glenside, South Australia

'Positive Changes – Choices at Midlife'

In partnership with Womens Health Statewide

Speakers:

Dr Elizabeth Farrell, Gynaecologist
The Jean Hailes Foundation

Ms Sandra Villella, Naturopath
The Jean Hailes Foundation

Followed by a panel discussion with local experts

Bookings are essential - phone Womens Health Statewide (08) 8239 9600 or tollfree 1800 182 098 to register.

May 23

Dubbo, New South Wales (Details to be confirmed)

Contact The Jean Hailes Education Unit for further information tollfree on 1800 151 441.

Health Information Sessions

Information sessions are held regularly in metropolitan Melbourne. These sessions are small, intimate gatherings coordinated in partnership with local health services.

For information about a session closest to you please call The Jean Hailes Education Unit on 03 9562 6771.

Multicultural menopause sessions

Information sessions offered in partnership with The Cancer Council Victoria. Program offers menopause education in a diverse range of languages. **For inquiries and bookings phone Elizabeth or Betul at The Cancer Council Victoria on 9635 5566.**

Health professional programs

April 5
Adelaide, South Australia

May 24
Dubbo, NSW (Details to be confirmed)

'Menopause into the Millennium'

– a one day training program

CPD points allocated

For registration and inquiries contact The Jean Hailes Education Unit tollfree on 1800 151 441.



As many of you may already know, the Jean Hailes Research Unit has been awarded funding as a National Health and Medical Research Council (NHMRC) Centre of Clinical Research Excellence (CCRE).

This was achieved in collaboration with the Departments of Psychiatry and Epidemiology and Preventative Medicine at Monash University and Prince Henry's Institute of Medical Research.

The program that will be undertaken over the next five years with this funding incorporates groundbreaking research, identifying and training of future clinical researchers and translation of research findings into patient care and public health education.

The Jean Hailes Education Unit will play a key role in translating these findings into patient care and public health education.

Two new PhD trainees, Ms Sonal Shah and Mr Fahad Hannah, will investigate the effects of hormones, age and menopause on cognition and knee osteoarthritis respectively.

Dr Pam Fradkin, who brings to us extensive experience in general practice, will be studying the consequences of menopause after breast cancer. The strength of this program is the diverse backgrounds of the senior staff across a number of specialist health and education areas.

The Jean Hailes Research Unit adopts a wide-ranging approach to research, as comprehensive research is necessary to give women health management and therapy options.

We have a really amazing year ahead of us. The Sue Ismiel Women's Health Study, looking at the role of testosterone in women, will yield vital new information. The CCRE is now up and running and there is a real sense of discovery and enthusiasm amongst the research team.

Female sexual satisfaction survey

Women across Australia are invited to participate in an exciting new study involving filling in a female sexual satisfaction survey in order to evaluate their responses and determine whether this survey can differentiate women who are sexually satisfied from women who are dissatisfied with their sexual experiences.

This will then provide a reliable way of evaluating a woman's sexual function for her personal needs and for research in this field. At present there is no reliable way to 'measure' the quality of women's sexual experiences. This survey will consider the whole of the sexual experience when measuring sexual pleasure.

To participate in this study, which can be completed by correspondence, you need to be:

- Aged 18 – 65
- Sexually active at least twice a month
- Able to complete a daily sexual activity diary and several questionnaires over a 4 week period

Testosterone Spray Study

The Jean Hailes CCRE is recruiting for a study investigating the effects of a revolutionary new form of testosterone therapy in premenopausal women with low libido and reduced sexual satisfaction.

The new product involves a spray unit that administers a 'metered dose' of the hormone to the stomach where it is absorbed through the skin and enters the bloodstream.

We are looking for women who are:

- healthy and premenopausal
- between 35 and 45 years
- suffering low libido
- willing to attend The Jean Hailes Medical Centre monthly over the course of the 28 week study

Testosterone Gel Study

If you are postmenopausal and do not fit these criteria, you may be eligible to join another study that is exploring the effects of a testosterone gel on libido, wellbeing, mood and memory performance in postmenopausal women.

To participate in this study you must be:

- postmenopausal
- currently on a non oral form of Hormone Therapy (such as the oestrogen patch, nasal spray, gel or implant)
- be willing to attend The Jean Hailes Medical Centre 5 times over a 20 week period

If you are interested and/or would like more information about these studies please contact Samantha or Rebecca at the Jean Hailes Clinical Centre for Research Excellence on 03 9543 9463.

In Touch...In Formed...Out There...Out Back

Rural Women's Health A Priority

How do health professionals living in rural and remote parts of Australia access comprehensive, up to date and credible health information in order to support and work with their local communities?

Two years ago The Jean Hailes Foundation embarked on an ambitious project to try to address the midlife health needs of Australian women, and the health professionals who support them, who live in rural and remote areas. This was never going to be a simple project in size, design or development. For a start, how do you offer health education, information and training in isolated parts of the country in a sustainable and economic manner?

Slightly daunted, but full of enthusiasm and pioneering spirit, project managers Sarah Hardy (now director of education) and Mandy Hudson, embarked on what was to be the start of a very exciting two year journey. A journey that would draw on the joint expertise of health professionals from across Victoria, as well as the voices of hundreds of women throughout the state who are at, or approaching, midlife and beyond.

By appropriately resourcing health professionals in isolated communities, ultimately the project aims to deliver primary and preventative health programs to women at midlife across the nation. This resource is designed to be adaptable to the local communities and promotes community ownership, so that it is truly sustainable beyond the life of the training phase.

Here Sarah Hardy explains the process of designing and developing this exciting resource and what it will mean for women living in rural and remote parts of Australia.

Why a rural and remote midlife health resource kit?

As our nation ages women are living longer than men by nearly a decade. Nowhere is it more obvious that future health services will need to be shaped to meet the needs of older women and encourage their active participation in order to promote community ownership, than in rural and remote parts of Australia.

In rural areas, women aged 40 – 60 face a specific set of challenges relating to health and health care. These include limited access to, and choice of, services, health practitioners and up to date health related information as well as compromised privacy (especially in small towns where everyone knows everyone else).

In response The Foundation's Education Unit has conducted health forums as far afield as Albury, Wollongong, Perth, Canberra, Hobart, Ballarat, Horsham, Warrnambool, Traralgon, Bairnsdale, Shepparton, Mildura, Lismore and Cowes. Women's health issues have also been addressed in other more isolated communities such as Mowanjum in the Kimberley.

One of the keys to addressing midlife issues for women is to ensure that health professionals are well resourced, with the skills and knowledge needed to work with local women and their families in their community around the issues they may face at this time. In particular, health education and information needs to be sensitive and relevant to local needs and issues.

"As the rural, regional and remote Australian population age, women will be highly represented in the older age groups.

The appropriate management of menopause and other midlife issues has important implications for the delivery of health care and education."

(Then) Federal Minister for Ageing, Kevin Andrews, Feb 2002

"It is particularly important to raise awareness about women's health issues in regional areas where health and wellbeing are strongly influenced by social, economic and environmental factors. The Jean Hailes Foundation draws on the expertise of many health professionals working in regional Victoria to complement the work of those living in the city."

(Then) Bass Coast Mayor, Miranda Sage, Feb 2002 Chair, Women's Health Session, Cowes, Victoria

Community consultation and partnerships

The first step in this project was to set up a steering (guiding) committee. This project has been guided by a Victorian rural steering committee of 12 health professionals. Members of the steering committee are all working in rural and remote Victoria and have a strong commitment to women's health.

With funding gratefully received from The Jack Brockhoff Foundation and The Felton Bequest, ANZ Trustees to run this project as a pilot program in Victoria, the steering committee was implemented to drive and inform the project. The committee was able to involve local women from their own communities, enabling rural and remote women to influence and shape the development of this unique resource.

Why focus on midlife?

Consultation and our established relationships with rural and remote communities in Victoria indicate that information on menopause, hormone therapy, natural therapies, weight management, sexuality, depression and stress management are the main priorities of the 40-60 year old woman. In addition, our educators have noticed increased requests for midlife women's health from health professionals in isolated communities.

According to Australian Census Data 2001

In Australia there are:

- 3,495,700 women in total aged 45+

Broken down these figures include:

- 2,167,516 women aged 45 – 65
- 1,328,184 women aged 65+

The median age for Australian women in 2001 is 36

The state of rural women's health in Australia

Current situation

- The trend towards longer life expectancy, coupled with the ageing of Australia's population presents a challenge for rural Australia.
- Rate of hospitalisation and deaths are higher in rural areas for many conditions.
- Rates for cardiovascular (heart) disease are higher for females living in rural areas compared with metropolitan women.
- Diabetes death rates in rural and remote areas are two to three times higher than in metropolitan areas.
- The impact of mental health on quality of life and the maintenance of good physical health are of great importance to rural Australians. Middle aged women present with one of the highest incidences of depression.
- Data from the Royal Flying Doctor Service Rural Women's GP Service (Oct 2002) shows that menopausal symptoms/complaints are amongst the top two reasons, in most Australian states, for visiting the GP. This figure has increased by over 300% in the past year.

What will this resource provide?

This educational kit will provide rural and remote health professionals and their communities with the resources to establish the best possible service to women at midlife. The kit offers innovative ways to deliver services to women focussing on prevention and early detection of illness, disease and improved wellbeing.

"...increasing requests from women and health professionals living in isolated communities"

What is in this educational resource?

Included is a manual of updated and balanced educational material on a range of midlife health issues. This material is based on current research findings, clinical experience and evaluation, as well as anecdotal information from the rural steering committee and the women who participated in rural focus groups.

Topics covered include:

Informed decision making
 Natural therapies
 Herbal remedies
 Sexuality
 Emotional health and wellbeing
 Bone health
 Heart disease
 Understanding menopause
 Breast health
 Complementary therapies
 Hormone therapy
 Lifestyle issues

Additional resources

In addition, there are also several innovative and practical resources to hand out to women to use at their own leisure, pace and in their own privacy.

- An interactive CD ROM
- An up to date video on menopause and midlife
- Fact sheets and handouts
- Women's Stories - *sharing the anecdotal experiences of women who participated in the rural focus groups*

Information for facilitating groups

There is also an interactive activity manual containing a variety of group activities/sessions that will assist the health worker to facilitate women's health sessions in their own communities.

Hundreds of interactive activities are outlined, with various options allowing for individual preferences and alternatives, making the manual very user friendly and easy to follow. Suggested session outlines are included for each activity and there are also practical ideas and tips on how to promote and advertise health sessions to the local community.





“Great news for Australian women”

Cathy McGowan, Chair of the Regional Women's Advisory Council on launching the resource kit for rural health professionals.

*From right to left
Cathy McGowan, Janet Michelmore, Karen Templeton,
Sarah Hardy, Mandy Hudson*

THE LAUNCH

In December last year, over 100 locals and visitors from across Victoria gathered at the School of Rural Health in Shepparton to witness Cathy McGowan, Chair of the Regional Women's Advisory Council, launch this unique resource kit for rural health professionals.

Where to now?

The 12 strong steering committee are now implementing programs using the kit in their local rural communities, including Gippsland, East Grampians and Northern Districts. Workshop training days to introduce other workers to the kit are being held across the state, using a 'train the trainer' model. Health professionals such as community health nurses, GPs, physiotherapists and community educators are then able to train others in their local areas in the use of the kit, plus develop innovative, sustainable programs for their local communities.

Training

Health professionals seeking further information, or to express interest in interstate training, please contact Sarah Hardy, Director of Education, tollfree on 1800 151 441.

Training days are being conducted across Victoria at this stage, as the project is still in pilot phase. Funding is currently being sought for interstate training days to be conducted Australia wide later in the year.

A Personal perspective

A wonderful new resource on midlife has arrived! This is just what I have needed to inspire and support my education programs for women who are at this challenging stage of life. The midlife kit from the Jean Hailes Foundation provides everything the health worker will need to plan, implement and evaluate group sessions. It is very comprehensive, extremely flexible and most attractively presented. Women in rural and remote areas of the country now have access to the very best in information and support thanks to this kit.

This kit gives health workers in rural and remote areas access to resources of an exceptionally high standard. I believe it will underpin much-needed community education programs on midlife and help alleviate the sense of isolation that women and health professionals in these areas often feel.

*Jenny Davidson, Rural Steering Committee member.
Community Health Nurse - Glenview Community Care,
Rutherglen, Victoria*

“What is most exciting about this educational program is that it will take on a life of it's own and the flow on effect will be felt state wide (maybe across the country). Health professionals will be trained and will then have a most valuable resource to take back to their communities.

The Jean Hailes Foundation should be congratulated for investing two years in developing, writing and producing this impressive resource that will benefit women initially in rural Victoria, but ultimately women in all rural and remote parts of Australia.”

Cathy McGowan

For further information
please contact:

The Jean Hailes Foundation

PO Box 1108, Clayton South Vic 3169

Telephone: 03 9562 6771

Tollfree: 1800 151 441

The Jean Hailes

Medical Centre and Research Unit

173 Carinish Road

Clayton

Victoria 3168

Medical Centre: 03 9562 7555

Research Unit: 03 9543 9612

The Jean Hailes Education Unit

Level 1, 7 Audsley Street

Clayton South

Victoria 3169

Education Unit: 03 9562 6771

education@jeanhailes.org.au

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WAYS YOU CAN BE A FRIEND OF JEAN HAILES

Donations

Donations to The Jean Hailes Foundation are always welcome. You can donate by credit card via mail, fax or email. To make it easy you can also make a secure donation online at www.jeanhailes.org.au.

Workplace giving

Changes by the Tax Office now allow you a simple, new way to make regular donations to The Jean Hailes Foundation. Talk to your employer today about setting up a workplace giving program. All you have to do is nominate The Jean Hailes Foundation as a deductible gift recipient (DGR) and your nominated amount is automatically deducted through your payroll. This means that multiple donations are pooled to make an even greater difference.

For example, you, along with ten other employees may choose to nominate various regular amounts to Jean Hailes through workplace giving. Your employer will make a lump sum payment on your behalf. There is no need for individual receipts and you get a tax benefit every time you donate through your pay, rather than waiting to claim in your annual tax return. This is a win-win situation for people looking for an easier way to donate and for DGRs like The Jean Hailes Foundation, who will benefit by receiving regular income with lower processing costs.

Bequests

Invest in the future health of Australian women.

Making a bequest is as easy as picking up the phone.

For further information about donations, workplace giving or bequests please contact Janet Michelmore on 03 9562 6771.

Your Time

Become a friend of The Jean Hailes Foundation by giving your time.

There are lots of ways to get involved, including office/administration work and women's reference and/or focus groups.

For further information on ways to get involved please contact Linda Daly on 03 9562 6771.

www.jeanhailes.org.au

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DESIGN: JANE KLEIMEYER DESIGN 03 9421 2428