GOOD HEALTH DOWN SOUTH 2021 - 2025

A strategy for sexual and reproductive health in the Southern Metropolitan Region





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ACKNOWLEDGEMENT OF COUNTRY

Women's Health in the South East (WHISE) acknowledges the traditional owners of the lands on which we work, the land of the Kulin Nation. We recognise their continuing connection to the land, waters and culture. We acknowledge their Elders past, present and emerging and that Australia was and always will be Aboriginal land.

We acknowledge and pay respects to the many strong and resilient Aboriginal and Torres Strait Islanderwomen, who are disproportionately affected by discrimination and family violence and that Aboriginal self-determination requires a systemic shift of power and control from government and the non-Aboriginal service sector to Aboriginal communities and their organisations.

We commit our organisation to truth-listening, truth-telling, and bringing the Uluru Statement of the Heart to our hearts.



ACKNOWLEDGEMENTS

WHISE is supported by the Victorian Government.



WHISE would like to acknowledge and thank the organisations, listed below, who invested extensive time and expertise for the evaluation of the first regional sexual and reproductive health strategy, *Good Health Down South 2018 – 2021* and consultation for the second iteration. This input was fundamental to the development of the second regional strategy *Good Health Down South 2021 – 2025* and will provide the basis for the implementation of the biennial action plans.

Australasian Menopause Society

Bayside City Council

Cardinia Shire Council – Maternal and Child Health

Cardinia Shire Council – Youth Services

Cardinia Shire Council

Carrington Health – Baby Makes 3

Central Bayside Community Health Services

Centre for Multicultural Youth

City of Casey

City of Casey – Maternal and Child Health

City of Casey – Youth Services

City of Port Phillip

City of Port Phillip - Youth Services

City of Stonnington

Connect Health & Community

Department of Education and Training, Respectful Relationships (Bayside Peninsula Area & Southern

Melbourne Area)

Department of Health, Prevention and Population

Health (Regional Operations, South)

enliven

Family Planning Victoria Frankston City Council

Frankston Mornington Peninsula Primary Care

Partnership

Glen Eira City Council – Maternal and Child Health

Greater Dandenong City Council

Greater Dandenong City Council – Maternal and

Child Health

Greater Dandenong City Council - Youth Services

headspace

Jean Hailes for Women's Health

Jewish Care

Kooweerup Regional Health Service

Link Health & Community

Monash Health

Monash Refugee Health Mornington Peninsula Shire Royal Women's Hospital

South Eastern Melbourne Primary Health Network

Southern Melbourne Primary Care Partnership

Southern Migrant and Refugee Centre

Star Health

Talking the Talk Sex Education

Thorne Harbour Health University of Melbourne

Windermere

Women with Disabilities Victoria



FOREWORD

Women's Health in the South East (WHISE) is one of twelve women's health services funded by the Department of Health across Victoria, working to improve women's health, which includes a strategic focus on improving sexual and reproductive health outcomes for women. In 2018, WHISE became the lead organisation for the first regional strategy for the promotion of sexual and reproductive health, *Good Health Down South* 2018-2021.

WHISE's strategic plan 2018-2023 has four strategic initiatives: the promotion of sexual and reproductive health, the primary prevention of violence against women, the advancement of gender equality and workforce capacity building. As such the new sexual and reproductive strategy, *Good Health Down South 2021 – 2025* has several areas of alignment with the regional strategy to prevent violence against women, the *Promoting Respect and Equity Together (PRET) 2021-2025* partnership.

Sexual and reproductive health is a fundamental human right and an essential component of overall physical, mental and emotional health and wellbeing and quality of life. It is predicated on a positive, respectful and gender-equitable approach to sexual expression and sexuality. It requires access to evidence-based information, education, self-efficacy and service delivery that is affordable, equitable and free from stigma.

To address the key sexual and reproductive health issues identified through extensive stakeholder consultation and data analysis, this strategy identifies three key priorities under which the objectives are grouped:

Prioritisation and integration of sexual and reproductive health with other health priority areas, particularly the primary prevention of violence against women:

Equitable access to sexual and reproductive health services at all levels of the healthcare system, including access to preventative screening and reproductive choices such as abortion and contraception options; and

Health literacy, including age- and developmentally- appropriate relationships and sexuality education, sexual and reproductive health literacy and health systems literacy, to navigate appropriate care and referral pathways.

Good Health Down South 2021 - 2025 is informed by the principles of primary prevention, equity, and the social determinants of health. The strategy identifies populations that experience additional barriers to accessing appropriate healthcare, or who experience health inequalities due to the inequitable distribution of the social determinants of health. These inequities relate to income and wealth, employment and job security, educational attainment, housing and food security, social inclusion, and access to high-quality and affordable health services. Good Health Down South aims to address systematic health inequalities that occur as a result of the social, political and economic environment that marginalises and disenfranchises some populations. The strategy seeks to transform the health systems environment, including policies, service provision and health promotion information, in order to rectify these inequalities. This approach to health promotion recognises that it is the system, institutions and structures that require transformation, not individuals or communities themselves (Gorski and Swalwell, 2020).

The ubiquitous COVID-19 pandemic, during which this strategy was developed, has highlighted that sexual and reproductive health has never been more important for women's physical and mental wellbeing. At a global, national and local level, people are facing significant barriers to accessing appropriate sexual and reproductive healthcare - some political, economic, cultural, social, or individual, and all modifiable. This strategy is a regional contribution to improving people's sexual and reproductive health outcomes, through collaborative efforts with local government, community health organisations, health promotion agencies and other organisations.

WHISE is sincerely grateful to our partners and stakeholders for their contribution to the development of this strategy. The expertise of our partners and stakeholders, and their commitment to advancing sexual and reproductive health and rights in the region, is reflected in the breadth and depth of the strategic priorities and objectives outlined below. On behalf of WHISE and the Good Health Down South partnership, I commend this strategy to you, and urge that it be used as a resource to assist your organisation in prioritising and integrating sexual and reproductive health in your advocacy, health planning, service and information delivery and health promotion. We look forward to working with you.

Kit McMahon

Chief Executive Officer, WHISE

DEFINITIONS

Sex refers to the biological characteristics that historically have defined humans as female or male within a binary framework. However, these sets of biological characteristics are not mutually exclusive, as there are individuals who possess both, and for some individuals, the expression of their gender identity is incongruent with their biological sex characteristics (Victorian Government, 2021).

Gender refers to the socially constructed characteristics of women and men such as norms, roles and relationships of and between groups of women and men (World Health Organization, 2021c). Gender identity can vary from the sex assigned at birth.

Reproductive health is a state of complete physical, mental and social well-being, not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Optimal reproductive health implies that people can have a satisfying and safe sex life and that they have as much autonomy as possible in deciding if, when and how many children to have (World Health Organization, 2021a).

Reproductive rights rest on the recognition of the basic rights of all women and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. It also includes the right to make decisions concerning reproduction free of discrimination, coercion and violence, and the right to bodily autonomy for all women and people (United Nations Population Fund, 2014).

Sexuality is a central aspect of being human throughout life that encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors (World Health Organization, 2006).

Sexual health is a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Achieving optimal sexual health requires a positive and respectful approach to sexuality and sexual relationships, encompassing pleasurable and safe sexual experiences free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled (World Health Organization, 2021b).

DEFINITIONS

Sexual rights protect all people's rights to fulfil and express their sexuality without coercion, violence or discrimination, and enjoy the highest attainable standard of sexual health, with due regard for the rights of others. This includes freedom and autonomy on matters related to sexuality, reproduction, sexual orientation, bodily integrity, choice of partner, and gender identity, and access to necessary services, education, and information (International Women's Health Coalition, c2021).

Social determinants of health are the social and structural factors, comprising the conditions and environments into which we are born, grow, live, work and age, that affect health outcomes. (Wilkinson and Marmot, 2003). These factors include income and wealth, education, access to secure housing and green spaces, experiences of discrimination and social exclusion, including sexism and racism (Australian Institute of Health and Welfare, 2016). There is robust evidence that the social determinants of health are more influential on individual and population health outcomes than genetic family history of behavioural risk and protective factors (New South Wales Government, 2021). The social determinants of health can also impact lifestyle and behavioural factors that contribute to health outcomes.





An important note:

WHISE is one of twelve women's health services funded by the Department of Health across Victoria, working to improve sexual and reproductive health outcomes for women. As an intersectional feminist organisation, WHISE and the *Good Health Down South* partnership acknowledge the diverse sexual and reproductive health needs of people who do not identify as cisgender, including transgender people, gender diverse, non-binary and gender non-conforming people and intersex people. We support the provision of accessible, inclusive and rights-based sexual and reproductive health services for all. *Good Health Down South* aims to work collaboratively with partners and stakeholders to deliver actions that improve the sexual and reproductive health outcomes of all people across the Southern Metropolitan Region. As such, where this strategy refers to women throughout, this includes trans women and people with a uterus requiring sexual and reproductive healthcare that is also relevant for cis-gendered women.

GOOD HEALTH DOWN SOUTH 2021 - 2025

A strategy for sexual and reproductive health in the Southern Metropolitan Region

Strategy overview

Good Health Down South is a regional strategy, developed and implemented in partnership with stakeholders across the Southern Metropolitan Region and facilitated by WHISE, to improve women's sexual and reproductive health.

The strategy identifies the key sexual and reproductive health issues requiring action in the Southern Metropolitan Region, highlighted in the regional needs map opposite/below, and articulates three strategic priorities and objectives for achieving optimal health and wellbeing outcomes: integration and prioritisation, equitable access and health literacy. The regional needs map also highlights settings for transformative practice, including health systems, organisations and providers, and communities, with a focus on addressing the systems, structures, institutions and social norms that create health inequalities for the identified priority populations. The processes by which the strategy purports to achieve the vision, of a Southern Metropolitan Region where everyone experiences optimal sexual and reproductive health, are expressed in the Theory of Change.

Good Health Down South is informed by policy frameworks, including the Victorian Women's Sexual and Reproductive Health: Key Priorities 2017-2020, which, at the time of writing, was under renewal; as well as local data and evidence, and quantitative and qualitative analysis from consultation with partners and stakeholders. The strategy is also guided by a Theory of Change developed by the Victorian women's health services, created to inform collective action for women's sexual and reproductive health outcomes. The Theory of Change and its narrative can be accessed at Gender Equity Victoria.

Good Health Down South is underpinned by key, foundational principles, listed below, that will continue to inform the development and implementation of associated biennial action plans.

Good Health Down South 2021 - 2025 is:

- Underpinned by the principles of gender equity and intersectional feminism.
- Focused on primary prevention and building partnerships with, and the capacity of, other organisations.
- Informed by evidence and works within a social ecological model of health to address the social determinants over the life course.
- Part of broader efforts to prevent violence against women and enhance gender equality. As such, the strategy is aligned strongly to the regional strategy for the primary prevention of violence against women, *Promoting Respect and Equity Together (PRET) 2021-2025*.
- Based on equity, as such it is informed by the voices of women and priority populations.
- Focused on engaging men and boys as change agents in sexual and reproductive health rights and gender equality. Full attainment of women's sexual and reproductive health and rights for women is predicated not only on engaging men and boys as individual partners and advocates in promoting safe sexual practices and respectful relationships, but also on gender-transformative practice that systematically challenge male dominance and power (Hook et al., 2018).

The strategy, developed through a highly consultative and iterative process outlined below, features an evaluation framework that seeks to thoroughly monitor and evaluate the impact of the strategy against the outcomes and objectives articulated in the Theory of Change. The evaluation framework for *Good Health Down South* has been included in the strategy below, FIGURE 1.

The strategy and associated biennial action plans will employ a multitude of health promotion activities, including advocacy, policy and legislative reform, research, monitoring and evaluation, community education and capacity building, communication and social marketing, sector and workforce development and service and program delivery and coordination.

Consultation and development process:

The second iteration of Good Health Down South was informed by a systematic evaluation of the first strategy, with strategic objectives measured against indicators from the yearly action plans, and extensive consultation with partners and stakeholders. The consultation included an online survey (n=26) and individual semi-structured interviews (n=38) with over 50 health planners, health promotion practitioners, maternal and child health nurses, youth workers, researchers and clinicians. The purpose of the consultation was to evaluate the previous iteration of the strategy, yearly action plans, and the governance structure; identify gaps and areas for strengthening; and scope future priorities for improving women's sexual and reproductive health. The consultation also identified the need to address systemic health inequalities, resulting from and perpetuated by historical and contemporary structural inequity and oppression. It highlighted several populations in the Southern Metropolitan Region that the strategy needs to prioritise for systemic, structural, behavioural and attitudinal transformation, to reduce sexual and reproductive health inequalities and improve outcomes. The findings of the evaluation and consultations were presented to partners and stakeholders at a Roundtable event (n=35), for feedback and validation. Further to this, WHISE held a Think Tank (n=25) to present the following; a Theory of Change articulating the long-term outcomes and objectives of the strategy, an evaluation framework that overlays the theory of change, and the draft Year One and Two Action Plan, including process and impact indicators.



Consultation and development process



\equiv



Survey and thematic analysis

Survey completed by partner organisations (n=26) and results summarised in thematic analysis, with a focus on evaluating Good Health Down South 2018-21 and future priorities and actions for 2021-25.

Evaluation report

Systematic evaluation of the 2018 - 21 objectives against the yearly actions and indicators.

Consultation and thematic analysis

Semi-structured qualitative interviews held with partner organisations (n=38) to identify key sexual and reproductive health issues, priority populations and strategic priorities and potential actions for 2021 - 2025.







Review strategy

Strategic priorities, outcomes and objectives reviewed to integrate feedback from Roundtable event.

Roundtable event

Findings of the survey, consultation and evaluation report and draft strategy presented to partner organisations for feedback and validation (n=35). Partner organisations begin action planning.

Draft strategy

Strategic priorities, outcomes and objectives drafted based on extensive consultation.







Strategy development

Theory of Change, strategic evaluation framework and Year 1 & 2 Action Plan drafted.

Think Tank

Theory of Change, strategic evaluation framework and Year 1 & 2 Action Plan presented to partner organisations for feedback and validation (n=25). Partner organisations continue action planning and discuss governance and implementation.

Review strategy

Theory of Change, evaluation framework and Year 1 & 2 Action Plan reviewed to integrate feedback from Think Tank,





Publication and launch

Good Health Down South 2021 - 2025 published and launched. Implementation of the Year 1 & 2 Action Plan begins.

Finalise strategy

Data and evidence compiled into final draft of strategy in preparation for publication.

PRIORITIES FOR INTERVENTION

A regional needs map

The regional needs map, outlined in FIGURE 2 (opposite), depicts the key sexual and reproductive health issues requiring address in the region, or community need, identified through the extensive consultation process for the renewal of *Good Health Down South*.

A variety of sexual and reproductive health issues were identified during the consultation period as well as through examination of existing literature and data. Those most commonly identified were reproductive health issues such as menopause, endometriosis, and polycystic ovary syndrome, sexually transmissible infections (STIs) and blood borne viruses (BBVs), and abortion and contraception. Other issues raised during the consultation included body image, infertility and assisted reproductive technologies, cervical screening, reproductive coercion, and health literacy. The most significant and prevalent sexual and reproductive health issues that emerged during the development of the strategy are also listed in the key below the regional needs map.

Good Health Down South 2021 – 2025 also identifies priority populations who experience a disproportionate burden of poor sexual and reproductive health outcomes, as a result of colonialism and structural inequality resulting in limited resources or autonomy, experiences of discrimination, and barriers to accessing appropriate, timely and affordable services. The priority populations include Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse backgrounds including migrants and refugees, people with disabilities, people from the LGBTIQ+ communities, older people, young people, and people from low socioeconomic backgrounds.

As illustrated by the regional needs map, the strategy aims to address these health issues through the integration and prioritisation of sexual and reproductive health at a health systems level, improving equitable access to health services, including screening, abortion and contraception options, at an organisational and provider level, and enhancing sexual and reproductive health literacy, including relationships and sexuality education, at a community and individual level.



"You can't teach domestic violence prevention without addressing sex and sexuality, because it's usually at the core of much of the disrespect that goes on. We need to take the stance that respectful relationships go hand in hand with sexuality education, and that consent is about decision making."

~ Consultation Good Health Down South 2021 – 2025



"We need to get the message out there, that there is an increase in STI s in the community, so perhaps more people will get tested."



"I think that the biggest sexual and reproductive health issue is still around medical abortion access in the regional areas, and I know that 1800MyOptions and others are doing such good advocacy around that."

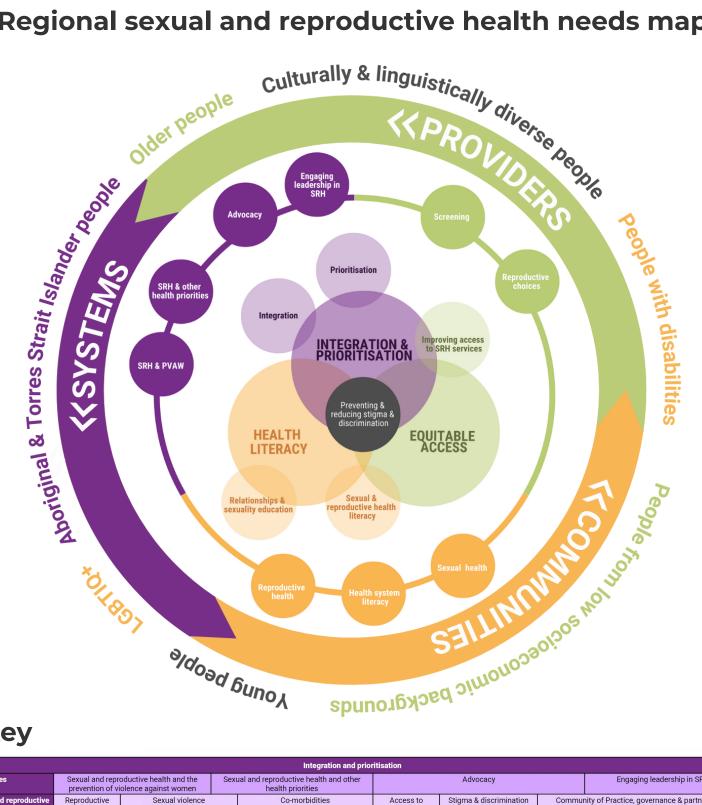
~ Consultation *Good Health Down South 2021 – 2025*



"Endometriosis is a really big thing. We've seen quite a few young people with polycystic ovary syndrome as well, and they're wanting reassurance. They want to know, 'Am I going to be able to get pregnant later on?', 'Is this going to affect this?' or 'What can I do to get rid of it?'"

~ Consultation Good Health Down South 2021 – 2025

Regional sexual and reproductive health needs map



Key

Integration and prioritisation												
Key themes	Sexual and reproductive health and the prevention of violence against women			ual and reproductive health and other health priorities	Advocacy				Engaging leadership in SRH			
Sexual and reproductive health issues	Reproductive coercion	Sexual violence		Co-morbidities	Access to services	3		Commur	nity of Practice, governance & partnership			
Improving access to sexual and reproductive health services												
Key themes	Screening				Reproductive choices							
Sexual and reproductive health issues	Cervical screening	Endometriosis and polyco ovary syndrome	ystic	Sexually transmissible infections (STIs) and blood borne viruses (BBVs)	Surgical and medical abortion			Contraception including long-acting reversible contraception				
Sexual and reproductive health literacy												
Key themes	Sexual health Health systems literacy			Reproductive health								
Sexual and reproductive health issues	Sexually transmissible infections (STIs) and blood borne viruses (BBVs)			Access to services	Menopa	ıse	Polycystic ovary syndrome (PCOS)		Endometriosis	Menstruation and periods		
Relationships and sexuality education												
Key themes	Sex, sexuality, and respectful relationships											
Sexual and reproductive health issues	Reproductive coercion		Re	espectful Relationships and Critical Friends Network	Conse		ent		Body image			

THEORY OF CHANGE

A Theory of Change is a visual depiction of the mechanisms through which an intervention causes the intended outcomes. In this instance, the intended outcomes are the integration and prioritisation of sexual and reproductive health in all health planning, improved and equitable service delivery and enhanced health literacy.

The Theory of Change (Figure 3) describes the intended outcomes of the *Good Health Down South 2021 – 2025* strategy, through the objectives listed. Through partnerships and collaboration, *Good Health Down South* will broaden, expand and strengthen sexual and reproductive health networks and workforce capacity. This will enable partners and stakeholders to integrate and prioritise sexual and reproductive health and embed it as a health priority within efforts to prevent violence against women and enhance gender equity.

To increase inclusive and equitable access to sexual and reproductive health care and services, *Good Health Down South* will focus on enhancing the capacity and capability of the regional sexual and reproductive health sector and workforce. This will ensure that services and practitioners are equipped to provide sexual and reproductive healthcare, including abortion, contraception, screening, and to diagnose and treat reproductive conditions such as polycystic ovary syndrome, endometriosis and menopause.

Good Health Down South also seeks to enhance the provision of inclusive and accessible services for priority populations, such as culturally and linguistically diverse communities and will work to improve the health literacy of individuals and the community through education and organisational capacity building.

The Theory of Change, developed to support change over the course of the four-year strategy, is based on key assumptions employed in health promotion and health program design: that improving the knowledge and confidence of community members will contribute to improved self-efficacy and health-promoting behaviours; and that increasing the capacity and capability of organisations and practitioners will enhance the integration of sexual and reproductive health into health planning and improve equitable service delivery and uptake from the community. The *Good Health Down South* Theory of Change also presupposes that sexual and reproductive health is intrinsically connected to the other strategic priorities collectively held by the Victorian women's health services, of preventing violence against women, or gendered violence, and advancing gender equality, and as such, action to improve sexual and reproductive health will support and enhance efforts to prevent violence against women and improve gender equality.

Good Health Down South

Theory of Change



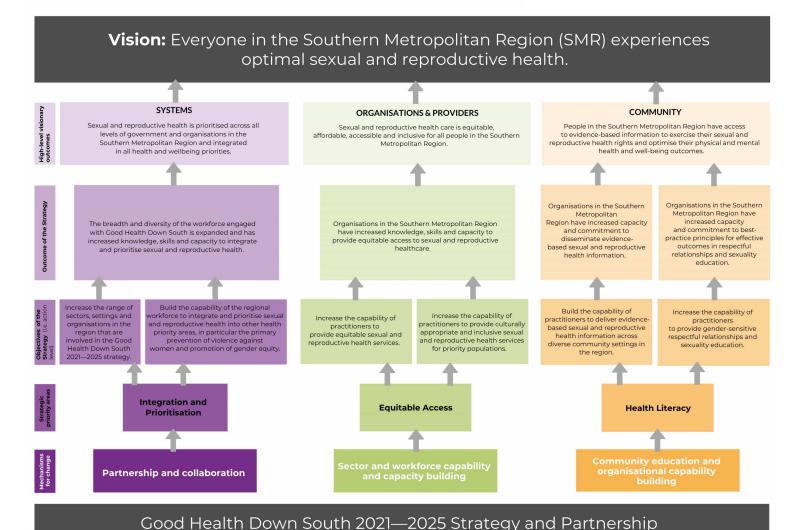


Figure 3: A Theory of Change for Good Health Down South 2021 - 2025

STRATEGIC PRIORITIES

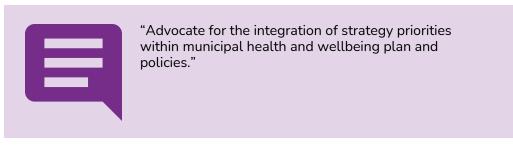
Integration and prioritisation

Good Health Down South 2021-2025 seeks to integrate sexual and reproductive health promotion with other health and wellbeing priorities, in particular the primary prevention of violence against women.

Some forms of violence against women are explicitly related to sexual and reproductive health, including sexual violence or reproductive coercion, "behaviour that has the intention of controlling or constraining another person's reproductive health decision-making" including sabotaging their contraception, pressuring them to keep or terminate a pregnancy or pressuring them to undergo sterilisation (Marie Stopes Australia, 2021).

There is also an association between experiences of violence and poorer sexual and reproductive health outcomes, including inconsistent contraception use, increased risk of unintended pregnancy, poorer maternal and child health outcomes, increased risk of sexually transmissible infections, and increased risk of genital and reproductive tract infections (Katz et al., 2017; Grace and Anderson, 2018; Hill et al., 2016; Northridge et al., 2017). Violence against women may also impact access to health services, including abortion (Bacchus, 2018).

This strategic priority also refers to the prioritisation of, and commitment to, sexual and reproductive health in general health planning within local government, community health organisations and other health promotion agencies. *Good Health Down South 2021-2025* seeks to increase the capability of the regional workforce to address sexual and reproductive health, by increasing and broadening the number and type of organisations involved in the strategic partnership, as well as the number of organisations that integrate sexual and reproductive health into their health planning.



~ Consultation Good Health Down South 2021 - 2025

STRATEGIC PRIORITIES

Equitable access

Access to high-quality, inclusive and affordable health services is a key social determinant of health and is influenced by other social determinants of health, including income, employment and job security, access to housing and welfare, the social environment, social inclusion and discrimination (World Health Organization, 2021d). For health services to be truly equitable, they need to be safe, affordable, timely, physically accessible, culturally sensitive and patient-centred, and free from stigma or discrimination. Providing equitable access to healthcare services is a critical component of reducing health inequities, defined as "differences in health status that are socially produced, systematic in their unequal distribution across the population, avoidable and unfair" (VicHealth, c2021). Barriers to accessing healthcare persist and can be economic or financial, social, geographic, and legal in nature.

Good Health Down South 2021-2025 seeks to enhance equitable access to health services by ensuring primary practitioners have the capability to provide sexual and reproductive health care. The strategy also aims to improve organisational capacity to provide services that are culturally appropriate and inclusive for priority populations, including Aboriginal and Torres Strait Islander people, those who identify as LGBTIQ+, people from culturally and linguistically diverse communities, and people living with a disability. Good Health Down South 2021-2025 seeks to build and strengthen intentional and meaningful relationships with key partners and stakeholders that represent priority populations.



"Continue to support the sexual and reproductive health hubs (Peninsula Health and Monash Health) to establish medical abortion provision."

~ Consultation Good Health Down South 2021 – 2025



"Ensure equal and safe access for LGBTIQ+ women and people with female sex characteristics."

[~] Consultation Good Health Down South 2021 - 2025

STRATEGIC PRIORITIES

Health literacy

This strategic priority is targeted at enhancing sexual and reproductive health literacy at a community level, by working with organisations and providers to increase the effective dissemination and promotion of evidence-based sexual and reproductive health information. Literacy is defined as "how people access, understand and use health information [to] benefit their health" (Australian Institute of Health and Welfare, 2020). It comprises two important, interconnected components of individual health literacy, including the knowledge and skills to understand and utilise health information and navigate the health system; and the health literacy environment, including policies, processes, and the distribution of health information, that affect an individual's capacity to engage with the health system (Australian Institute of Health and Welfare, 2020).

Health promotion action assumes that enhancing literacy, in conjunction with addressing the broader social determinants of health, will improve health outcomes and reduce inequalities by increasing individual capacity and motivation to make health-promoting decisions related to the prevention of disease (Walters et al., 2020). In general, limited or insufficient health literacy is associated with poorer health behaviours, such as lower engagement with health services including preventative screening, and poorer health outcomes. Health literacy has a profound impact on sexual and reproductive health outcomes. Knowledge of sexual and reproductive health issues, when coupled with access to resources and services, allows people to integrate preventative health behaviours and access timely testing and treatment, thus reducing the impact and prevalence of disease (Commonwealth of Australia, 2018).

In addition to increasing the dissemination of sexual and reproductive health information through capability building with partners and stakeholders, *Good Health Down South* seeks to enhance regional practitioners' capacity to provide respectful relationships, sexuality and affirmative consent education to prevent sexual violence and coercion.



"Provide accessible community education services for priority populations including refugees, migrants and international students, and women with disabilities, as well as healthy and respectful relationships education. Include peer led models and translated resources."

~ Consultation *Good Health Down South 2021 – 2025*



"Increasing community knowledge, skills and confidence in understanding SRH and upskilling youth workers to support young people with their sexual and reproductive health."

~ Consultation Good Health Down South 2021 – 2025



"Alignment and integration of sexuality education into the Respectful Relationships initiative."

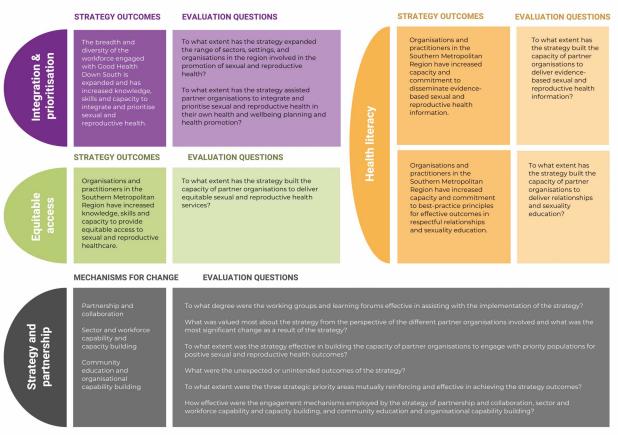
EVALUATION FRAMEWORK

Rigorous evaluation of health promotion interventions is essential to collect evidence about the efficacy of a program or policy, identify unanticipated outcomes and opportunities to improve practice or increase the reach of a program or policy, and justify the use of resources.

The *Good Health Down South* partnership will conduct a thorough evaluation of the four-year strategy, led by WHISE but predicated on a firm commitment from partners and stakeholders to complete requests for data, often by survey or interview. Together we can demonstrate the collective impact of the strategy on the health system, organisations and providers, and community, in order to advocate to government for sexual and reproductive health to be prioritised further into the future.

The strategy and biennial action plans will be evaluated at the strategy outcome, objective and action levels, included in the Theory of Change and biennial action plans respectively. The strategic outcomes will be assessed using high-level evaluation questions, outlined below in FIGURE 4.

GHDS Strategy Outcomes Evaluation Framework



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The strategy will also utilise quantitative and qualitative data to evaluate the objectives of the four-year strategy against indicators, as demonstrated in the diagram below, FIGURE 5.

GHDS Strategy Objectives Evaluation Framework

OBJECTIVES INDICATORS OF SUCCESS Increase the range of sectors We will see an increase in the number and type of organisations involved in the settings and organisations in the region that are involved in the GHDS partnership, disaggregated by sector, setting, and priority population We will see an increase in the number of practitioners involved in the GHDS Good Health Down South 2021partnership, disaggregated by the type of organisation and gender. • We will see an increase in the number of organisations and practitioners who ntegration & prioritisation 2025 strategy. consistently engaged in the activities of GHDS and report value to their role • We will see an increase in the number and proportion of partners and Build the capability of the stakeholders in the region who include sexual and reproductive health in their health and wellbeing planning and activities (for example, in Municipal Health and regional workforce to integrate and prioritise sexual and reproductive health into other Wellbeing Plans, Integrated Health Promotion Plans and various action plans). • We will see increased integration of sexual and reproductive health as a health and health priority areas, in particular wellbeing priority in the outputs of the Promoting Respect and Equity Together the primary prevention of We will see increased understanding of the bidirectional relationships between promotion of gender equity gender equity, the prevention of violence against women and sexual and reproductive health among practitioners in the region. **OBJECTIVES** INDICATORS OF SUCCESS • We will see an increase in the promotion of existing sexual and reproductive health services in the region with an aim to increase community access. Increase the capability of practitioners to provide equitable We will see an increase in the knowledge and capability of practitioners in the region to provide sexual and reproductive health services through accessible and sexual and reproductive health affordable community settings. · We will see evidence of commitment from partners and stakeholders to exploring opportunities to expand the provision of sexual and reproductive health services We will see increased knowledge of the barriers and enablers to equitable sexual and reproductive health services among practitioners in the region. · We will see increased motivation to address the barriers and enablers to equitable sexual and reproductive health services among practitioners in the region. • We will see an increase in the promotion of culturally appropriate sexual and Increase the capability of practitioners to provide reproductive health services in the region with an aim to increase access fo culturally appropriate and priority populations. We will see evidence of commitment from partners and stakeholders to exploring reproductive health services for opportunities to expand the provision of sexual and reproductive health services to priority populations. reduce health inequalities experienced by priority populations. We will see increased knowledge of the barriers and enablers to inclusive sexual and reproductive health services for priority populations among practitioners in · We will see increased motivation to address the barriers and enablers to inclusive sexual and reproductive health services for priority populations among practitioners in the region. **OBJECTIVES INDICATORS OF SUCCESS** Build the capability of · We will see increased knowledge of sexual and reproductive health issues among practitioners to deliver evidencepractitioners in the region based sexual and reproductive We will see increased confidence among practitioners in the region to translate health information across diverse sexual and reproductive health information for diverse communities and settings. community settings in the region. We will see increased intention to disseminate and promote sexual and reproductive health information and resources across diverse community s in the region. We will see an increase in the dissemination and promotion of evidence-based sexual and reproductive health information and resources across diverse community settings in the region. We will see increased knowledge of best practice principles for respectful relationships and sexuality education among practitioners in the region. Increase the capability of practitioners to provide gendersensitive respectful relationships We will see increased confidence among practitioners in the region to translate best practice principles for respectful relationships and sexuality education for and sexuality education. diverse communities and settings. • We will see increased understanding of the bidirectional relationships between gender equity, the prevention of violence against women and sexual and reproductive health, and the implementation of this understanding through respectful relationships and sexuality education. · We will see increased intention to disseminate and promote sexual and

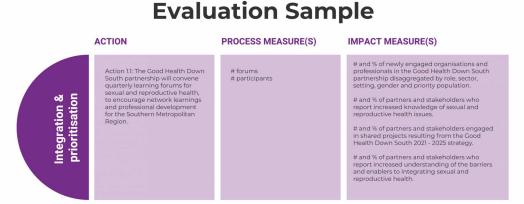
Figure 5: Good Health Down South 2021 - 2025 Strategy Objectives Evaluation Framework

community settings in the region.

reproductive health information and resources across diverse community settings in the region.

We will see an increase in the dissemination and promotion of evidence-based sexual and reproductive health information and resources across diverse

Additionally, the *Good Health Down South* partnership will also conduct an evaluation of the actions in the biennial action plans, with indicators assigned to measure the extent to which the program was delivered with fidelity, the barriers and enablers to the implementation of the program activities, and uptake by the intended audience. These indicators, used to monitor and document the implementation of program components, can aid in understanding the relationship between specific program elements and program outcomes and is known as process evaluation. The action plans will also include impact evaluation measures, to assess the effect of specific actions on participants' knowledge, confidence, motivation and skills. An example of the application of this evaluation is presented in FIGURE 6.



GHDS Year One & Two Action Plan

Figure 6: Good Health Down South 2021 - 2025 Year One and Two Action Plan Evaluation Sample

To measure and assess the impact of the strategy and associated actions meaningfully and accurately, the evaluation can only examine the indicators assigned to the strategic outcomes, objectives and actions. *Good Health Down South* does not have access to data and resources to assess the long-term, visionary outcomes of the strategy, or the ability to definitively determine that any changes to disease prevalence, or health literacy and behaviours at a community level, are attributable to actions emerging from the strategy. The evaluation framework included is designed to monitor and evaluate the outcomes and objectives highlighted in the Theory of Change, which assumes, based on health promotion best practice, that the implementation of the objectives will result in the realisation of the strategic outcomes and ultimately, the high-level visionary outcomes that we hope to see at a community level.

Notably, the evaluation framework developed for *Good Health Down South* is reflects the principles of the social impact framework, adopted by WHISE and used by other organisations, to capture "the social change, both long-term and short-term, that arises as a result of an organisation's activities" (Ibrisevic, 2019).

The social impact framework employed by WHISE is supplemented by a cost-benefit analysis using tools developed by the Australian Social Value Bank. The Australian Social Value Bank uses information about the activities, the resultant social outcomes, the number of beneficiaries of said activities, and associated costs to estimate the net social benefits and the overall return on investment. In addition to demonstrating social impact, this helps to inform future funding opportunities.

IMPLEMENTATION AND ACTION PLANS

The Year One and Two Action Plan for *Good Health Down South* outlines an ambitious program of activities for the partnership, including a comprehensive monitoring and evaluation plan with process and impact indicators assigned to each action to measure success. It also highlights responsibility for each deliverable, with partners and stakeholders listed next to actions. The Action Plan will be renewed in 2023 and developed in collaboration with the *Good Heath Down South* partners and stakeholders. As a living or dynamic document, the Year One and Two Action Plan is available on WHISE's website and will continue to be reviewed and updated as necessary.

Following the publication of this strategy, the *Good Health Down South* partnership will implement the biennial action plans through learning forums and network meetings, which will serve as catalysts for increased collaboration, shared knowledge-brokering and meaningful engagement.

WHISE is extraordinarily grateful to our partners and stakeholders for their contribution to the development of *Good Health Down South 2021 – 2025* and their ongoing commitment to improving women's sexual and reproductive health outcomes. We look forward to working in partnership to achieve the aspirational vision articulated in this strategy.



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