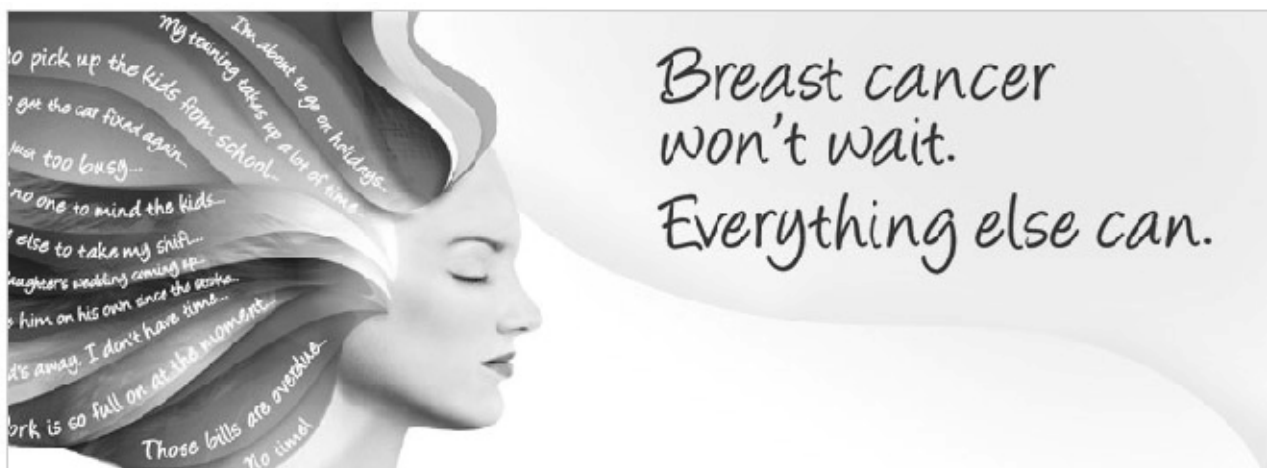




QUEENSLAND WOMEN'S HEALTH NETWORK NEWS

DECEMBER 2009 *'Aims to strengthen links between women by providing access to information and support'*

BREASTHEALTH



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Five things every woman should know about breast cancer



By *National Breast and Ovarian Cancer Centre*

1. *Your breast cancer risk increases with age*

Increasing age is one of the strongest risk factors for developing breast cancer. Breast cancer can occur in younger women, but about three out of four breast cancer cases occur in women aged 50 years and older. To calculate your personal level of breast cancer risk, visit National Breast and Ovarian Cancer Centre's risk calculator at www.nbocc.org.au/risk.

2. *Most women diagnosed with breast cancer will not die of the disease*

The good news is that more Australian women are now surviving breast cancer than ever before. Early detection is vital to surviving breast cancer. Overall, 88 per cent of women diagnosed with breast cancer today will be alive five years after their diagnosis. Twenty years ago 71 per cent of women diagnosed with breast cancer could expect to live five years after their diagnosis.

Research shows 98 per cent of women will be alive five years after their diagnosis if their breast cancer is detected early when it is very small. Don't let the fear of possibly finding breast cancer stop you from taking control of early detection.

3. *No matter how old you are, get to know the normal look and feel of your breasts*

This is important even if you are having regular screening mammograms, as breast cancer can develop in between mammograms.

(continued next page)

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Five things everywoman should know (cont)

There's no right or wrong way to check your breasts, no special technique to use and no right time of the month to check. Just check your breasts wherever and whenever works for you, such as when showering, dressing or putting on body lotion. Changes in the breast to look out for include:

- a new lump or lumpiness, especially if it's only in one breast
- a change in the size or shape of the breast
- a change to the nipple, such as crusting, ulcer, redness or inversion
- a nipple discharge that occurs without squeezing
- a change in the skin of the breast, such as redness or dimpling
- an unusual pain that doesn't go away.

4. *Women aged over 50 years should have regular screening mammograms*

Mammography screening is the best method of early detection available for women aged 50 years and over. International studies have shown mammography screening reduces deaths from breast cancer by approximately 25-30 per cent among women aged 50-69 years.

It is recommended that women 50 years and over have screening mammograms every two years. Women aged 40-49 years are also

eligible for mammography screening through BreastScreen Australia. To make an appointment call **BreastScreen Australia on 13 20 50.**

5. *If you are diagnosed with breast cancer, National Breast and Ovarian Cancer Centre is a great source of information*

A breast cancer diagnosis can be a confronting and confusing time for a woman and her family. National Breast and Ovarian Cancer Centre provides up-to-date information and a comprehensive range of evidence-based resources free of charge to help women and their families through every stage of the cancer journey including:

- *Guide for women with early breast cancer*
- *Cancer – how are you travelling?*
- *When the woman you love has early breast cancer*

To order printed resources visit **www.nbcc.org.au/resources** or phone **1800 624 973**. For online information about breast cancer, visit **www.nbcc.org.au**

Our Next Newsletter will examine aspects of:

WOMEN & GAMBLING

Does your organisation have expertise in this area?

Or are you a woman with knowledge / experience on this topic?

Share your insights with over 400 organisations, professionals, and other women in Queensland and beyond...

We welcome your articles, news items, or other submissions. If you have an idea, or would like more information please get in touch with us today!

Deadline: 12 February

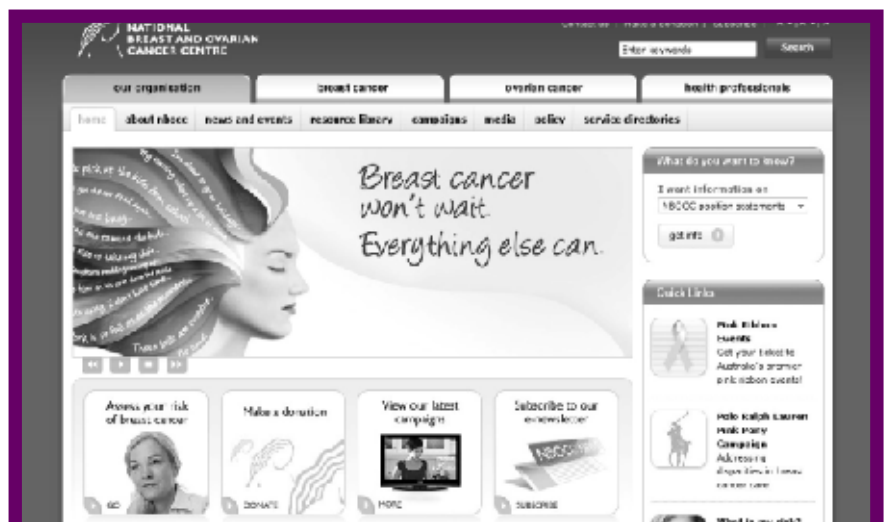
QWHNEWS

The increasing prevalence of cosmetic breast augmentation surgery, particularly among healthy



young women, raises many disturbing questions: What is it about our society that makes women feel that we are not good enough just as we are? Are the constant images that surround us, including the rising infiltration of pornographic material into everyday life, setting false and harmful standards? If you're concerned and would like to see a future edition of QWHN News on these issues please send us an email to qwhn@bigpond.com

Maree Hawken
Coordinator



NBOCC'S NEW WEBSITE!

Australia's leading online source of breast and ovarian cancer information www.nbcc.org.au now has a fresh new look.

NBOCC's popular website has undergone a major redevelopment to provide the latest evidence-based information on a comprehensive range of topics.

NBOCC's website redevelopment has been generously supported by the Macquarie Group Foundation.

Breast Implants

Women's Health Queensland Wide looks at the growing disparity between 'actual' breast shape and the popular 'ideal'

Breast augmentation (implant) surgery is one of the most common cosmetic surgical procedures performed on women in Australia.

The growth of celebrity culture has led to an increased disparity between the actual shape of women and the "ideal" portrayed by the media. At the same time an increase in the number of surgeons offering implants has meant that the procedure is more accessible than ever before.

Women who are considering breast implants may be surprised to learn that the size, shape and symmetry of their breasts is actually completely normal. Breast size can be inherited from either the father or mother and can also be affected by weight loss or gain. Use of the pill, pregnancy and breastfeeding will also affect the size of a woman's breasts throughout her lifetime.

It is normal for one breast to be a different size and/or shape to the other. This asymmetry is one of the main reasons women report being unhappy with their breasts.

Women should discuss their concerns about the size or shape of their breasts with a friend, their partner, a family member or counsellor. Surgery may be an option if women continue to be distressed about their breasts.

A *Choice* report updated in February 2009 uncovered some disturbing practices by cosmetic surgery clinics including one doctor informing a prospective patient that she "needed" to have breast implants and another clinic telling a woman that having her breasts enlarged would increase her chances of finding a partner.

Women considering breast implants should be aware of the following:

- Breast implants will not automatically improve your life. It is important that you are realistic about the outcome of the surgery and that you are doing it for yourself and for nobody else.
- Breast implant surgery, as with any surgery, carries an element of risk.
- Breast implants are not permanent and may require replacing as they age. The timeframe that an implant lasts for varies but the risk of experiencing problems with an implant increases significantly once they reach 8-10 years of age.
- Pregnancy, weight loss and menopause can change your breasts' appearance, even if you have implants.
- Breast implants are only covered by Medicare if they are correcting a deformity or following mastectomy.
- Choose your surgeon carefully - in Australia any medical practitioner can call themselves a cosmetic surgeon. Plastic surgeons however must meet strict requirements including at least 5 years of surgical training and only operating in accredited facilities.

For more information on any women's health issue visit www.womhealth.org.au or call the Health Information Line on (07) 3839 9988 (Brisbane) or 1800 017 676 (toll free from outside Brisbane).

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Written and reviewed by Women's Health Queensland Wide, a not for profit health promotion, information and education service for women and health professionals in Queensland www.womhealth.org.au.

Bibliography

Australasian College of Cosmetic Surgery www.accs.org.au accessed 13 October 2009

Australian Society of Plastic Surgeons www.plasticsurgery.com.au accessed 13 October 2009

CHOICE 25 February 2009 (update) *Cosmetic surgery not all pretty*. Available at www.choice.com.au

Precision Cosmetic Laser & Surgery www.precisioncosmetic.com.au accessed 13 October 2009

Therapeutic Goods Administration (TGA) 2001, *Breast Implant Information Booklet*, 4th edn, TGA, Woden. Available at <http://www.tga.gov.au/DOCS/pdf/breast4.pdf>

Women's Health Queensland Wide 2007 *Body Image student factsheet*. Available at <http://www.womhealth.org.au/studentfactsheets/bodyimage.htm>

Women's Health Queensland Wide 2008, 'Breast variations', *Health Journey*, issue 4 p4. Available at http://www.womhealth.org.au/newsletter/HealthJourney%202008_4.pdf#page=4

REVIEW OF BREAST CANCER RISK FACTORS NOW AVAILABLE

National Breast and Ovarian Cancer Centre (NBOCC) has released *Breast cancer risk factors: A review of the evidence*, an up-to-date review of the evidence relating to breast cancer risk factors.

As incidence of breast cancer increases worldwide, investigation into its potential causes and risk factors continues to attract a high level of interest from media, researchers, clinicians and the community.

Breast cancer risk factors: A review of the evidence provides an up-to-date overview and analysis of epidemiological studies about factors associated with breast cancer risk, including:

- Sex, age and residence
- Family history and genetics
- Breast conditions
- Reproductive and menstrual history
- Endogenous and exogenous hormones
- Body size and lifestyle behaviours
- Medical history

- Environmental exposures

- Psychosocial stress and cancer

Breast cancer risk factors: A review of the evidence provides a comprehensive update to NBOCC's 2005 report, *Summary of risk factors for breast cancer*. The new report is available in PDF format to enable the ongoing update of content to reflect advances and updates in the evidence about risk for breast cancer.

Breast cancer risk factors: A review of the evidence is available to view and download at www.nbocc.org.au. The evidence provided in the report has informed the development of NBOCC's online risk calculator, which allows a woman to calculate her personal level of breast cancer risk compared to another woman of the same age. To visit **NBOCC's risk calculator**, visit www.nbocc.org.au/risk

National Breast and Ovarian Cancer Centre (NBOCC) is Australia's national authority and source of evidence-based information on breast and ovarian cancer. Funded by the Australian Government, NBOCC works in partnership with health professionals, cancer organisations, researchers, governments and those diagnosed to improve outcomes in breast and ovarian cancer.

Heart Foundation Walking

Walking is the most popular physical activity for Australian women according to Nutrition Manager **Deanne Wooden**.

Think of movement as an opportunity, not an inconvenience . . .

Each year, 8000 deaths are attributed to physical inactivity and sedentary behaviour, representing an estimated 77,000 premature potential years of life lost nationally. Annual direct health costs of physical inactivity are estimated to be \$1.49 billion¹. Reasons for low levels of physical activity are many, and include increased car dependency (45% of car trips taken by Queenslanders are less than 3km), increased television and computer usage (Queenslanders sit for an average of 4 to 5 hours per day), and a built environment that does not support active living.

At any age, physical activity provides a range of health benefits – and it doesn't have to be vigorous activity to reap the rewards. Brisk walking for three to four hours per week could reduce the risk of coronary events in women by 30 to 40%² and could also reduce the risk of post-menopausal breast cancer³. This equates to 30 minutes on most days of the week, which is as easy as walking to the local shops or taking the dog for a walk. Walking is the most popular physical activity for Australian women, with twice as many females as males walking for exercise in the 12-month period leading to 2005/06⁴.

Heart Foundation Walking is Australia's first and only free national network for walking groups which aims to make regular physical activity enjoyable and easy, especially for people who are not used to being active. In fact, the major target group for Heart Foundation Walking is those people who are not engaging in sufficient physical activity to gain a health benefit – which is 44% of the Australian population⁵. According to the National Physical Activity Guidelines, a sufficient level of physical activity is defined at 30 minutes of moderate-intensity exercise on most, preferably all, days of the week.

The National Physical Activity Survey



"Parents with prams" walking group

in 1999 showed that the number of women participating in a 'sufficient' activity level fell from 64% in those aged 18–29 years to 48% in those 60–75 years of age⁶. An evaluation of Heart Foundation Walking in Queensland revealed that people who were not sufficiently active before joining the program doubled their weekly walking time 6 months into the program. 83% of the participants were

women. With an average age of 54 years old, participation in Heart Foundation Walking can help to offset this worrying trend of decreasing levels of physical activity with age.

Heart Foundation Walking has many benefits, including maintaining motivation, increased perception of safety, social support, and raising health awareness through regular newsletters. Walking groups can be any size; and can choose to walk at various times, days, lengths and level of difficulty. Some examples of groups include families, over 50s, shopping centre groups, and parents with prams (pictured).

To join or start a group, or for more information about **Heart Foundation Walking** call our **Health Information Service** on **1300 36 27 87** or visit the website: **www.heartfoundation.org.au/walking**

1 Stephenson J, Bauman A, Armstrong T, et al. The costs of illness attributable to physical inactivity in Australia. A preliminary study. Commonwealth of Australia 2004

2 Manson JE, Hu FB, et al. A prospective study of walking as compared with vigorous exercise in the prevention of coronary heart disease in women. *N. Engl J Med* 1999; 341: 650-8

3 Cancer Council Position Statement – Physical Activity and Cancer Prevention – March 2009

4 Participation in Sports and Physical Recreation, Australia, 2005-06 ABS

5 Active Australia National Physical Activity Survey 1999

6 Active Australia National Physical Activity Survey 1999

THE BENEFITS OF WALKING

Being active on a regular basis is an important part of a healthy lifestyle, and walking is a great way to look after your heart health.

Regular physical activity helps:

- reduce your risk of heart disease and stroke
- manage weight, blood pressure and blood cholesterol
- prevent and control diabetes
- reduce your risk of developing some cancers
- maintain your bone density, reducing your risk of osteoporosis and fractures
- improve strength, balance and coordination, reducing your risk of falls and other injuries

BreastScreen Queensland health promotion programs now in action in workplaces across Queensland!

The BreastScreen Queensland Program has commenced a twelve month pilot project to establish health promotion programs in cancer prevention and early detection within government and non-government workplaces statewide. The project aims for ten statewide workplaces to implement sustainable BreastScreen Queensland health promotion programs, creating supportive environments for eligible women to attend screening, developing personal skills of women attending activities on the project, and building public policy by allowing working women to screen in work time.

The BreastScreen Queensland Workplace Project is collaborating in 2009 around the state with employees from Cardno, Department of Public Works, Department of Main Roads, Queensland Police Service, Queensland University of Technology, Ramsay Hospitals, Red Cross Blood Service, Spiritus, Woolworths, and Ipswich Hospital.

At the moment, Health Promotion Officers from the BreastScreen Queensland Program around the state are in the process of coordinating education sessions and other health promotion initiatives with the many local workplace contacts that the project has generated. One important initiative is influencing policies to

allow eligible staff time off work to attend for screening as part of monitoring their overall health and well-being, and also setting up block booking reserved times for staff to screen at times specifically tailored for them. Other initiatives include providing Cancer Screening Health Promotion Officers with more opportunities to collaborate with each other and local workplaces through statewide initiatives.

Eileen Mills, Manager HealthStart, Organisational Safety and Wellbeing Queensland Police Service, announced that: "QPS, as part of its HealthStart Program, considered its collaboration with BreastScreen Queensland a win:win situation. Not only did it bring specific early detection advice for all our female employees in Southwest Queensland including the target age of 50 to 69 years, the advice enabled husbands, partners, sons and daughters of women in the target age group to encourage their family members to detect breast cancer early by visiting BreastScreen Queensland every 2 years."

The project is currently running until January 2010. Any workplaces interested in joining this Project, or discussing further, can email elizabeth_ostermann@health.qld.gov.au

Are you putting off having a breastscan or are you overdue?

Many women are not taking advantage of BreastScreen Queensland's free high quality breast cancer screening program. Today's women are time-poor, usually focused on their family needs first and leave their health needs as a last priority. A visit to a BreastScreen Queensland Service will only take around 30 minutes every two years.

It is vital that having a breast-scan every two years be part of your regular health check. BreastScreen Queensland provides screening in over 200 locations throughout the State so there is bound to be one near you. So if you are a woman over 50, phone **13 20 50** and make an appointment with **BreastScreen Queensland** now. No doctor's referral is needed and it's free.

**EARLY DETECTION
COULD SAVE YOUR LIFE**

EXTERNAL BREAST PROSTHESES – Claim your Reimbursement from Medicare

Have you, or someone you know, had a mastectomy as a result of breast cancer?

The external breast prostheses reimbursement program provides a reimbursement of up to \$400 for new or replacement external breast prostheses for women who have had a mastectomy. This limit applies for each prosthesis for each breast.

All women who are permanent residents of Australia, have a current Medicare entitlement and have had a mastectomy as a result of breast cancer (recent or in the past) are eligible to claim.

To claim a reimbursement, you will need to complete a claim form, available from your local Medicare office or

online at www.medicareaustralia.gov.au. You can claim once every two years, for each prosthesis for each breast. Subsequent reimbursements can be claimed no earlier than two years from the date of last purchase.

Important: if you receive financial assistance from the Department of Veterans' Affairs (DVA), you should claim your entitlement through DVA.

For more information visit:

www.medicareaustralia.gov.au then go to

For individuals > Services and programs >

External breast prostheses reimbursement program

or call **132 011***.

* Call charges apply from mobile and pay phones only.



WHAT'S ON...

*Important Events, Conferences
and Workshops around the State & beyond*

17-19 FEB 1st GLOBAL CONFERENCE: MAKING SENSE OF PAIN – SYDNEY, NSW.

This interdisciplinary conference provides a forum for inquiry into the vicissitudes of pain: its nature and existential significance, and the many ways in which pain plays a part in our lives. Of particular concern, too, are the biological, social and interpersonal circumstances within which our reactions to pain occur. The Women's College, Sydney, in association with the Faculty of Arts and Social Sciences, University of New South Wales, Sydney.

Visit <http://www.inter-disciplinary.net/probing-the-boundaries/making-sense-of/pain/call-for-papers/>

18-21 MAY 6th NATIONAL AUSTRALIAN WOMEN'S HEALTH CONFERENCE – HOBART, TAS. *The New National Agenda*

Featuring prominent international and Australasian speakers on areas including: women's economic health & wellbeing, women's mental health & wellbeing, preventing violence against women, women's sexual & reproductive health, improving women's access to health services.

For more information visit the **Australian Women's Health Network** at <http://www.awhn.org.au>

16-18 JUNE INAUGURAL NATIONAL INDIGENOUS DRUG AND ALCOHOL CONFERENCE 2010: LISTENING, LEARNING AND LEADING – ADELAIDE, SA.

The National Indigenous Drug and Alcohol Committee (NIDAC) is organising this event. The conference aims to assist and contribute to further develop the capacity of those working to address Indigenous alcohol and drug issues. Abstract submissions close Friday 4 December 2009. Registration closes Monday 15 March 2010. Visit: www.nidacconference.com.au or call (07) 3334 4460.

26-29 SEP AUSTRALASIAN MENOPAUSE SOCIETY 14th CONGRESS – SYDNEY, NSW.

An outstanding program featuring internationally recognised experts speaking on topics including: Overcoming Cultural & Religious Discrimination; The Ascent of Women; Ageing and the Brain; Early Menopause; Female Sexual Dysfunction; Healthy Ageing and Sexuality; and Skeletal Health.

For information visit: www.apmf2010.com



WOMEN'S HEALTH ON THE NET

Hot Spots on the Internet for Women

BREAST CANCER NETWORK AUSTRALIA

www.bcna.org.au

Breast Cancer Network Australia is the peak national organisation for Australian women personally affected by breast cancer. They work to ensure that Australians diagnosed with breast cancer, and their families, receive the very best information, treatment, care and support possible, no matter who they are or where they live. The site includes information for those who are newly diagnosed, and on secondary breast cancer. There are many personal stories including: Family & Friends, Survivorship, Young Women, Rural & Remote, Lesbian, and Breast Reconstruction.



LIFE AFTER BREAST CANCER

www.nbocc.org.au/survivorship

This website is for women who have completed treatment for early breast cancer and those close to them. It's designed to answer questions many women have following treatment and includes information and tips from women and healthcare practitioners as well as useful links. It also provides a good starting point to find other sources of information, and may be helpful to women still undergoing treatment for early breast cancer. Topics covered include: Follow-up after breast cancer, health, feelings, relationships, finances, and practical issues.



BREAST IMPLANT INFORMATION BOOKLET

www.tga.gov.au/docs/pdf/breasti4.pdf

This booklet produced in 2000 by the Therapeutic Goods Administration (Australia) provides important information about silicone gel-filled breast implants. Topics covered include: history of breast implants, factors to consider, benefits & risks, life expectancy of implants, surgery, complications, issues such as capsular formation and gel diffusion, mammography, breast-feeding, removal & replacement, breast self examination, and suggested questions to ask your surgeon.



Women's Health Services form Alliance



Some of the members of the newly formed Women's Health Services Alliance (Qld) who attended a meeting in Gladstone recently.

Front Row (from left to right): Kris Saunders, Logan Women's Health & Wellbeing Centre; Vicki Lahtinen, Women's Health Information & Referral Service (Rockhampton); Ruth Tidswell, Gympie & District Women's Health Centre; Cathy Crawford, North Queensland Combined Women's Services. **Back Row:** Jenny Cockerill, Women's Health Awareness Group (Gladstone); Selina Utting, Children by Choice; Kathy Faulkner, Women's Health Queensland Wide; Maree Hawken, QWHN.

(Other members not pictured: Greta Brennan, Wide Bay Women's Health Centre; Belinda Hassan, Mackay Women's Centre; Cathy North, West Moreton Women's Health Service.)

Women's health services from across Queensland gathered in Gladstone recently to network, share ideas and form the Women's Health Services Alliance. QWHN was pleased to accept the invitation to act as the Secretariat organisation for the group. Alliance members include Statewide and regional services funded to provide women's health services in Queensland. They provide essential

services of community support, health promotion, early intervention and prevention, and are utilised by marginalised communities and vulnerable women and families who may not access other health services. Service Coordinators have been meeting regularly for some years and recently decided to progress the arrangement by forming the Alliance. This agreement will enable members

to collaborate on various projects, develop cooperative responses to key issues in State and Federal policy, and provide a statewide capacity to take full advantage of strengths in regional delivery, on issues affecting women's health in Queensland.

As Secretariat QWHN will act as an initial contact point, assist with communication and correspondence, and provide a link and a voice at the national level as a State Representative of the Australian Women's Health Network.

Maree Hawken QWHN Coordinator

Your Breast Cancer Risk with DES Exposure

DES (diethylstilboestrol) exposure as a risk factor in the development of breast cancer is very important for women to know, yet it is hardly ever raised as a possibility to women attending breast screening. In fact, many people are still unaware of their exposure and the potential adverse effects of DES.

DES was an anti-miscarriage drug given to women during pregnancy from 1938-1971 (and sometimes beyond). Women given DES and their children of that pregnancy are at higher risk of certain types of cancer and reproductive problems. These women and their exposed female offspring in particular, require specific preventive care to avoid complications such as late diagnosis of cancer (vaginal, cervical and breast), recurrent miscarriages, ectopic pregnancies and premature deliveries. Since the 1980s it has been known that for DES mothers (women given DES during pregnancy) there is a small increased risk for breast cancer. More recently it has been found that DES daughters (women exposed to DES in the womb) have a 1.9 fold increased risk of breast

cancer after age 40 years. For DES daughters the risk is similar to having a first degree relative such as a mother or sister with breast cancer, placing them in a higher risk group. Women prescribed DES while pregnant and DES daughters over age 40 are advised to have annual mammography and clinical breast examinations.

Under current government policy, there is no guarantee that free annual mammograms are accessible for DES exposed women. DES Action Australia-NSW recognises it is unreasonable to expect DES exposed women to pay screening costs for their medically caused condition. To help ensure the provision of free annual mammography, the organisation suggests that affected women obtain a GP referral for their local BreastScreen clinic and write a full explanatory letter with request to their local BreastScreen Director. For further information about this and everything you need to know about DES, go to <http://desnsw.blogspot.com> or Phone **02 9875 4820**.

Carol Devine, Coordinator, DES Action Australia-NSW.



Dear Queensland Women's Health Networkers

AWHN has been very busy for the last few months -- again! Working on a completely unfunded basis is never easy.

The main projects have been getting submissions in to the Commonwealth Department of Health and Ageing for the new National Women's Health Policy (NWHP). AWHN's submission went in on 30 June and can be found on our website at <http://www.awhn.org.au/>

A working group of AWHN has been managing a consultation project for an Aboriginal women's submission. We have a grant from FaHCSIA to employ a consultant, Sandy Angus, who took leave from Queensland Health to do this work. Sandy has been to all the capital cities and to some regional places, meeting and talking with women and putting together the written submission. It's been a big job in a short time frame and we thank Sandy for the huge amount of energy she has put into making it a success. The submission will be sent to the Commonwealth on 1 October and will be available on our website after that.

By the time you read this, the Commonwealth's consultations for the NWHP will be finished. Our understanding is that the policy will

be written over the first months of 2010 and released in the middle of the year. The AWHN Committee has been thinking about how to promote our submissions and lobby for the proposals we made. We are in the process of making appointments to talk with key Ministers and the Labor Women's Caucus and we are hoping to meet again soon with the policymakers in the Department of Health and Ageing.

If, when you are reading this, you haven't registered for the Sixth National Women's Health Conference, you have missed the early bird registration!!! No matter. Ordinary registration is open and we hope to see you all in Hobart. It promises to be a bumper conference. We had a record number of abstracts and I am delighted to report that they were all of very high standard. There were 65 abstract proposals from Aboriginal women, comprising over 20 per cent of the total, a very gratifying response. Meanwhile, we could really use your support to help us carry on, which in the first instance, comes from becoming a member. Who knows, later on, you might think of joining the Committee. Membership details are on our website: <http://www.awhn.org.au/>

Warm wishes, **Gwen Gray, Convenor,**
Australian Women's Health Network

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HAVE YOUR SAY...



We are interested in obtaining feedback on the quality of the newsletter and issues and topics you would

like to see in future editions.

If you have something to say please contact Maree on (07) 4789 0665 or email us at qwhn@bigpond.com

Season's Greetings & Best Wishes for 2010

from
Queensland Women's Health Network Inc

6th AUSTRALIAN WOMEN'S HEALTH CONFERENCE

*Women's Health:
 The New National Agenda*

**18-21 May 2010
 Hobart, Tasmania.**

INTERNATIONAL AND AUSTRALASIAN SPEAKERS

on a range of topics including:

- ◆ Gender Policy and Practice
- ◆ Improving Primary Health Access
- ◆ Family Violence Prevention
- ◆ Health Promotion and Advocacy
- ◆ Sexual, Reproductive and Mental Health
- ◆ Improving Access for Marginalised Groups
- ◆ Social Determinants of Health
- ◆ Rural Issues and Approaches
- ◆ Healthy Cultural Practice

www.awhn.org.au

Preliminary Program Now Available