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From the manager

ALLISON VAUTIN – QUT HEALTH CLINICS

We have seen expansive growth in the Health Clinics in recent months across a range of services including eating disorders, exercise physiology, family mediation, nutrition and dietetics, optometry, podiatry and psychology and counselling. I would like to particularly extend a warm welcome to our new family mediation service which officially launched in May. The service provides low cost mediation to parents who need assistance making arrangements for their children after separation.

I would like to thank our academic staff and clinic supervisors for their continued focus on teaching and learning for our students in a safe real world environment. The Health Clinics provides students with a richer educational experience beyond the lecture theatre and textbook. Combining academic strength with practical engagement in the clinic is a powerful start to any healthcare career.

The clinic values our patients returning and recommending our services to their friends and families. In 2014 the Health Clinics delivered over 30 000 occasions of service and just under 90 000 clinical placement hours were undertaken by students in the clinic. This wouldn’t be possible without our patients and I would like to personally thank you all for your commitment and patience with our students.

Just a friendly reminder that our services are open to the public and free parking is available in the building for clinic appointments. I look forward to seeing you in the clinic soon.

Allison
QUT Optometry students and staff deliver vision screenings to children in the community

In 2014 QUT Optometry students and academic staff delivered more than 700 in-school vision screenings to primary school children in Brisbane.

Good vision is imperative to a child’s education and learning ability and can also influence physical development such as fine and gross motor skills.

Children require both visual clarity and visual efficiency (eye teaming and accurate eye movements) for success in schoolwork and sport.

The visual system is not fully formed in young children and equal input from both eyes is necessary for the brain’s vision centres to develop normally.

QUT Health Clinics Optometrist Hamish McNeill said the main purpose of vision screenings is to identify children who have or are at risk of developing amblyopia more commonly known as lazy eye, which can lead to permanent visual impairment unless treated in early childhood.

“Early intervention and correction as a result of detecting this condition, betters the chance for a child to obtain maximal vision and reduces the potential long-term effects on their learning ability,” he said.

“Other conditions which can be detected within the screening include strabismus (turned eye), binocular vision (eye coordination) problems, long and short-sightedness, astigmatism and eye health abnormalities such as cataracts or glaucoma.”

Approximately one in every four children may have an undiagnosed vision problem affecting their learning to some degree.

It is important to note that not all children will exhibit symptoms; they may have an underlying vision problem that will become more apparent as they get older and their reading demand increases.

Mr McNeill said issues with either visual clarity or efficiency can cause blurred vision, headaches, slower learning such as reading rate, a poor attention span and behaviours of avoidance. Children with tracking problems can have difficulty concentrating or comprehending and will often skip words and lose their place whilst reading.

“Signs of a more obvious vision-based problem may include squinting, an eye that turns in or out when tired, poor hand-eye coordination or regular turning or tilting of the head,” Mr McNeill said.

“The purpose of a vision screening is to identify those children who fall below expected levels for each of these tested parameters.

“If a child does not meet expectations within the screening it is strongly advised they have a consultation with an optometrist for a full comprehensive eye examination.”

In contrast to a vision screening, a comprehensive eye examination is a more thorough investigation of ocular health and the visual system and may involve the use of pupil-dilating eye drops.

This full examination should provide a specific diagnosis of the visual problem and its severity, and will allow treatment and management recommendations to be made such as glasses, eye exercises or referral to an ophthalmologist (eye surgeon).

Please contact the QUT Health Clinics on 07 3138 9777 for further information on in-school vision screenings or to book your child an appointment for a comprehensive eye examination at the QUT Optometry Clinic.
NEW Myopia Control Service

The QUT Myopia Control Service aims to identify patients with a high risk of progressively worsening short-sightedness, and implement treatment options to slow down or stop short-sightedness development. Short-sightedness is otherwise known as 'myopia', and is the condition in which patients cannot see distance objects clearly. Myopia often begins to develop in children and teenagers, and if left to progress to high levels, can lead to blinding eye diseases. Certain factors increase the risk of myopia development, such as family history, ethnicity, intense and sustained periods of work, and decreased levels of outdoor activity. While myopia cannot be cured, treatment options exist to slow or stop it from getting worse. Research shows that these treatments are most effective when instigated before adulthood.

There are multiple treatment options available within the Myopia Control Service, including specialty contact lenses and spectacles, orthokeratology, topical medications and recommendations for lifestyle interventions. All consultations are performed by Master of Optometry students under the supervision of a qualified optometrist.

**Atropine Eye Drops**

Atropine drops give one of the highest levels of myopia control of all treatments available, and are a popular option in East Asian countries. Recent studies show that much lower concentrations of these eye drops can be used safely to obtain a good level of control, without the side effects of higher doses. Drops are used once daily in conjunction with spectacles or contact lenses.

**Orthokeratology (OrthoK)**

OrthoK is a popular option as it allows patients to go without their spectacles or contact lenses during the day, and provides good levels of myopia control. Rigid contact lenses are worn at night during sleep which mould the shape of the eye to counteract any myopia. Lenses are removed in the morning, and patients experience clear vision throughout the day without the use of spectacles or contact lenses. This option is not just restricted to those who need myopia control, but can also be used as an alternative to daily contact lenses or spectacles.

**Contact Lenses**

Both daily and monthly disposable lenses are available that provide some myopia control compared with regular contact lenses. Evidence suggests that young children can wear contact lenses safely, while improving their quality of life through perceived appearance and increased participation in activities. Soft disposable contact lenses are a popular option for myopic children who require a moderate level of myopia control.

**Spectacles**

The Optometry Clinic provides spectacles, at a low cost to the community, from our range of designer frames available. There is some evidence that certain special spectacle lens designs can provide a small amount of myopia control. Spectacles are an option for children who have only mild or slowly progressing myopia, or who aren’t suitable for other treatment options.

**Lifestyle Advice**

A detailed analysis of any lifestyle factors which may be contributing to myopia progression is undertaken, so that modifications can be made where possible, (i.e. increasing levels of outdoor activity, decreasing levels of hand held device or computer use).
Q&A with Emily Woodman

Emily graduated from QUT in 2009 with First Class Honours and a University Medal. She then worked in private practice in inner-city Brisbane and developed a particular interest in the therapeutic management of eye disease. Since 2010 Emily has been involved in the clinical supervision of QUT Optometry students in the areas of primary care, contact lenses, and therapeutics; and contributes to several undergraduate units including ocular pharmacology, binocular vision and contact lens studies. She has completed her PhD at QUT which examined the link between near work and myopia development in a university population. Her research has been published in international peer reviewed journals such as Vision Research, Optometry and Vision Science, and the British Journal of Ophthalmology.

Q: Why do you think Orthok is suitable for children and adolescents?

A: Orthokeratology is an excellent solution for myopic children and adolescents since it allows them to go without spectacles or contact lenses during the day, improving self-confidence and participation in physical activities. The biggest benefit for this age group however is the myopia control effect the lenses provide, slowing progression rates by approximately 50%. Research shows that with proper education on care of the lenses, children as young as eight years old can successfully use orthok without an increased risk of complications.

Q: Is Orthok more practical than traditional preventative measures to slow the progression of Myopia?

A: In the past, optometrists’ myopia control options were limited to bifocal or progressive spectacle lenses, which at best had small effects for a limited number of patients. Orthokeratology not only provides a much greater treatment effect than bifocals or progressive spectacles, but patients generally find orthok much more cosmetically acceptable. Another treatment option which has become more practical in recent times is Atropine eye drops, which traditionally has been associated with increased glare sensitivity and impaired focusing ability for close tasks. Within the last few years it has been discovered that Atropine can be diluted 100 times and still have similar treatment effects as the full strength drops, but without the side effects previously associated with this treatment option.

Q: In regards to lifestyle advice, what are some common recommendations for patients with Myopia?

A: While a lot of earlier studies focused on the impact of near work activities like reading and computer use, more recent research shows that it may not only be the duration or intensity of near work that is the issue, but rather also the lack of outdoor activity that accompanies it. Therefore most of our lifestyle advice now focuses on recommending kids get outdoors more, such as walking the dog, or spending their lunch breaks outside rather than inside. In children who spend a lot of time on near tasks we recommend taking a visual break every 30 minutes; make sure you have good lighting; and try not to hold books, smart phones or tablets too close.

Q: Is there anything unique about the Optometry Clinic’s treatment and management of Myopia?

A: The QUT Optometry Clinic has access to a wide range of specialist testing equipment that is often impractical or too expensive for regular optometry practices to carry, which means patients can have all their testing done in the one place without need for further referral. Since our clinic is run by optometrists who specialise in myopia research, we offer the latest treatment options available including orthokeratology, specialty soft contact lenses and spectacle designs and low dose Atropine eye drops.

Q: What were your findings in your PhD in relation to Myopia?

A: My PhD investigated the change in the length of the eye when focusing for close work, and how this short term change may lead to a more permanent structural change over time with prolonged near tasks. We found that a number of the short-term structural changes within the eye during near focusing are consistent with the structural changes associated with myopic eyes, providing a potential link between near work and myopia development. Dr Scott Read, my PhD supervisor, has also just completed a long term study of eye growth in Brisbane children that shows that myopic children have significantly less outdoor light exposure than other children.
WIDENING PARTICIPATION AND COMMUNITY OUTREACH

Widening Participation

At the beginning of 2015, student volunteers from the Faculty of Health’s Exercise Physiology, Exercise Science, and the School of Podiatry travelled to Kingaroy as part of ‘Project ScHEMe’ in collaboration with Science, Engineering and Mathematics.

This year the interactive event was spread over two days with school students participating from both Kingaroy SHS and St Marys SHS. The event is a wonderful opportunity to present course and career information to the students in the remote areas that do not have access to the Explore Uni days provided as part of the Widening Participation program.

Community Outreach

The staff and students from Podiatry and Optometry have continued to perform screenings as part of their ongoing commitment to the Health Check Days at the Murri School and Acacia Ridge.

Already this year, screenings have been completed for over 70 students from prep to year six, with more dates scheduled in May to complete checks on the remaining primary school students.

On top of these health check days Optometry students have been busy travelling to Gympie Hospital to perform vision screenings in the community. Optometry Clinic Coordinator (Acting), Damien Fisher said the purpose of the trip was to provide primary eye care services and supply of prescription spectacles to the Indigenous population in Gympie and surrounding areas.

“Consultations were led by students and carried out under the supervision of an optometrist,” he said.

“The students were able to screen twelve patients in one day with a range of conditions from complex cases needing urgent attention to spectacle repair.”

Students and staff travel with one optometric chair, stand with slit lamp, projector chart, portable retinal camera and other diagnostic equipment.

“Previously we consulted out of the old mental health wing, now it’s a fully refurbished set-up in the specialist outpatient department within the hospital,” he said.

“It’s a fantastic learning experience for the students and QUT Optometry students and staff look forward to visiting regularly.”

QUT students and staff with equipment donated from QUT to the Gympie Hospital
Robert Mullins

Clinic Director – QUT Exercise Physiology Clinic and QUT Nutrition and Dietetics Clinic

After completing his high school studies at Brisbane Grammar School, Robbie began his tertiary study at the University of Queensland (UQ) and enrolled in the Bachelor of Applied Science in Human Movement Studies. Following successful completion of his undergraduate degree Robbie became an Accredited Exercise Physiologist in 2003. Robbie has also completed a Master of Applied Science (Clinical Exercise Science) at UQ.

Robbie began his career as a tennis strength and conditioning coach for the Queensland Academy of Sport (QAS) and was also employed as an advanced tennis coach for Tennis Queensland. Following his career as an elite tennis coach Robbie was appointed as the Heart Failure Rehabilitation Coordinator at the Royal Brisbane and Women’s Hospital (RBWH) – Internal Medicine Department for eight years. The primary purpose of this role was to run an evidence based exercise education rehabilitation program to prevent readmission to hospital and improve patient quality of life. He was part of a multidisciplinary team working alongside nurses, physios, dietitians and pharmacists. Robbie also worked in cardiac investigations (diagnostic cardiovascular testing to inform treatment and monitor treatment progress within the Cardiology Department) throughout his employment at the RBWH.

On top of his busy work life a notable achievement of Robbie’s was his position of Chairman for the Exercise Physiology profession in Queensland Health in 2011 and 2012.

Robbie was successful in attaining a lecturing position at QUT in 2013 for the School of Exercise and Nutrition Science and in 2015 was appointed to the position of School of Exercise and Nutrition Science, Director for the Nutrition and Dietetics and Exercise Physiology Clinics within the QUT Health Clinics. Within his role he manages clinical staff and students, organises exercise physiology clinic schedules and developed and manages cardiac vascular disease specialty clinics. The Exercise Physiology Clinic receives direct referrals from the RBWH into their specialty cardiac rehabilitation, heart failure, pulmonary and diabetes clinics which Robbie supervises and manages, both with and without student involvement. He also teaches the cardio respiratory and metabolic disorders course to third year students and the clinical exercise for cardio respiratory and metabolic disorders course to fourth year students. Robbie is also the practicum supervisor for all final year external placements in cardio respiratory and metabolic disorders at both government and non-government organisations.

In addition to his university commitments Robbie is an associate investigator on the National Health and Medical Research Council (NHMRC) funded multi-centre research trial: on ‘EJECTION-HF’ (exercise joins education: combined therapy to improve outcomes in newly discharged heart failure patients). He is also an expert content writer and reviewer for the HEARTOnline website, hosted by the Heart Foundation and is an examiner for Exercise and Sports Science Australia (ESSA) international applicants’ exam for cardio vascular disease.

In his spare time Robbie is currently completing a graduate certificate in academic practice at QUT and is in training for the 2016 Sunshine Coast Ironman 70.3 World Championships. Having represented Australia as a triathlete in the ITU World Championships for Olympic distance in 2007, 2010 and 2013, Robbie is certainly in a position to succeed.

The Exercise Physiology Clinic has seen great growth and Robbie is hoping to maintain and consolidate its development. Under his supervision the clinic is looking to improve its interdisciplinary collaboration, particularly with the successful Nutrition and Dietetics Clinic, and the newly formed partnership with QUT Health Clinics Eating Disorders Clinic. The Parkinson’s Disease service within the clinic will continue to operate and a new lower back pain clinic will begin in 2015. They are also hoping to further strengthen the clinic’s relationships with the RBWH and are looking into more official pathways for diabetic patients in conjunction with the Nutrition and Dietetics Clinic into the future.
The Exercise Physiology Clinic has undergone some recent changes in relation to its services, schedules and fees. For all initial consultations to see an Exercise Physiologist or an exercise physiology student, patients now require a letter of referral from an allied health specialist or a medical practitioner.

Services within the clinic now include:

- Screening, assessing and applying clinical reasoning to ensure the safety and appropriateness of exercise and physical activity interventions for each individual
- Assessing movement capacity in people of all ages and levels of health, well-being or fitness
- Development of safe, effective individualised exercise interventions
- Provision of health education, advice and support to enhance health and well-being
- Provision of clinical exercise prescription, for those at risk of developing or those with existing chronic and complex medical conditions and injuries
- Provision of exercise-based rehabilitation and advice for patients following the acute stage of injury, surgical intervention, or during recovery to restore functional capacity and well-being.

Conditions of patients attending the clinic are broad and include:

- Cardiovascular (heart attack, heart failure and hypertension)
- Respiratory (asthma and chronic obstructive pulmonary disease)
- Metabolic (diabetes type 1 and 2, weight and dyslipidaemia)
- Musculoskeletal (arthritis, osteoporosis, low back pain, muscle and joint injury, pre and post-surgery)
- Neurologic / Neuromuscular (Parkinson’s disease and stroke)
- Other (cancer care, mental health and frailty).

There are a number of new and ongoing speciality clinics such as cardiac rehabilitation, Parkinson’s disease, chronic lower back pain, diabetes exercise classes and a new collaboration with the eating disorders clinic team. Below is the current group exercise class timetable for a range of conditions.

QUT Exercise Physiology Class Timetable

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<tr>
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<th>Monday</th>
<th>Tuesday</th>
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<tr>
<td>8am</td>
<td>Supervised Group Exercise Class</td>
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<td>12 noon</td>
<td>Registered Program Chronic Back Pain</td>
<td>Registered Program Parkinson’s</td>
<td>Registered Program Cardiac Rehab</td>
<td></td>
<td>Registered Program Chronic Back Pain</td>
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<tr>
<td>1pm</td>
<td>Registered Program Osteoarthritis</td>
<td>Registered Program Heart Lung Diabetes</td>
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<td></td>
<td>Registered Program Osteoarthritis</td>
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<tr>
<td>2pm</td>
<td>Supervised Group Exercise Class</td>
<td>Supervised Group Exercise Class</td>
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<td>Supervised Group Exercise Class</td>
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<td>3pm</td>
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<td></td>
<td>Supervised Group Stretching Class</td>
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For any general enquiries regarding the exercise physiology service please phone reception on 07 3138 9777.
For health practitioners and referrals please email healthclinics.ex@qut.edu.au
Mystery of Snacking

Developed by Hazel Cuizon and Patty Yang

Snacking is a very important part of a healthy eating plan. While not always feasible or attainable, snacks can provide the extra nutrients and fuel we may need to help us carry out our daily activities. Healthy snacks are also a good way to achieve sustainable healthy eating patterns, particularly in times of long periods between meals and increased appetite. It is recommended that when choosing to have snacks that you spread them out over the day between meals, for example – between breakfast and lunch and between lunch and dinner.

Snacking can also help to regulate our metabolism and normalize blood sugar levels which are both vital for maintaining weight and energy balance. They also assist in boosting mood and brain activity which keep us working efficiently.

It is important to carefully consider the types of food you consume as a snack as many are rich in energy and nutrient poor such as chips, lollies, chocolate and donuts. Being mindful when eating snacks is also important as distractions such as television, sitting at the desk or driving can lead us to make poor choices about the types and amount of foods we eat. The trick is to keep the portions small and making sure they contain as many macronutrients (protein, carbohydrate, good fat) and micronutrients (vitamins and minerals) as possible.

Recommended foods to snack on include:

- Fruits, vegetables sticks (carrot, celery, cucumber, snow pea, capsicum etc)
- Nuts and seeds (a small handful of almond, pistachio, cashew etc)
- Low-fat dairy products (low-fat yoghurt, low-fat cottage cheese, low-fat milk etc)
- Wholegrains breads and cereal (fibre bars, raisin toasts, wholegrain crackers etc)
- Legumes (baked beans, lentil salad etc)

Healthy Snack Recipes

English Muffin with Cottage Cheese and Strawberries

Spread ½ toasted wholemeal English muffin with 1 tablespoons low-fat cottage cheese. Top with 1/2 cup sliced strawberries/any fruit. Drizzle with 1 teaspoon honey or agave nectar.

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<td>630</td>
<td>20</td>
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<td>2</td>
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Brekkie Cup

Put 1/4 cup muesli in a cup and put 100g low fat natural yoghurt on the top. Top with 1/4 cup any fruit, drizzle with a small amount of honey and sprinkle some desiccated coconut to finish.

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<th>Protein (g)</th>
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<tr>
<td>800</td>
<td>32</td>
<td>15</td>
<td>8</td>
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“These can become satisfying foods to curb appetite, provide fuel and nutrients.”
Free Health Check Day for Kids

The QUT Health Clinics will be conducting health checks for children at QUT Caboolture Campus at no cost.

Students from QUT Faculty of Health will be providing:

- foot checks
- vision screenings
- dietary and lunchbox advice
- education and development assessments
- fun hands on activities for kids.

Manager of the QUT Health Clinics, Allison Vautin said they are excited about the upcoming event at QUT Caboolture Campus, delivering comprehensive health checks to children in the Caboolture community.

“The event is unique in its ‘one stop shop approach’ to early detection and provides a wonderful opportunity for the university’s students to deliver needs focused healthcare as a team to the community,” she said.

This comprehensive screening event is on Wednesday 1 July 2015 from 9:30am to 2:30pm at QUT Caboolture Campus.

To book your child in please phone the clinic on 07 3138 7568 (bookings are essential).

Ingrown nails?

Don’t put up with persistent and painful ingrown nails. The QUT Podiatry Clinic is offering ingrown nail consultation and treatment at no charge for a limited time. All consultations and treatments are fully supervised by qualified podiatrists.

NO REFERRAL NECESSARY – NEW PATIENTS WELCOME – FREE PARKING

Call 3138 9777 for more information or to arrange an appointment.
www.healthclinics.qut.edu.au
44 Musk Ave Kelvin Grove
Parents seek school readiness tests for children

Debra Nowland

Do children have the self-help, social-emotional and cognitive skills to cope with the school year ahead?

These questions are just some of the back-to-school issues being addressed by a team of clinicians at QUT’s Kelvin Grove campus in Brisbane.

Each year, QUT Health Clinics has offered free screening health tests for children aged between four and 13 years.

The tests are conducted by optometrists, podiatrists, dieticians and psychologists.

QUT clinical psychologist Dr Bethany Mackay said more and more parents had sought school readiness tests to provide “peace of mind” before the start of a busy school year.

She said there had been strong interest for psychological assessments at the service.

QUT Optometrist Damien Fisher said the vision screening tests may find potential problems that may otherwise go unnoticed at school.

He said the tests screen for problems such as squinting, headaches, dizziness and difficulty concentrating.

He also said the vision screening can pick up minor issues such as refractive errors or more serious problems such as ocular disease.

“At this age, from a vision aspect, there is a lot that is required when you look at reading and computer-based learning so children’s eyes need to be performing at a high rate,” Mr Fisher said.

“The prognosis for children who are picked up during the screening process is quite good.

“Any students that are lacking or falling behind tend to catch up quite well, so if you can identify a possible problem at an earlier age then the better the prognosis; conversely the later the diagnosis then the treatment needs to be more ongoing.”

The health checklists for children also include foot checks by trained podiatrists who can provide orthotic advice while nutritionists will also be on hand for children with allergies or intolerances and to provide handy ideas for healthy lunch boxes.
In 2014 the QUT Psychology and Counselling Clinic began delivering the Resourceful Adolescent Program (RAP) to build resilience and promote positive mental health among teenagers.

The program ran over six consecutive weeks with small groups of adolescents (years 7 – 10) and integrates successful approaches to improve coping skills and build resilience. Due to its success the Psychology and Counselling Clinic will continue to provide the program to clients in 2015.

QUT Psychology and Counselling Clinic Coordinator, Dr Bethany Mackay, said there is a high rate of prevalence of depression in young people.

“We know that for approximately 60% of people who experience a single depressive episode are expected to have further episodes, which is what we call relapse,” she said.

“If we can build resilience in young people that may help them to prevent developing symptoms of depression as they move into later adolescence and early adulthood.”

“Between 21% and 32% of adolescents report mild to severe symptoms of depression and between 4% and 8% of adolescents have a clinical diagnosis of depression. Adolescent depression can also be a risk factor for other adolescent issues such as substance abuse, antisocial behaviour and suicide.

“That’s why RAP was developed as a program to promote positive mental health and prevent teenage depression and associated difficulties with an aim to increase the psychological resilience and resourcefulness of young people.”

There are a number of benefits to early intervention, which is the process of providing intervention and support services for a person early in the development of an issue.

It can be helpful to provide support to young people who might be more at risk for developing issues later on before those issues arise. This helps builds upon a person’s capacity to deal with difficult future situations or stressors. It can help promote a person’s wellbeing while the focus isn’t on ‘treating a problem’, rather helping develop and equip the young person with skills to cope.

People who participate in group programs such as RAP often talk about the benefits of hearing shared experiences of other group members. Participants often communicate the benefits of meeting new people and knowing that people the same age as them might have the similar problems.

The program is suitable for young people in years 7 to 10 who are looking for opportunities to build their resilience to promote their ability to cope when faced with difficult situations. It is ideal for young people looking for coping strategies, problem solving ideas and relaxation tools.

The cost of the program is $70 (including workbook) and afternoon tea is provided each week to participants. To register your interest please contact the clinic on 07 3138 0999.

If you have concerns that your child may be depressed you can contact the QUT Health Clinics, Psychology and Counselling Clinic on 3138 0999 or consult with your GP. Other useful services are your local Headspace (www.headspace.org.au), Beyond Blue (www.beyondblue.org.au or 1300 22 4636) and Kids Helpline (1800 55 1800), 24 hours a day/ seven days a week.
Family Mediation Service

Sandra Hutchinson

QUT has launched the first university-run family mediation service in Australia to help separating couples make sound decisions for their children.

The new QUT Family Mediation Service, being run in Brisbane by QUT Health Clinics, offers an affordable solution to the costly court battles and parental quarrels where the child’s best interests often get forgotten in the fight.

QUT Family Dispute Resolution Practitioner Jennifer Felton said developing a parenting plan with the help of a qualified mediator could remove “parent against parent” conflict and focus on providing a positive future for the child.

“Mediation and family dispute resolution is really about helping parents to make good choices for what is best for their child,” Ms Felton said.

“This service is about trying to reduce the conflict and have parents stay in their child’s life and stay in a way where it doesn’t cause a negative impact on the child or the parents.”

Ms Felton said the Family Law Act required in most cases, parents to attempt to resolve their differences through mediation before making an application to the court.

“Mediation and family dispute resolution is increasingly used in Australia, and offers a much more beneficial way of parents making decisions than using the legal system to argue against each other,” she said.

“Going through the Family Court process is extremely expensive, not only financially but also emotionally and relationally. Court costs can quickly run into the tens of thousands of dollars, and as importantly, the relationship between the parents is usually destroyed.

“Family Mediation, on the other hand, can be done in a quick timeframe, at a more affordable cost, and allows people to move on with their lives and give stability to their child.

“It is about having an objective and neutral person such as a Family Dispute Resolution Practitioner sit down with parents and help them to make decisions for their child and to do that in a very safe and controlled environment, so that whatever is left of the relationship isn’t damaged by a stressful, adversarial court process.”

Ms Felton said research had shown the effect of a drawn out separation and entrenched conflict could have a negative impact on the child, putting them at risk of developing difficulties into the future.

“With an agreed parenting plan the child can see that their parents can work together, and this is beneficial for all involved,” Ms Felton said.

“Parents need to go on having a working relationship into the future and to be able to continue to make some important decisions about their child in their roles as parents even though they stop being partners together.

“Mediation is about creating agreements where the child is the focus but agreements that the parents own and can actually carry out.”

QUT’s Family Mediation Service is supervised by a qualified Registered Family Dispute Resolution Practitioner and assists in the training of nationally accredited mediators to become Family Dispute Resolution Practitioners.

The service is available for separated parents. It is suitable for parents who have already begun court action. The child does not attend mediation and parents are not required to engage lawyers, although lawyers may attend with the agreement of the parents.

To find out more contact the QUT Health Clinics on 3138 0999.

QUT Health Clinics is located at 44 Musk Ave, Kelvin Grove.
When parents are separating it can be a very stressful time for everyone involved. Family mediation helps parents make decisions together which will be in the best interest of their children. They are assisted in their discussions by a mediator, who is an impartial third person.

This service is only for matters that relate to children. Discussions will focus on the following issues:

- wellbeing of parents and children
- maintaining relationships with both parents
- where the children are going to live
- decision making and communicating as parents
- schooling arrangements
- holiday and celebratory events
- extended family members’ roles in the children’s lives.

Cost
Parents pay $100 each (GST inclusive). This cost covers an intake process which assesses the matter is suitable for mediation, the mediation, a copy of any agreement reached and the issuing of an s601 certificate.

Contact
Phone 07 3138 0999
44 Musk Avenue, Kelvin Grove QLD 4059
healthclinics.qut.edu.au

Under the Family Law Act most couples who need assistance with parenting arrangements after separation must attend family mediation before they can make an application in court.
Try a little self-kindness: help for stressed-out new mums

It’s 3am, the baby’s been crying for hours, your partner’s on night shift, no one’s going to appreciate a phone call at this hour for help.

You feel you could lose your mind: “This wouldn’t happen to those mothers on YouTube with their no-fail ways to get baby to sleep”; “the playgroup mothers’ babies sleep through the night”.

On it goes as you beat yourself up about your mothering...

“That’s exactly when you should give yourself a dose of self-compassion,” says QUT doctoral researcher Nicole Flanagan from QUT’s School of Psychology and Counselling who has developed a workshop series for new mothers.

She is seeking women who have given birth in the past 12 months to trial the four one-hour workshops and learn how to apply kindness to themselves to improve their health and wellbeing without medication.

“Self-kindness means treating yourself with kindness and respect, especially during tough times. In this situation, the mum could say to herself ‘this is a moment of suffering and I will get through this’.

“She should stop comparing herself to other mothers or ‘supermums’ in the media and accept she is doing the best she can.

“With self-kindness you remind yourself that everyone has challenging times and that they get through it.”

Ms Flanagan said self-kindness was a burgeoning field of research with evidence-based techniques for promoting positive mental health.

“Practising self-kindness in stressful situations has been found to reduce release of the stress hormone cortisol and increase the level of the ‘feel-good’ one, oxytocin,” she said.

“This is not surprising because it takes energy to put yourself down and feel miserable. People have reported finding strength when they needed it by being self-compassionate.

“Research evidence shows that self-kindness actually spurs you on to greater things, rather than being demotivating. You look at your achievements instead of criticising or comparing yourself to others.”

Ms Flanagan said although there had been a lot of research on enhancing wellbeing and self-kindness, little had been done on new mothers.

“We all know that the first year of a baby’s life is particularly challenging for parents and the changes inherent in pregnancy, childbirth and motherhood are profound, especially for perfectionistic or self-critical women.

“Most mothers are loathe to take medications during this time, and are much more likely to seek support if it is brief and non-pharmacological.

“Despite the large body of evidence clearly showing the benefits of self-kindness, little research exploring its impact has been done on new mothers.”

Ms Flanagan is looking for women who have had a child in the past 12 months to trial the new four, small-group workshop series that teach self-kindness techniques held at QUT’s Psychology and Counselling Clinic on the Kelvin Grove Campus. Participants are welcome to bring their child along to the workshops, and free parking is available. To take part in the trial, contact Ms Flanagan on n.flanagan@connect.qut.edu.au

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How does diabetes affect your feet?

Charcot Foot

Diabetes is a long-term condition that requires constant management. It can cause foot problems because of damage to blood supply and nerves, particularly in your feet. The altered feeling in your feet is called ‘peripheral neuropathy’ and reduced blood supply in your feet is called ischaemia.

Charcot Foot is also called neuroarthropathy and occurs in the feet of people with ‘peripheral neuropathy’ (lack of sensation). The bones and joints of the foot become disorganised, have multiple fractures and appear as if they have a severe form of arthritis.

It often doesn't take much of an injury to start an acute episode; this could be as simple as a minor twist. Due to the neuropathy there will be a dulling of the pain. The most noticeable change is a difference in temperature, swelling or colour between your two feet.

It is very important should you notice a change in discomfort, swelling and heat in your foot to seek medical attention immediately.

The acute phase

In the acute phase the foot is very vulnerable to permanent damage. It is important to seek attention from a health practitioner who understands Charcot Foot or a specialised high risk foot service. In the early stages, it is important to closely review temperature changes in the affected foot. This is likely to mean a weekly review for an extended period of time.

You will need to have the load reduced from your feet through use of a moon boot or similar type of device while the joints are actively inflamed. Without this level of support your foot can be permanently damaged beyond repair.

The chronic phase

When the acute phase of the Charcot Foot condition has settled you will be able to gradually weight-bear on the foot again. X-rays will be used to monitor your condition. At this stage of repair it is critical to stay in contact with your high risk foot team and follow instructions carefully.

Even if you have had an acute episode of Charcot Foot before, it is likely that your foot will have changed shape and you will require custom made orthoses and shoes. Charcot Foot may affect either one of your feet. It is possible, but unlikely to affect both of your feet at the same time. It's also possible that the condition can return and flare up to another acute episode. You will still need to protect the other foot as it will be taking most of the load in walking and is also at risk.

Things to do:

- Wear your walker or custom made shoes at all times.
- Check your shoes and feet daily for areas that have become rubbed, the skin will be red when you remove your shoes.
- Take care when washing feet with soap and water. Check the temperature of the water with your hand or elbow if your feet have lost sensation. Take care to wash in-between the toes.
- Do not soak your feet, as this could lead to infections.
- Check your feet daily for changes such as cuts, blisters, bruises or colour changes, swelling or open sores. Report them to your healthcare professional (podiatrist, nurse, doctor) without delay.

Things to avoid:

- Avoid shoes that can damage your feet such as tight shoes that rub your skin red and unprotective footwear such as thongs/flip-flops.
- Never use corn plasters and acid solutions on your skin.
- If you smoke, you are strongly advised to stop. Seek help from your general practitioner or pharmacist.

Try the Quit line: www.quitnow.gov.au or phone 13 78 48.

Should you experience any signs of foot infection seek medical help immediately. These signs include:

- redness around a wound or cut
- new pain after an injury
- unusual swelling in your feet or legs.
Welcome to Social Work Students and Staff

The QUT Health Clinics has recently introduced students from the School of Social Work and Public Health to services within the clinic.

In 2014 six students were part of a pilot program to introduce social work psychosocial services at QUT Health Clinics through the Vision Rehabilitation Centre.

Social work students worked collaboratively with optometry students and staff to address the needs of patients living with low vision. The placement involved working with the optometry students to achieve holistic, person-centred care for patients.

Over the 17 weeks of placement the students had various opportunities to develop their knowledge of multidisciplinary healthcare within a clinic and community setting. There was a range of learning opportunities for the students including direct practice with patients and clients, health research, project work and community outreach activities.

This was a structured field placement program where students spend two days each week at QUT Health Clinics and two days at a community agency. The agencies involved with the pilot program included a hospital based Health Advocacy Legal Clinic and aged care facility in Brisbane.

The program commenced with two weeks of training to prepare students with the necessary knowledge and skills for collaborative multidisciplinary healthcare practice. The training consisted of lectures, site visits, practitioner shadowing and group activities.

Students participate in fortnightly individual and group supervision to enhance their learning and professional development. The program finished with a week of evaluation where students reflected on their learning experiences and development.

Social Work Field Educator, Louise Farrell said this is an innovative placement program contributing to holistic health service provision at QUT Health Clinics while increasing real world learning opportunities for our health students.

“The program also works to strengthen community agencies in Brisbane where social work students work in multidisciplinary teams to deliver person-centred healthcare to clients,” she said.

Dr Stephen Vincent, Low Vision Clinic Coordinator said having the student social workers on placement within our clinic has been of significant benefit not only to our patients but our optometry students, who have been able to work directly with other allied health professionals and students in a collaborative, multidisciplinary team.

Master of Social Work Student, Kira Grayson said she developed a greater understanding of the importance of holistic care for the client and the role of all practitioners within QUT Health Clinics and how social work fits within this context.

Students also hosted a Community Education and Connections Morning Tea for patients in the Vision Rehabilitation Centre. This was a valuable opportunity for patients to learn about the latest developments in assistive technology and connect with others who live with low vision.

Outcomes suggested the pilot program was successful for QUT Health Clinics and the participating community agencies. Social work field placements have continued at QUT Health Clinics in 2015 and has already expanded to a third community agency.

Social Work in Health

The social work profession is committed to human rights and social justice. Through their unique and multi-layered perspective, social work professionals intervene with the person in the context of their social environments and relationships, recognising the impact of the social, cultural, economic, psychological and emotional, political, legal and environmental determinants on health and overall wellbeing.

Social workers within the health system have a dual focus: they are concerned with people rendered vulnerable through physical, emotional and situational difficulties or crises that may be temporary or ongoing; and by engaging with these patients or clients they assist the personal seeking health care to maximise their recovery and enable medical and other allied health practitioners to fulfil their role.

The Role of Social Work at the QUT Vision Rehabilitation Centre

QUT Health Clinics provides a complete service to patients with low vision through the disciplines of optometry, social work and occupational therapy. The multidisciplinary team works to enhance the quality of life for patients by making effective use of remaining vision. The social work team aims to provide holistic support to patients, their families and carers. After a comprehensive vision assessment the social work team completes a psychosocial assessment with the patient to identify presenting and potential needs. The social work team can then: refer the patient to other services, including a vision loss specific counselling service; provide information on programs, payments and resources; connect patients to social support groups, and; advocate for patients where needed.

The tasks for social work students on placement are based around the needs of patients and can incorporate the tasks listed.

Social Work Services Next Semester

Next semester social work services will expand to the Nutrition and Dietetics Clinic at QUT Health Clinics. This is an exciting opportunity to provide clinical education to students and quality healthcare to the community.