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ABOUT CHASE

CHASE brings together a group of over 30 academic staff, located mainly in the School of Health and Social Development, across both Burwood and Waterfront campuses. We also have a large number of honours, masters and PhD students under our supervision.

The group is multidisciplinary and multiprofessional, including public health, health promotion, health sciences, social work, occupational science and therapy, sociology, anthropology, disability studies, and psychology.

The CHASE vision is working collaboratively with communities, organisations and governments to promote social inclusion and to enhance the health and wellbeing of all, particularly those populations, communities and individuals who experience social exclusion.

In this newsletter we report on a range of projects, and on four recently completed PhDs, as well as a variety of CHASE news.

UPCOMING EVENTS

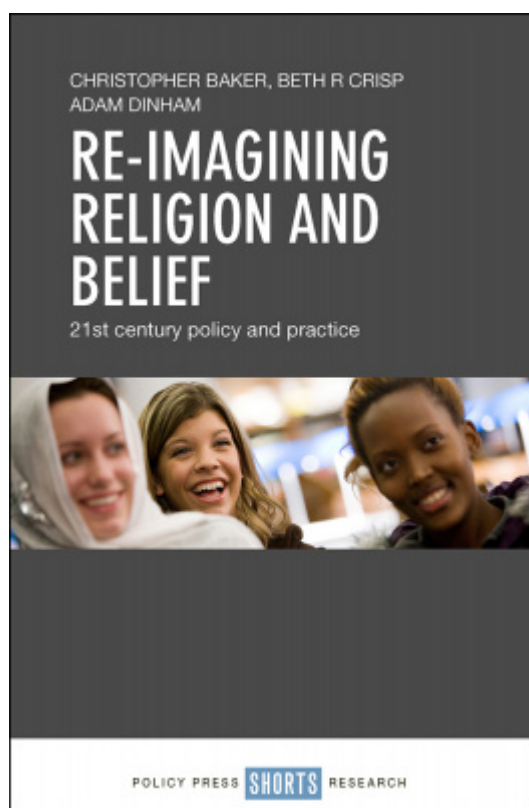
Respect. Prevent. Respond.

Deakin University is proud to be hosting the inaugural national conference, Respect, Prevent and Respond: Preventing and Responding to Sexual Harm in the Tertiary Education Sector. The conference will be held 5 - 6 February 2019 at Deakin Downtown, Melbourne, Australia.

Further information: <http://www.deakin.edu.au/RPRconference>

PROJECT UPDATES

Re-Imagining Religion and Belief: 21st century policy and practice



Re-Imagining Religion and Belief: 21st Century Policy and Practice reports on the outcomes of an international research project which included colloquiums in England, Canada, Norway and Australia bringing together scholars from disparate disciplines to discuss why religion cannot be ignored in policy and practice discourses. Contributors in this volume identify themselves as geographers, legal scholars, policy analysts, sociologists, social workers, as well as scholars of specific religious traditions. As such the discussion is both international and interdisciplinary, but with a common recognition that a) the notion that the academic study of religion is of little consequence to society; and b) that simplistic understandings of religion and belief are incapable of addressing social issues in the 21st century when matters of religion have become mainstream news.

One of the premises of both the project and the book is that past understandings of religion and beliefs have often been premised on binaries that are no longer relevant. A religious landscape of changing and “stretchier” understandings of what is encapsulated by the terms “religion” and “belief” is required. The emergence of intersectionality as a theoretical construct encourages recognising that identities, including those associated with religion and

belief, are fluid and shifting, and overlap within and between people. In this context, religion and belief need to be understood not as blocks of unchanging tradition but as lived experience in ordinary everyday lives.

So what does this have to do with CHASE, apart from CHASE member Professor Beth Crisp having facilitated the Melbourne colloquium and being one of the editors and contributors to this volume? Actually quite a lot. Although some of the debates, e.g. about notions of secularity and post-secularity, are perhaps most of interest to scholars of religion, this is fundamentally a book about social exclusion and how individuals and groups are excluded or included by law, policy-makers and social institutions. Many of the questions addressed by the various authors and possible ways forward could readily be adapted to other issues which are in the public debate in which ongoing and unchallenged binaries prevent new solutions being properly debated and solutions found which reflect the needs of 21st century society. Further details are available at <https://policy.bristoluniversitypress.co.uk/re-imagining-religion-and-belief>

A good place to raise a family

This program of research is led by CHASE member Dr Fiona Andrews. It aims to explore the experiences of parents raising children in different urban settings in Australia. The research is being undertaken in collaboration with several local government partners.

We are pleased to announce the following paper was published recently:

Andrews, FJ, Warner E & Robson B. High-rise parenting: Experiences of parents raising young children in private, high rise housing in inner city Melbourne. *Cities & Health*. <https://www.tandfonline.com/doi/full/10.1080/23748834.2018.1483711>

We also recently had a piece published in *The Conversation* on the health implications for children being raised in high rise housing:

<https://theconversation.com/more-children-are-living-in-high-rise-apartments-so-designers-should-keep-them-in-mind-100756>

Our research was also presented at the recent Australian Institute for Families conference held in Melbourne in July:

- Living the high life? Parents' experiences of raising children in new high density housing developments in Melbourne

This paper was followed up with a story in the Herald Sun.

Two Master of Public Health students, supervised by Fiona Andrews, have recently completed related theses:

- Caitlin Hall - Designing high density neighbourhoods to promote social health.
- Adriane Heaperman - Experiences of social support for mothers of young children

The thesis abstracts appear below, for further information contact: fiona.andrews@deakin.edu.au

Designing high density neighbourhoods to promote social health

Australia is experiencing an increase in population density, with the number of people living in high-density apartments at an all-time high. As the fastest growing household type in Australia is people living alone, and isolation and loneliness appear to be increasing, designing high-density neighbourhoods that are conducive to social health is an urgent public health challenge. Therefore, this review aimed to investigate how high-density inner-city neighbourhoods could be designed to promote social health in Australia, by reviewing current national and international literature for best practice.

Using a systematic approach, current national and international literature was reviewed using ten databases from both the health and planning fields, and five key search terms. Peer-reviewed articles published between 2008 and 2018 were appraised using four evidence-based tools. Eleven articles were identified that met all inclusion criteria. These were then analysed to identify the four major themes that form this review.

The four key themes linked to promoting social health in high-density neighbourhoods were: 'urban form'; 'high quality and attractive built environments'; 'third places'; and 'green space'. Findings from this review revealed a strong evidence base for the need for social health considerations to be more embedded into current planning policies and guidelines, when considering the development of new high-density neighbourhoods. This is a significant public health concern given the growing number of people living in apartments in Australia. The review makes recommendations in terms of the design of high-density neighbourhoods to promote social health in Australia, and highlights future research and policy considerations. The findings from the review provide evidence for the integration of social health considerations into current planning policies.

Experiences of social support for mothers of young children

Social support is essential to good health, especially during the transition into motherhood, which is recognised as a psychologically vulnerable time. Traditionally this has been provided through neighbourhood-based mother's groups and playgroups. This literature review sought to understand the experiences of social support for mothers of young children to identify what the current generation of new mothers find beneficial.

A systematic approach to searching of the literature was undertaken. National peer reviewed papers published from 2013 onwards that identified social support as a key outcome were included in the review. Fifteen papers were identified as relevant to the review.

Four themes were identified indicating the ways in which face to face groups and online communities support the social connectedness of new mothers. These were: shared experiences; trust and intimacy; community connectedness; and mental wellbeing. The results of the review indicated that mothers of young children continue to value support from other mothers in face to face settings. Group programs enhanced parental self-efficacy and decreased feelings of depression, anxiety and social isolation. Online communities also offered opportunities to connect with other mothers, however, these connections were not found to replace face to face interactions. Social networking sites were preferred by younger mothers over older mothers who preferred accessing information from traditional resources.

The thesis makes recommendations for local Maternal Child Health services establishing online communities as a means of enhancing face to face connections. Furthermore, the review highlights the need to appropriately facilitate face to face and online groups to prevent exclusion, with further research needed in understanding the social needs of migrant mothers and other disadvantaged groups.

Social support and reproductive decision-making

Stef Clark undertook a grounded theory study of the lived experiences of women residing in the Australian Capital Territory (ACT) in relation to social support and reproductive decision-making as a major project for her Master of Public Health. The study was supervised by Professor Ann Taket, and replicates an earlier study carried out in Victoria.

Social support is an integral part of the socio-cultural environment in which women make reproductive decisions

and is positively associated with good health outcomes. Despite its significance as a determinant of health, little is understood about the role of social support in women’s reproductive decision-making. This research fills a gap in the literature by developing a grounded theory to explain the phenomenon of women’s support seeking for reproductive decision-making. A diverse sample of women were interviewed. A constructivist grounded theory approach was used to analyse the transcripts of the interviews and develop a new theory to explain the significance of social support for women’s reproductive decision-making.

The reproductive support phenomenon was characterised by three distinct elements: support expectations, mobilising support, and constructions of social support. These defining elements operated in unison but also opposition, bound to and constrained by social norms and expectations for women, motherhood and reproduction. Within this context, affirmation and control became analogous with a responsive and meaningful support experience.

Women’s perceptions of the efficacy and value of support for reproductive decision-making was influenced by past personal and vicarious experiences of support. These prejudgements not only affected help-seeking behaviours but also the considered ways women mobilised support. Constructions of the support experience were shaped by how women understood themselves and the actions of others, which precipitated future support-seeking behaviours.

The study’s findings provide insight into the impact of social relationships on women’s reproductive behaviours and decision-making. They also underscore the importance of the health sector in supporting women’s reproductive decision-making. The health sector has a responsibility to provide effective and responsive support that extends beyond healthcare and information to encompass affirmation and validation of women’s choices so they are empowered to realise reproductive decisions appropriate to their needs.

A summary of Stef’s findings is available from: ann.taket@deakin.edu.au and papers are in preparation.

Healing fears, conquering challenges: narrative outcomes from a wilderness therapy program

Shane McIver (Deakin University), Elizabeth Senior and Zoe Francis (EACH - Social and Community Health) report on a recently completed study examining the working of the WILD wilderness therapy program.

Despite the number of studies containing evaluations of the effectiveness of wilderness therapy in the extant literature, there is little research regarding exactly how it works.



WILD Program in action

The positive power of nature on the human psyche is clear, certainly as a therapeutic measure Bush Adventure Therapy (BAT), as it is called here in Australia, has a positive effect on mental health. This is well documented in academia, however there is little research regarding participant views that account for how the successful outcomes reported come about. This has long been a significant gap in the research into this type of therapy.

Staff from the EACH Mental Health and EACH Health Promotion Team wanted to explore how BAT works and embarked on a research journey with support from Deakin University, to find out. This qualitative study was an investigation of the narratives of staff and residents at a youth-focused therapeutic community who took part in a wilderness program. The researchers of this study sought to identify what the participants considered meaningful and the most significant change that took place within the participants as a result of taking part in the wilderness program.

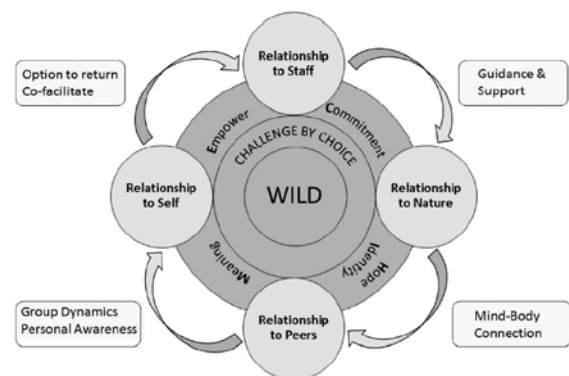


Figure 1. Stage Model of Participant Experiences.

The findings of this research strongly point to the fact that the success of BAT stems from a complex interplay of positive human relationships taking place outdoors. Healing begins with the positive relationship with staff, which flows onto the relationship with peers and then to the relationship with self. This process was developed into a sequential four stage-model (see Figure 1, reproduced from article), with all

four categories contributing to improved mental health in specific ways. It is hoped this model will inform design and practice of future wilderness programs, staff training and directions for future research.

The research produced a journal article in an international peer reviewed mental health journal, an evaluation report and a video. Links below:

Journal Article:

<https://doi.org/10.1080/15401383.2018.1447415>

Evaluation Report: <https://goo.gl/Ee7v1F>

Video: <https://www.youtube.com/watch?v=hONpfcG4Ofg>

For more information about this research, please contact Zoe Francis, Senior Health Promotion Officer at EACH on (03) 9757 6289 or via Zoe.Francis@each.com.au

RECENTLY COMPLETED PHDS

Siobhan Casey: Resilience in early years: understanding pretend play and self-regulation development

Supervisors: Professor Karen Stagnitti, Professor Ann Taket, Professor Andrea Nolan

The aim of this research study was to understand how pretend play skills and the capacity for self-regulation develop in children identified as resilient. The 26 participants of this study were aged 4/5 years and were identified by their pre-school teacher as demonstrating resilience. The participants were living with their families in disadvantaged communities, and were experiencing a time of major transition, from pre-school education through to the second year of compulsory primary education. The participants were aged up to 8 years in the third year of the study.

Pretend play and self-regulation in resilience is significant as there is a need to gain a deeper understanding of the processes of development that occur to support a state of resilience in children during a significant period of transition. In this period of time (4-8 years), a child is experiencing significant brain growth, alongside growth in developmental capacities that form the foundation for future developmental pathways. Pretend play and self-regulation ability are key developmental capacities that support those developmental foundations.

Placed within a combined occupational perspective of health and developmental science framework, a multiple case study, mixed methods research design was adopted. The study highlighted the significance of developing high

level complex pretend play ability, as a key component to building a repertoire of resources to support the ongoing capacity for resilience. Self-regulation also developed alongside pretend play and was both influencing of and influenced by the developmental changes identified. The complex interplay of these two capacities with the patterns of change in the occupational components of Doing, Being, Becoming and Belonging in the educational setting, demonstrated advanced levels of participation for the children, further supporting a state of resilience.

Negar Miri Lavasani: Fine motor and executive function assessment for children with attention-deficit-hyperactivity-disorder

Supervisor: Professor Karen Stagnitti

The aim of this research was to develop a new assessment tool which would provide information about fine motor skills and the executive function skills needed by primary school students with ADHD to perform school-based tasks. The Fine Motor and Executive Function assessment tool (FiM&EF) was developed to answer the question, 'Do the fine motor skill deficits in children with ADHD come from their fine motor problems or is it caused by their executive function problems?'. Knowledge on the influence of executive functioning on fine motor ability in selected age children with ADHD would provide a clearer clinical picture of the fine motor capabilities and executive function for these children.

Prior to the development of the FiM&EF, there was a first assessment tool called the Fine Motor Assessment (FiMA). To examine the content validity of the FiMA, 35 experts in the areas of child psychology, paediatric occupational therapy and occupational therapy in mental health were invited through email and personal contact to give their opinion about the FiMA kit. Nine experts consented to be involved in the initial study. Based on feedback from these experts in the first study, the FiMA was revised with experts highlighting the importance of describing the executive function behaviour of the children with ADHD when undertaking fine motor tasks. Then, a comprehensive review of executive function and assessments in children was carried out by adding an executive function checklist to each of the FiMA items. The assessment tool was therefore re-named the assessment of 'fine motor and executive function' (FiM&EF).

In the second study, the revised assessment tool was trialled with a sample of 20 children with ADHD and 19 typically-developing children. After a review of findings in the second study, further revisions were made to the

FiM&EF assessment tool. The revised FiM&EF comprised eight items and was suitable for assessing children with ADHD of school age as it was faster to administer and the executive function checklist had been revised.

The third study examined the internal consistency, construct validity and concurrent validity of the FiM&EF using a sample of 19 typically-developing children and 18 children with ADHD aged 8 to 12 years. For concurrent validity, the Bruininks-Oseretsky Test of Motor Proficiency–version 2 was chosen as the gold standard for fine motor ability and the Behavioural Assessment of the Dysexecutive Syndrome in Children–Second version (BADS–C) was chosen as the gold standard for executive function. The thesis concludes with a discussion on the advances to knowledge, limitations of the FiM&EF, and future research that ought to be conducted.

Patricia Ong: Reproductive health for the marginalised: the knowledge of young women trafficked into the sex industry in Nepal

Supervisors: Professor David Mellor, Dr Maria Pallotta-Chiarolli

This thesis explored the reproductive health knowledge of one of the most marginalised and disadvantaged groups of young women in Nepal: young women who have been trafficked into the sex industry. It uncovered their perceptions and experiences of their reproductive bodies; their hopes and fears about reproduction and how these issues influenced their reproductive-decision-making. An overarching objective of the research was to develop a set of recommendations for reproductive health education and reproductive health support for young trafficked women for Nepal's Ministry of Education [MoE], Ministry of Health and Population [MoHP], Ministry of Women, Children and Social Welfare [MoWCSW], United Nations Population Fund [UNFPA] and (UNFPA-supported) Youth Peer [Y-PEER] and Anti-Trafficking Non-Government Organisations [NGO] in Nepal.

Designed for the cultural context, the research employed the newly-designed Clay Embodiment Research Method [CERM] comprising three research methods: 1) Critical Ethnographic Participant Observation; 2) A Series of Seven Participatory (Clay Embodiment/Three-Dimensional Body Mapping) Workshops; and 3) A Group Interview using Photoethnography.

The research identified how young trafficked women source knowledge about reproductive health issues. The study further illuminated their modes of learning through the six senses: audition; vision (three-dimensions); vision two-

dimensional somato-sensation; gustation; olfaction and also pain and other sensations. Three dominant themes emerged in relation to the reproductive body: that of the physical body; the emotional body; and the cultural body. Lastly, the study identified key benefits (physical and psychological) of the reproductive health workshops undertaken in the course of this research. This study is timely as the needs of young trafficked people have been identified as a focus for health research in Nepal and the findings complement and contrast the current (limited) Adolescent Sexual and Reproductive Health [ASRH] and women's reproductive health literature. It is also a time of significant upgrading of ASRH health services in Nepal.

The full thesis can be downloaded from:

<http://dro.deakin.edu.au/view/DU:30112365>

Rachel Smith: Parenting programs, play and intergenerational poverty

Supervisor: Professor Karen Stagnitti

The overall aim of the thesis was to determine the impact of play on the filial relationship, in the context of a parenting program designed for parents who experience intergenerational poverty. The parent program was designed based on parent feedback. In the thesis intergenerational poverty was understood to be a lack of social and cultural resources that is passed on through generations. There were three studies conducted for this research. Study 1 collected information about the lived experience of parenting for parents who experience intergenerational poverty. Parents shared views about parenting, play and parenting programs and insights shed considerable light on why parents were unresponsive and did not engage in parenting programs. The findings from Study 1 provided new information for the discussion on disengaged parents.

The researcher used the findings from Study 1 to modify the only Australian play based parenting course available at the time Parent Learn to Play (Stagnitti, 2014) and created Parents Play, a parenting course for parents who experience intergenerational poverty. In Study 2, Parents Play was trialled with parents and children who experience intergenerational poverty. Parents Play was found to be effective for engaging parents who experience intergenerational poverty in a parent program as all parents attended for its entire duration. There were clinically significant shifts in the parent-child relationship with Reliable Change Index scores of 5.24, 5.99 and 8.23. Parents used Photovoice to communicate skills, feelings and understandings about how they were using play skills with

their children. Parents used the play skill ‘object substitution’ more than any other play skill and communicated more about their feelings as a parent than the feelings of their child. Parent’s understanding of play was the most commonly reported concept within the theme of ‘Understandings’. Findings from post interviews with parents provided insights into how parents felt about Parents Play. Themes included benefits of Parents Play, my new play skills, my feelings on play, changes in the relationship and how Parents Play could be modified. Parents expressed that Parents Play was suitable for their needs. The perspectives parents shared provided the researcher with confirmation of the effectiveness of the principles used to engage parents who experience intergenerational poverty. These principles were used to inform a training module for Parents Play and were titled ‘Principles of Parent Engagement’.

The final study in the thesis (Study 3) tested the capacity of Parents Play to be implemented into existing health services and community organisations in Australia and Singapore by staff employed in community based health services. Twenty-nine health professionals were trained in Parents Play and 12 consented to be in the study. Study 3 yielded new findings and valuable information for how to engage parents who experience intergenerational poverty and the implementation barriers and enablers that exist for health organisations. Findings from Study 3 showed that the parent-child relationship was significantly and positively impacted by Parents Play (Cohen’s d range was 0.45-0.99). Health professionals who implemented Parents Play within their services reported a positive change in the relationship between themselves and the parents. When Study 3 had concluded, 2 organisations embedded Parents Play into their organisation as an ongoing service. Throughout the roll out of Parents Play, barriers were identified such as the preparation of staff, staff attitudes toward engaging parents and venue suitability. This thesis discusses parenting and play for parents who experience intergenerational poverty and parent program implementation in Australia.

CHASE NEWS

CHASE PhDs

A list of CHASE PhDs and links to full theses can now be found on a new page on the CHASE website, <http://chase-deakin.org.au/phds/>

Staff promotions

Our congratulations go to three members of CHASE staff who each received a promotion to Senior Lecturer in the recent 2018 promotion round:

- Dr Kate Anderson
- Dr Kevin Murfitt
- Dr Kim Robinson

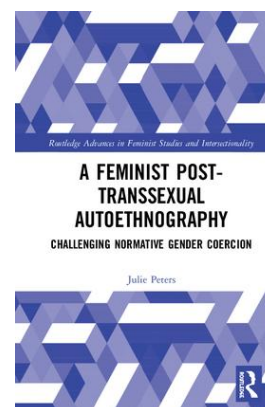
New book by Julie Peters

Gender as a social class along with its concomitant heteronormative gender coercion seem to be intransigent across time and cultures. But across these cultures we also see a degree of non-conforming behaviour which very often carries significant multi-dimensions of stigma and risk. And because the exception proves the rule, an understanding of gender non-conformity sheds light on the normative operation of gender in society.

This research monograph attempts to demythologise trans and gender diversity by conducting an in-depth critical analysis of the life choices of the autoethnographic subject (the author), who was so uncomfortable with their culturally allocated masculinity that they chose to live an apparently normal female life. The research is post-transsexual in that the subject forgoes passing in their affirmed gender to ensure the integrity of the data.

The major critical themes are Feminist and Intersectional, primarily the Sociology of Gender, the Sociology of Trans and Gender Diversity as well as being intersectional with Health Promotion and Education, Human Rights, Social Justice and Equity, the Social and Cultural Anthropology of Gender, embodiment, as well as power differentials based on gender, class, nationality, location, temporality, and sexuality and gender non/conformity.

<https://www.routledge.com/A-Feminist-Post-transsexual-Autoethnography-Challenging-Normative-Gender/Peters/p/book/9780815380757>





Associate Professor Julia Shelley

We are sad to announce the death of Associate Professor Julia Shelley, passionate feminist and social epidemiologist, who served as Deputy Director for CHASE up until the time of her retirement from the university on health grounds.

Julia passed on in the early hours of Thursday 19 July 2018. She will be greatly missed and very fondly remembered.

At some time in the future a group of us will be organising something as a more permanent memorial to Julia, please contact Ann Taket if you'd like to be involved. We are aiming that this will be something that reflects Julia's interests outside of work, in fields like arts, craft or design.

Director: Professor Ann Taket

Deputy Director: Dr Melissa Graham

Other staff

Dr Kate Anderson
Dr Fiona Andrews
Professor Susan Balandin
Teresa Capetola
Professor Beth Crisp
Dr Matthew Dunn
Dr Sarah Epstein
Dr Sophie Goldingay
Associate Professor Lisa Hanna
Natalie Hakman
Dr Claire Henderson-Wilson
Associate Professor Liz Hoban
Norah Hosken
Greer Lamaro Haintz

Dr Karen Lane
Dr Fiona McKay
Dr Hayley McKenzie
Dr Kevin Murfitt
Dr Tricia Ong
Dr Maria Pallotta-Chiarolli
Associate Professor Genevieve Pepin
Dr Kim Robinson
Professor Karen Stagnitti
Sevi Vassos
Dr Elyse Warner
Joanne Watson
Associate Professor Erin Wilson
Dr Linda Wilson

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