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**Centre for Excellence in Rural
Sexual Health (CERSH)**
Rural Health Academic Centre

23 June 2011



The Funding

Funding for CERSH was announced in the 2008/09 Victorian State budget.

- Funding is for four years at a level of \$800,000 per year (except year 1).
- Funding for 2012 – 2016 currently being negotiated



The Vision

That all rural Victorians have access to quality sexual health care, information and support that is tailored to their individual needs.



The Aim

To develop sustainable strategies by building collaborations and partnerships between agencies, services and individuals in regional Victoria.

*Develop mechanisms for translation of Centre findings and achievements to DHS regions throughout the State of Victoria



The Purpose

To design, implement and evaluate programs that provide **practical** solutions to improve the sexual health of rural Victorians with the emphasis on the prevention of sexually transmissible infections.



Our Priorities

- ✓ **Priority 1:** Increase Chlamydia testing rates in at-risk groups in the Hume region through the use of innovative technologies
- ✓ **Priority 2:** Enhance access to confidential high quality clinical sexual health services
- ✓ **Priority 3:** Enhance levels of activity of evidence supported sexual health promotion in rural communities.
- ✓ **Priority 4:** Develop and/or access mechanisms for knowledge translation throughout the State

Other important tasks

- Evaluation of CERSH and the funded projects
- Promotion of CERSH activities



PROGRAM

- 9:15am A/Prof Jane Tomnay Director CERSH - Welcome
- 9:30am Jenny Butler, Clinician, SECASA AWARE Program
“Assessment and Treatment of Problematic Sexual Behaviours”
- 10:30am Morning Tea
- 11:00am Mr Chris Kelly, Psychologist / Ms Catherine Madill, Human Relations Practitioner, Specialist Services Team
“Sexuality & Health of Intellectual Disability Clients”
- 12:15pm Chris Biesierkierski, Forensic Nurse Examiner, GVH
“Role and Referral Pathways of the Forensic Nurse Examiner”
- 12:45pm Lunch
- 1:30pm Dr Debra Monk, Clinical Psychologist, NEH Hume Wangaratta
“Sexuality, Intimacy, Mental illness and Quality of life”
- 2:30pm Ms Jenni Craggs, Psychiatric Nurse, Nagambie Medical Centre
“Working with Young People with Mental illness — sexual health concerns”
- 3:15pm Conclusion and Evaluations

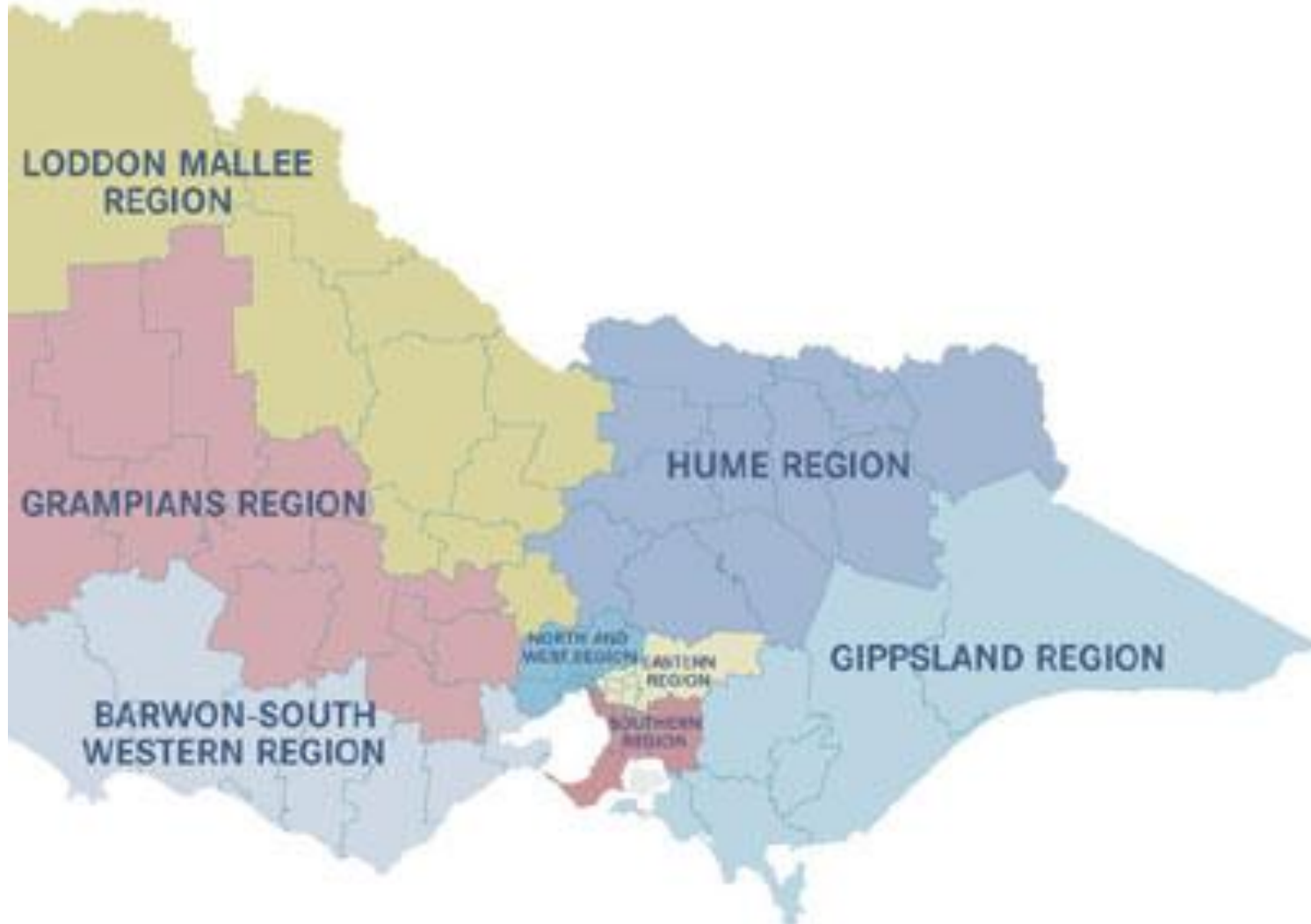


The 'Hume Region' is defined for the purpose of this presentation by 4 Primary Care Partnerships (PCP's) which consist of 12 LGA's—

1. **Upper Hume** (City of Wodonga, Indigo Shire Council and Towong Shire)
2. **Central Hume** (Alpine Shire, Benalla Rural City, Mansfield Shire Council and the Rural City of Wangaratta)
3. **Lower Hume** (Mitchell Shire and Murrindindi Shire Council)
4. **Goulburn Valley** (City of Greater Shepparton, Moira Shire and Shire of Strathbogie)

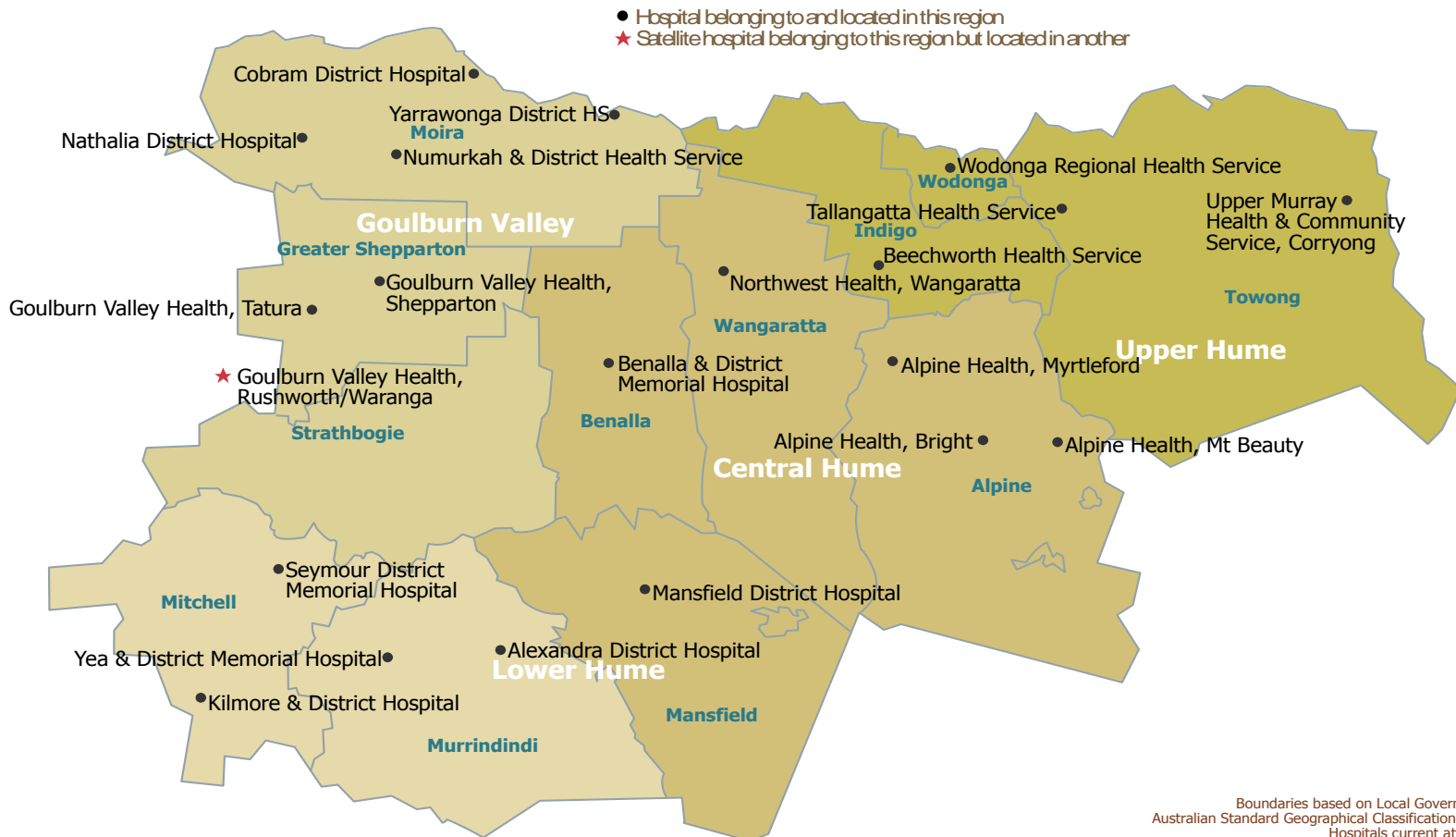


Centre for Excellence in Rural Sexual Health: Improving the Sexual Health of Rural Victorians





Hume Region public hospitals including Primary Care Partnerships and Local Government Areas



Boundaries based on Local Government Areas
Australian Standard Geographical Classification 1 July 2004
Hospitals current at 1 July 2006



5 Key Concepts in Rural Health

- Access
- Overlapping Relationships
- Cultural Safety
- Team Practice
- Models of Rural Health Services

Rural-Urban health differentials



Access

- The 5 A's (availability, affordability, accessibility, accommodation and acceptability)
- Distance, travel
- Cost
- What's available versus what's needed



Overlapping Relationships

- Lack of weak ties
- Lack of anonymity (everyone knows each other)
- Have to work to preserve confidentiality
- People have many roles
- Networks influence the flow of information



Cultural Safety

“an environment which is safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need” (Eckerman et al. cited in Williams, 1999: 213)

- respecting rather than understanding other cultures
- the interaction between our own culture and other cultures that are continually re-constructed through our identities
- health professionals making changes which will lead to better use of services and care for patients



Team Practice

- Must work with local professionals; cannot choose team members
- Roles of team members may be less clear because of lack of staff
- Teamwork is crucial to effective primary health care
- Teamwork is key to sustainability
- Rural health professionals have increased autonomy



Models of Rural Health Services

- GP based hospitals
- Aboriginal Community Controlled Health Organisations (ACCHOs)
- Inter-professional practice
- Nursing-led teams and allied health led projects
- Consumer participation
- Community holds health professionals accountable
- Multipurpose services (pooled funding)



Barriers to optimal sexual health for rural Victorians

- *Significantly reduced access to confidential high quality clinical sexual health services*
- *Decreased access to sexual health promotion strategies aimed at increasing knowledge and awareness*
- *Rural specific issues:*
 - *High rates of teenage pregnancy in some areas, vulnerable communities such as indigenous communities, young people, gay and lesbian communities,*
 - *Other issues such as stigma, lack of privacy/anonymity, homophobia, remoteness, sexual violence, alcohol and substance use/abuse.*



A 15 year old girl living in Melbourne who thinks she has chlamydia

- *Tram, train or bus to either the Melbourne Sexual Health Centre or the Action Centre (Family Planning)*
- *Specialist 'young person friendly' and/or confidential sexual health service*
- *No appointment required – Monday to Friday*
- *Free of charge for consultation, laboratory testing and treatment at MSHC, cost of treatment only at the Action Centre*
- *Assistance and support with partner notification*
- *Provision of education/information about safer sexual practices*
- *Access free condoms and lube & can buy at many shops without issue.*

A 15 year old girl living in Rural Victoria who thinks she has chlamydia

- *School bus between school and home*
- *Local GP is more likely to be trained O.S., older and less likely to bulk bill and her best friend's mum could be the receptionist*
- *Appointment required*
- *Fee charged for consultation, laboratory administration and treatment (prescription)*
- *Partner notification – she does it herself without support or guidance and now everyone at school and in town knows she has chlamydia!*
- *More likely to have little or no access to free condoms and lube. Difficult to buy in the local shops (confidentiality).*

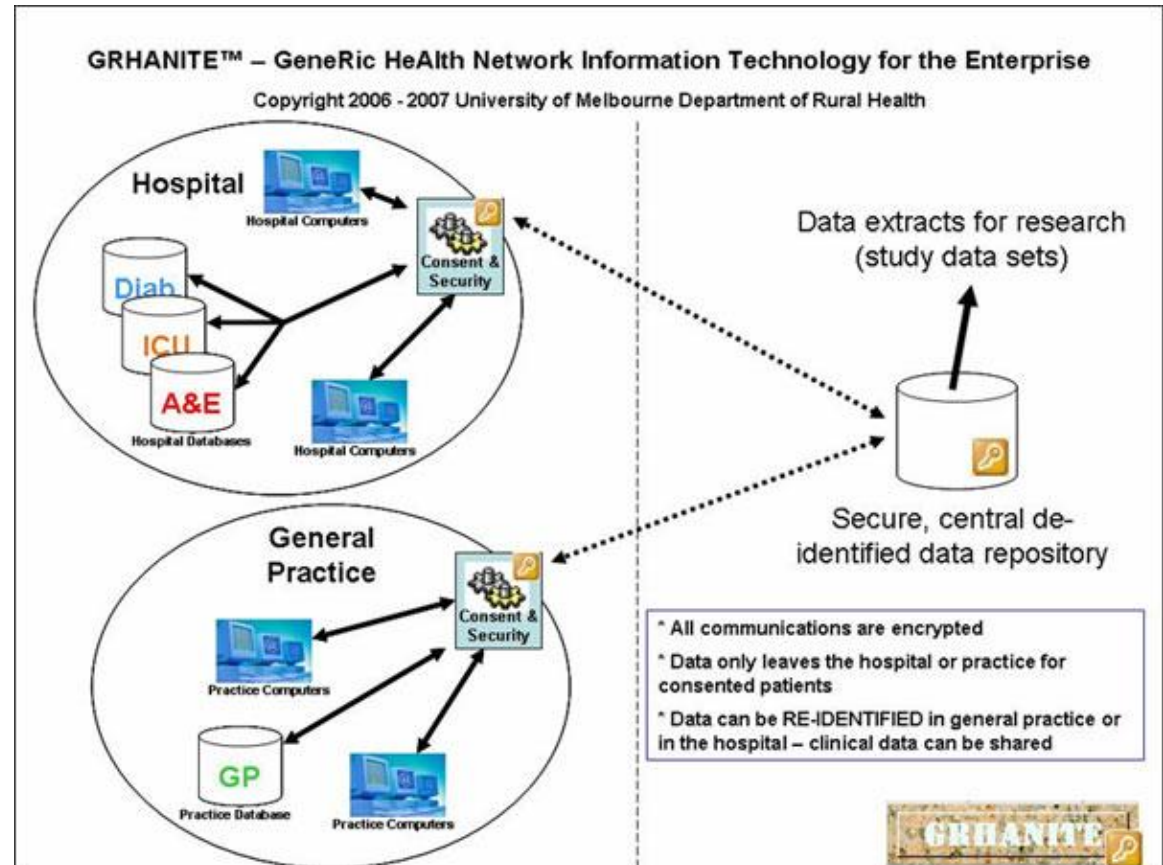


WHAT is CERSH doing to address some of these issues?

- ✓ **Priority 1:** Increase Chlamydia testing rates in at-risk groups in the Hume region through the use of innovative technologies

The Rural Health Academic Centre has developed a data extraction tool known as GRHANITE

GRHANITE allows the confidential and ethical extraction of data from primary care for research purposes.





A partnership has been established between CERSH and the ACCEPt project.





- ✓ **Priority 2:** Enhance access to confidential high quality clinical sexual health services



How can rural Victorian services respond to inequalities in access to clinical sexual health services?

- Identify the local needs through mapping
- Plan service responses that meet the needs of high risk communities (e.g. hours of operation, outreach, confidentiality, young person specific)
- Link health responses where synergies exist (e.g. sexual health with Drug & Alcohol and mental health services)
- Build capacity in the rural health workforce (professional development, partnering with other organisations)
- Build capacity in the community and education sectors to enhance referral pathways to clinical services



The issues!

- When I commenced in Shepparton (March 2009) there were no specialist clinical sexual health services being offered in the Hume region.
- The Wodonga clinic was about to close because the GP was moving to another region.
- FPV had previously offered a 'young persons' clinic at the community health centre in Shepparton but that had ceased operating some years previous.



- *Improving access to expert clinical sexual health services in the short term*

–“TESTME”

Lead by MSHC and funded by the Department of Health Victoria



Improving rural clinical services in the long term

- CERSH is providing professional development seminars and small learning groups aimed at improving the clinical expertise of interested medical professionals (mostly GPs).
- Improving clinical capacity through focused initiatives targeting nurses, allied health professionals and community workers



*Improving rural clinical sexual health services
through collaboration with MSHC and FPV.*

- CERSH has visited 60 GPs over the past year to raise awareness of issues around sexual health clinical service provision in the Hume region.
- We have identified a small number of GPs with some interest in sexual health and facilitated them in attending MSHC and the Action Centre for clinical work experience.



CERSH has held professional development evenings for GPs in partnership with the Sexual Health Society of Victoria (SHSOV) throughout 2010 and continuing in 2011.





CERSH leadership and network creation and co-ordination

- Cross fertilization of ideas and experiences within the network leads to enhanced sexual health service provision.
- “The Hut” leads to creating a clinic at Beechworth and Seymour.



“The Hut” is up and running at Nurmurkah District Health Service!

The HUT

WHERE Little House Next to the Hospital
Katamatite Road, Numurkah

Drop in to THE HUT

Dr Olga Ilic and Nurse, Robyn Brown are available to see clients.

No appointment needed, just come and see us!

Please bring your Medicare Card if possible. This service is bulk billed (means you wont be charged)

TIME 2.00pm - 5.00pm

UPCOMING DATES

- TUESDAY, 6TH JULY (NURSE)
- TUESDAY, 13TH JULY (GP & NURSE)
- TUESDAY, 20TH JULY (NURSE)
- TUESDAY 3RD AUGUST (NURSE)
- TUESDAY 17TH AUGUST (NURSE)
- TUESDAY 24TH AUGUST (GP & NURSE)



Improving the clinical capacity of nurses

- ❑ CERSH regularly holds clinical seminars for nurses and allied health professionals.
- ❑ These have been well attended.
- ❑ 2010 Seminars were held in Shepparton
- ❑ 2011 Seminars are held throughout the region



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Collaboration with Goulburn Valley Health: RSHNP

- ❖ CERSH is finalising a contract with GV Health to establish a Rural Sexual Health Nurse Practitioner position to lead and strengthen Hume region nurses role in sexual health and to provide outreach clinical services throughout the region.



Improving rural clinical service referral pathways

- Enhancing co-ordination and collaboration between sectors, such as education and health by working with the DEECD regional office
- Enhancing co-ordination and collaboration between community sector workers and primary health care providers by establishing a network to co-ordinate service provision



✓ **Priority 3:** Enhance levels of activity of evidence supported sexual health promotion in rural communities.



Enhancing Sexual Health Promotion Strategies

✓ Discussion Paper – sexual health promotion in a rural context:

- understanding and working within each local rural context;
- addressing sexual health in priority populations within an inclusive practices framework;
- active and explicit engagement with the dynamics of difference, diversity and culture;
- using a range of health promotion actions;
- a strong acknowledged value base;
- an integrated and comprehensive approach to respectful relationships, violence prevention education and sexual health initiatives;
- intersectorial partnerships; and
- coordinated sexual health service provision.



*CERSH Health Promotion: some
of our activities and
partnerships in Regional
Victoria.*



Condom vending machines throughout rural Victoria – is it possible using knowledge translation?

- Following “Safer Sex in the Sticks and Beyond.....”
- CERSH has approached the City of Greater Shepparton and surrounding shires including Moira, Campaspe, Strathbogie, Indigo and the Rural Cities of Benalla and Wangaratta to encourage and support the installation of condom vending machines in publicly accessible toilets.
- This initiative will improve access to condoms after hours and will provide privacy to young people wishing to purchase them.



AIDS
AWARENESS
WEEK
NOV 24 - DEC 1
www.can.org.au

AIDS
AWARENESS
WEEK
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Aboriginal and Torres Strait Islander peoples: sexual health working party

- improving the sexual health of young Indigenous people living in Goulburn Valley and northeast Victoria
- improving sexual health literacy of young Indigenous people living in Goulburn Valley and Northeast Victoria
- developing and implementing strategies that provide for Aboriginal ownership, participation and acceptance of sexual health programs.
- developing partnerships between existing stakeholders across the region.



In practice:

1. Working with ASHE – series of workshops developing scripts and producing you tube clips: putting an aboriginal lens over the respectful relationships program (Nelly Thomas, Isaac et al)
2. In Wodonga – through film, hip hop and drama running workshops for aboriginal YP, concurrently engaging parents and significant adults and also partnering with Wulumperi to provide professional clinical support to workers.
3. Collaborating with Debbie Ollis – creating pre-service teacher curriculum for sex ed for indigenous students.



Gay, lesbian, bisexual, transgender, intersex and questioning (GLBTIQ) people: 'How2 education series'.

- Four workshops over 12-months
participants will be supported
- to audit the extent to which their service is GLBTIQ inclusive
- and work through the process of developing GLBTIQ inclusive practice.



Eating “Out” Program

- Partnering with UnitingCare Cutting Edge, a fortnightly meals program which provides a social support space for same sex attracted & transgender young people (SSATYP) and their friends (15 - 25 yrs) in the Greater Shepparton community / Goulburn-Murray region.



Take Care Outback There...

The forum aimed to support the needs of rural GLBTIQ communities through:

- Networking and information sharing
- Presentation of papers and workshops
- Highlighting policy needs and best practice service provision
- Exploring challenges and the opportunities for social connections within the rural GLBT community.



Take Care Outback There....







Sexuality Education in Schools

Building relationships, capacity and collaborations with key partners including

- The Department of Education and Early Childhood Development (DEECD),
- Australian Research Centre for Sex, Health and Society (ARCSHS)
- Local regional health experts



People from culturally and linguistically diverse backgrounds, including refugees.

- Working together to establish regular education opportunities and clinical services for newly arrived CALD women.
- Australian Centre for the Study of Sexual Assault and CERSH forum: **‘Supporting Women from CALD Backgrounds who are Victims/Survivors of Sexual Violence’**



Developing a cyberspace profile

- CERSH website –



- CERSH twitter
- CERSH facebook



CERSH Research

Partnering with researchers at the Rural Health Academic Centre

“Connections!” exploring rural young peoples’ views about important relationships in their lives, sexual health issues & the use of technology.



Evaluation of CERSH and the funded projects

**Facilitated by Rosemary McKenzie,
Research Fellow at the Centre for Health
Policy, Programs and Economics in the
School of Population Health at the
University of Melbourne.**

- CERSH funded project evaluation
- Partnership evaluation
- CERSH evaluation

“Most Significant Change” (Davies, R. & Dart, J. 2005).



Challenges..... Personal observations

- Rural communities lack critical mass
- Strategically managing whilst grasping opportunities as they present can be like juggling ice
- Wearing many hats and being time poor – everyone is busy!
- The speed of the country – it's a bit slower in some places!
- Distances to travel (however the scenery is nice!)
- The highway from Melbourne to Shepparton is twice as long as the highway from Shepparton to Melbourne.....



The advantages.....

- Everyone knows everyone – the “local - locals”, the “locals”, and the “ring ins”
- Health professionals are enthusiastic, energetic and have a can do/never say die attitude
- No traffic
- The best fruit, & scones with jam and cream I’ve ever had!



Vision in 2012.....

Hume Region will have:

- Improved access to a greater range of sexual health clinical services
- Higher rates of chlamydia screening in General Practice
- Increased awareness and improved co-ordination of sexual health promotion activities



Our Partners and Collaborators

- **Melbourne Sexual Health Centre**
- Sexual Health Society of Victoria
- ACCEPt: Centre for Womens Health, Gender and Society, The University of Melbourne
- Victorian Cytology Service
- Country Awareness Network
- Family Planning Victoria
- Swan Hill District Health Service
- Uniting Care Cutting Edge (Diversity Project)
- Uniting Care Cutting Edge (Cultures of Care Project)
- Australian Research Centre in Sex Health and Society
- Gay and Lesbian Health Victoria
- Goulburn Valley Division of General Practice
- Goulburn Valley Health (Community and Integrated Care and Health Promotion Team)



Our Partners and Collaborators continued...

- Goulburn Valley Community Health Service (Primary Care Connect)
- Department of Health, Victoria
- Department of Education and Early Childhood Development
- Multicultural Health and Support Service
- Victorian Aboriginal Community Controlled Organisation
- City of Greater Shepparton
- Strathbogie Shire
- WayOut Rural Victorian Youth Sexual Diversity Project
- {ALSO}
- Centre for Health Policy, Programs and Economics, The University of Melbourne
- Gateway Community Health Service
- Numurkah District Health Service
- Shepparton Medical Centre
- Rumbalara Aboriginal Corporation
- Mungabareena Aboriginal Corporation
- Albury Wodonga Aboriginal Health Service



Thank you!

Questions?

Acknowledgements: Thanks to the Department of Health, the CERSH Advisory Group, the CERSH team, the Rural Health Academic Centre and our Regional and Metropolitan Partners and Collaborators.



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