# Sexual Health information networking & education SA Inc



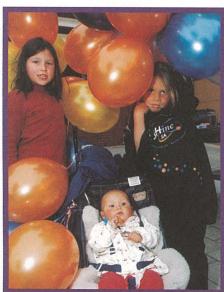
An official welcome to Kaurna Land from Josie Agius, a Kaurna elder



From left: Barbara Renton, Christine Charles, Gay Thompson and Vaia Prois



From left: Minister for Human Services, Hon Dean Brown, Kaisu Vartto, Chief Executive Officer SHine SA, and Paul Gardner, President SHine SA



Celebrating their future!

# moving forward celebration of a new name

n 1997/98 SHine SA began a process of changing its name. The new name and logo was launched on 29 October 1999 at the Lion Arts Theatre Bar.

It began with a Kaurna welcome, included a dancing bear and hula hooper recreating the new SHine SA logo and finished with a SHine SA song. As well as a celebration, the name change was an important part of letting the community know that more than the name had changed.

We were pleased to have the support of the Minister for Human Services, Dean Brown, who acknowledged that sexual and reproductive health issues continue to require urgent attention in South Australia and commended SHine SA on the leadership it had shown in

The most positive aspects of the launch were the opportunity to celebrate with our diverse communities of interest. These communities include:

- Aboriginal and Torres Strait Islander peoples
- People with a Disability
- People from Rural & Remote areas of South Australia
- Lesbian, Gay, Bisexual and Transgender people
- People from Culturally and Linguistically Diverse Backgrounds

Young Women and Young Men

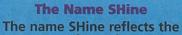


targeted people and workers from communities who in the past have had limited access to sexual health education and services. The launch enabled the

unual Report

communities and the health, education and community workers to be in one place at one time.

Thanks to everyone who helped us launch SHine SA into the new millennium.



work we do: S = Sexual

H = Health

I = information

m = networking

e = education

# **SHine SA Logo**

The Shine SA logo was developed in 1998 through a process of consultation with our communities of interest, Staff and the Council, The logo's interlocking elliptical rings represent the continuum of connection between people. The stars represent infinite space and the importance of sustainable sexual health for the global community.

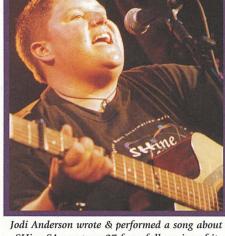




Invitation to the launch



The speech by The Hon Dean Brown, Minister for Human Services was translated for the deaf audience members



SHine SA, see page 27 for a full version of it



Guests read all about the new SHine SA





Guests at the SHine SA



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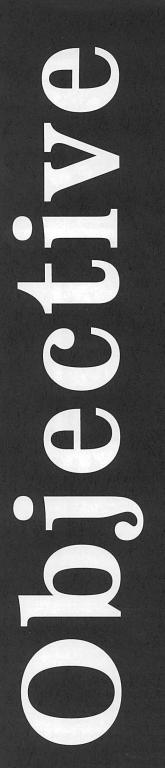
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Celebrations at SHine SA's Launch This publication together with the 1998/99 Audited Financial Report constitutes the 1998/99 Annual Report of SHine SA (formerly Family Planning SA)



(formerly Family Planning SA)

To work in partnership to raise the sexual health status of Aboriginal and Torres Strait Islander peoples of South Australia.





The health status of the Australian Aboriginal and Torres Strait Islander communities continues to rate worse than non-Aboriginal people on every indicator: infant mortality, maternal mortality and life expectancy. Sexual and reproductive health morbidity contributes a significant burden of ill health in the lives of Australian Aboriginal people.

SHine SA's strong and emerging partnership with Aboriginal communities and organisations has facilitated increased access to SHine SA's services by Aboriginal people.



# **VYBE - An Earth Shaking Result**

Well what can we say. In the 1997/98 report we promised to "shake up the world" and if you have not heard of VYBE you must be on another planet. We started out being called Risky Business because it was going to be risky business to consult, recruit, develop a program, develop a group and educate and inform about such risky behaviour to a very at risk, risky group.

Even though we had completed phase one of the project in the last financial year the next stage was going to be the most important. The reason

for this was that we had to ensure that everything we did was by the young men, for the young men. This was evidenced right throughout the program and as a result the young men were involved in every single process, hence they had ownership. When we set out our major aim was to demonstrate ways to create an opportunity for young indigenous men to develop an awareness of holistic health issues. As a result the young men would then have the knowledge and self confidence to utilise this information to assist them to make conscious decisions that

would have an impact on all Aboriginal people in the 21st century. It was decided that we would concentrate on individual issues separately and then slowly put the jigsaw together. We had so many varied shaped and sized pieces that before we started to get a total picture of what constituted holistic health we needed to closely examine the culture piece, self esteem piece, sexual health piece and the drug and alcohol awareness piece and construct them individually to give them their own identity. As a result of this process the young men then developed

their own unique logo, a mural, posters, post cards, stickers, t-shirts, boxer shorts and hats that when constructed together tell their story. There are many lessons that have come out of being involved in the project for the young men with the two most critical messages being about what you sow today you will reap tomorrow and not wanting instant gratification. We instilled in them that it takes a long time for a tree to grow and then a further period for it to bear fruit but once you nurture this process you will have fruit that will feed you and your family for a long time. On the other hand what is the use of a dead tree or a fruit tree without fruit? It is hoped therefore that we have been successful in demonstrating a best practice model of ways to work with young indigenous men and holistic health issues



For more information on the VYBE Project see pages 16/17

# Young Bloods Share A Vision

Sex, drugs and cultural issues have been tackled head-on by a group of local youth.

Called Visionary Young Bloods Educating (VYBE), the group is made of 15 youths, aged from 12 to 21, from Pennington, Ottoway, Rosewater, Woodville Gardens and Pooraka.

Since last August, the group has been working together to teach their peers about sexual health, self esteem, cultural issues and drug and alcohol awareness.

They have designed their own logo and developed t-shirts, caps, posters, post cards and condoms which promote VYBE's safe sex and drug awareness motto.

The group was first initiated through an eightweek education program, which included a camp to the Coorong to learn about Aboriginal cultural issues.

After the camp, it was up to the boys to develop and implement ways to educate other young people, project coordinator Mark Koolmatrie said.

He said VYBE decided to advise, rather than preach fellow youth about safe sex and drugs by providing useful information, such as how to properly use a condom.

"What tends to happen, is that young people are told 'don't do this and don't do that', but nobody tells them why or how," Mr Koolmatrie said.

Instead VYBE tries to provide more practical information.



Youth VYBE: Visionary Young Blood Educators - from left Gordon, Kennon, Sam, project coordinator Mark Koolmatrie and Kaz - pack condoms as part of their youth orientated products promoting safe sex and drug awareness

"If youth wish to use alcohol and drugs, then use it safely and if they're going to have unprotected sex, these are the consequences," Mr Koolmatrie said.

VYBE, which is a project of SHine SA (formerly Family Planning) and funded by the State and Federal money, has also raised the self confidence of the Aboriginal men involved.

"Some of the boys who were timid and shy have become really forthright and they feel strong as Aboriginal men and they feel that they have a purpose in life," Mr Koolmatrie said.

He said self esteem was vital for a healthy Aboriginal youth culture.

"Far too many times (Aboriginal male youth) get put down through media stereotypes and (VYBE) is one way of reversing the impact of those stereotypes," he said.

Courtesy of Messenger Newspapers Ltd, 7/4/99

# Australian Leaders

Last week, I was privileged to attend the launch of VYBE, the Visionary Young Bloods Educating program, through which young Aboriginal men examine issues of alcohol, drugs, relationships and sexuality in a cultural context.

In welcoming the group to the Port Adelaide Football Club rooms, Brian Cunningham remarked how appropriate it was the Australia's oldest football club should host an event so important to Australia's oldest culture.

Auspiced by SHine SA Inc (formerly Family Planning SA) and led by Mark Koolmatrie and Neville Abdulla-Highfold, two Aboriginal men of great experience and skill, the group worked on some of the problems which affect not only young Aboriginal men but young men generally. Acknowledging their leadership potential, the Youth Minister, Mark Brindal, expressed the view that, as well as being future Aboriginal leaders, they could also aim to be Australian leaders. Seeing and hearing these young men speak, describe their work, display their project material and model the sportswear they helped design, I could only agree with the minister they would provide excellent role models.

In the same way through sport, many Aboriginal men and women are providing a role model, not only to Aboriginal people but also to the community generally, by competing on equal terms and excelling. How important, then, that these "leaders" are not ridiculed by bigots role-modelling macho values. Goals to SHine, these young men, Brian Cunningham and Mark Brindal; out of bounds, Sam Newman.

Mr Richard Bruggemann

# Forming Partnerships With **Aboriginal and Torres Strait** Islander People in the South

The past year has been spent in forming and cementing relationships with the Aboriginal and Torres Strait Islander people in the Southern region as well as engaging in activities to increase our understanding and knowledge of Aboriginal culture. Southern team members participated in two days of training at Tauondi Aboriginal College and also participated, in partnership with Woodcroft Community Centre and community members, in a Reconciliation Learning circle. These activities have been very enriching for staff

The ATSI portfolio holder for the Southern team attends discussion meetings with the equivalent portfolio holders in other teams. Our networking & partnerships have been increased by attendance at an Aboriginal Mental Health seminar held by Mental Health Services and an Aboriginal Health Forum at Noarlunga Health Services where we staffed an information display and had the opportunity to meet more workers and community members.

Liaison with Nunkuwarrin Yunti, Neporendi Aboriginal Forum and Aboriginal Health Workers in the region has been active. Southern SHine SA is a member of the Aboriginal Services Action Group which has built a solid foundation at the service provider level. A further group to involve management staff in southern agencies in commitment to a system wide approach is currently being formed.

In forming relationships and partnerships the Southern Team has been involved in activities which have been a lot of social fun as well. These activities have included NAIDOC celebrations, Nunkuwarrin Yunti Family Day and several activities for Aboriginal Cultural Awareness week. We look forward to our partnerships continuing to grow with plans for VYBE to do some peer education work with young Aboriginal men in the south and plans for involvement in a women's group.

# **Celebrating Healthy Families Day**

# at Nunkuwarrin Yunti, November 6th 1998

For the last few years Aboriginal Women's health has been celebrated and promoted by a day of activities, food and fun at Nunkuwarrin Yunti. So much fun, in fact that men and children have been feeling a bit left out, so this year the focus was changed to include the whole family. The idea of having a 'women only space' where healing, massage and women's business could take place and another separate space for men's business, worked really well.

Everyone could come together in the large area where there were displays, dancing, music and lots of delicious food. The atmosphere was really positive as people celebrated healthy living, made new friends and caught up with old ones. SHine SA had displays and activities in both the women's and men's spaces. Nunkuwarrin Yunti's Healthy Families Celebration Day is proof that health promotion and networking can be fun and productive at the same time.

# The Launch of the Aboriginal **Health Worker Certificate Course** & Resources

On Thursday the 27th of May, 1999 SHine SA launched, the first ever, Accredited Short Course for Aboriginal and Torres Strait Islander Health Workers on Sexual and Reproductive Health Care for Indigenous women. The launch was held at Tandanya.

Veronica Brodie, a Kaurna /Ngarindjeri Elder welcomed us all to Kaurna Land.

Jenny Baker launched our program. Jenny is an Indigenous Registered Nurse, who has completed her Masters Degree in Primary Health Care and is at present, studying for her Doctorate. Jenny's speech was direct, relating to the problems that other professionals and our Indigenous Health Workers face when delivering health care to our communities.

Roxanne Ramsay, the Executive Director of Country Services Division, responded to



From left: Bev - Team Leader Professional **Education & Resources; Ros - Course** Coordinator; Ellen - Course Development

Jenny's speech on behalf of the Honourable Dean Brown, Minister of Human Services.

It was an honour to have 'The Law Women from the North West of South Australia' perform at our launch. Their singing and dancing gave a warm

> and wonderful atmosphere to this venue. Mona Tur, interpreted the songs and

> Mona then read two poems she had written. They were, "Aulura" relating to our land, and "Aboriginal Women's Lament" which related to the stolen generation. After the reading of these poems, emotions were high and a few tears were shed.

> Attendance at the launch was outstanding. I would like to thank everyone who



Traditional Dancing at the Launch - for more information see pages 16/17

# Young Nunga Women & their Friends

In November 1998, SHine SA, Nunkuwarrin Yunti and Port Adelaide Community Health Service were involved in a four-week program for young Aboriginal women and their friends. The request came from Aboriginal Mothers and Grandmothers who attend the Nunga Women's Clinic at Port Adelaide. They were seeking somewhere for their girls to go where they could learn about "becoming a woman".

Flyers were distributed at local schools and word passed through family and community networks (the Nunga grapevine). 10 young women aged between 11 and 14 attended the workshops, with

a core of 6-8 young women attending each week. Topics covered included; puberty, contraception, women's health checks, drugs and alcohol, safe sex, pokies, general health, diabetes, social and emotional concerns. At the end of the fourweek program the young women wanted the afternoons to continue. Funding was successfully sought from the Port Adelaide/ Enfield council and a longer program is planned for the later part of 1999. We are working closely with Port Youth Theatre who have funding for exciting programs that we will be jointly involved in next year with Young Indigenous Women.

# Welcome to your Nunga Women's \* & Children's Health Clinic











- Contraception
- Stress Relief
- Pregnancy
- General Health Checks
- Pap Smears
- STI's
- Sexuality & Relationships **Blood Pressure Checks**
- **Blood Sugar Checks Breast Checks**
- Parenting
- Sleeping Problems
- Antenatal Care
- **Behaviour Problems**
- Menopause
- Immunisations
- Period Problems
- Baby Checks

### Free Confidential Service

Nunga Health Worker, Doctor, Nurses & Receptionist **Thursday Afternoons** 

### Port Adelaide Community Adelaide Health Service

Corner Church & Dale Streets Port Adelaide Please drop in or make an appointment by calling: 8364 5033 Monday to Friday or 8240 9619 Thursday 2 - 6pm only

# Nunga Women's and Children's Clinic

continues to grow and become more inclusive over time. This is a joint clinic between Nunkuwarrin Yunti and SHine SA, held at Port Adelaide Community Health Service (PACHS).

Clinic numbers have risen and PACHS is viewed as more accessible by Nunga women and their families. People attending the clinic are a mixture of local residents, Tauondi students, and relatives and friends visiting from rural and remote areas. Our focus is Aboriginal women and their families, however, we also see any emergency drop in clients. We continue to work closely and network with Nunkuwarrin Yunti, PACHS, PARKS, CAYH, Tauondi College, Dale Street Women's, and Port Youth Theatre. A few times a year we host an afternoon tea and networking session where up to 20 local Elders, community members, and workers get together to discuss clinical and other issues. Great ideas and services arise out of these informal sessions

Over winter we also introduced Soup Lunches that are open to all Aboriginal people, PACHS staff and visitors. (We all take turns cooking soup). In the months of May and June over 140 people joined us for lunch. The lunches have become a great informal networking time where health education and community information sharing has been exchanged.

SHine SA would like to take this opportunity to thank PACHS for their flexibility and enthusiasm in assisting us with this exciting work.

# ★ Fact or Fiction ★

How often should the contraceptive pill be taken?

sponld be taken at about the same time combined oral contraceptive pill, one pill Everyday - when talking about the

# There's More Than One Meaning to Silence

I am an Aboriginal woman, very proud and centred in my heritage and spirituality, with a belief borne of ages to fight for equal rights and justice for our people in a society where we are the minority. My whole life's focus has been and will ever be to help make this world a better place for our children and their children's children, to carry on a fight begun by our Elders and in this way giving something back - earning some of their love and respect. The 1999 NAIDOC poster says just that far better than I

We all do the best at what we do, our work ethic is tuned to the rush and pull of today's society and in doing so we are in danger of burning out, we lose sight of ourselves. There is something in what that nameless bank advertisement says about taking time out to smell the roses - or something to that effect.

But who listens or takes notice? Not I says she, not I and I'm paying for it. This isn't easy to write, admitting weakness never has been easy for me, so, sitting at a computer usually denotes the ability to articulate information processed regardless of the source or reason. All very well and good you might say, but what if you're whole life has hit a brick wall and you can't see around or over it and no matter how far you think you've sunk, you can't get under it. Well, honey's, I hate to say it but we're all human. It's okay to admit that things are too hard and you need help. Remember that you can't see how much trouble you are in because it is all in you're face and closing in. What use are we to others if we become a liability to ourselves. Think about that! I let it go for so long that I ceased to hear the birds sing in the morning or could no longer hear the cicadas when I had had enough and went bush, believe me it's taken a long time to pick up the courage to say just three words - I need help. SHine SA has in a small way given me the space to deal with things that I had gotten really good at hiding or filing under "No Time". I have the space to cry, to acknowledge the child in me and to let go and scream if needed.

SHine SA is a safe place, inclusive and not condescending. I can recommend SHine SA, but you need to make up your own minds when you're ready and the time is right.

Oh yes and remember one thing, one person's silence is another person agony. There is no shame in asking for help and it takes more courage to cry in public or just to let yourself feel, than to bungee jump.

SHine SA Client



# Women's Clinic



Nunkuwarrin Yunti 182-190 Vakefield Street Adelaide

28-30 Brady Street, Elizabeth Downs Tuesdays: 12 - 4 pm

\*No Appointment Needed\* Clinic Staff:

Nicola Chynoweth (Doctor) Nunkuwarrin Yunti (Aboriginal Health Worker) Candy Hyde (SHine SA Community Health Nurse)

Come in for confidential information about:

- Women's Business
- Pregnancy Tests
- Contraception
- **Smear Tests**
- Infections
- Menopause HIV/AIDS Tests
- Morning After Pill
- After Baby 6 Week Check Up
- Breast Chekcs
- Post-Abortion Check Up
  - Safe Sex Information
- Family Violence Support

Free Condoms & Pills For more information phone 8223 5217

# **Brady Street Clinic**

SHine SA's partnership with Nunkuwarrin Yunti is six years old now and continues to be hugely important to our provision of sexual health services to Indigenous people in the northern area. The Brady St. clinic is a small housing trust building which is rented by Nunkuwarrin Yunti and which works as a satellite clinic for Nunkuwarrin Yunti in the northern suburbs. Three very busy clinics operate here each

week, and one of these is a sexual health clinic which is where SHine SA's contribution to the service is most visible.

A doctor and a nurse who are both employed by SHine SA, work cooperatively with Nunkuwarrin Yunti's health workers to provide a high quality primary health care service with a focus on sexual health. The work is challenging in both clinical and in more philosophical ways. The range of health care issues that need to be managed are complex and unique. The environment and resources that are available to do this are poorly resourced by comparison with most other areas of the health system. However, despite these obstacles we are very proud of our work outcomes because they demonstrate that a high quality primary health service is providing essential health care and health promotion to a community disadvantaged by limited access to health services.

Outcomes at Brady Street:

- In 12 months a total of 34 SHine SA clinics operated here.
- A total of 209 clients were seen. 76 were informal contacts.
- This is an average of 6 clients a week/session.
- By far the most common age group was between 21-41 years of age.



Brady Street Clinic - Elizabeth Downs

- 63% of clients received a physical examination or screening service.
- 16% of clients were referred to specialist medical services which is significantly higher rate of referral than most primary health facilities.
- Pain relief and antibiotics were the most commonly prescribed treatments. Contraception was rarely dispensed or prescribed.
- 14% of SHine SA's registered clients received a cervical screening test.

And we know that client satisfaction with the service is very high. How do we know this? Our clients tell us and they keep on coming back!

Having fun on the playing equipment at **Brady** Street.

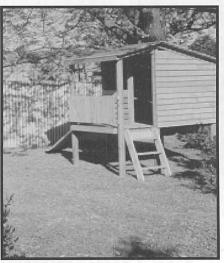


# Elder's Camp

At the end of 1998 Dr Judy McDonald and Janet Kelly were invited to an Elder's Camp at Camp Coorong to discuss women's issues, general health complementary healing. The camp was part of the Aboriginal Elders Program. Judy and Janet were involved in group and individual discussions around health and social issues. They also provided foot, shoulder and back massage, which was very well accepted by the Elders. Other activities

during the camp were spiritual healing, weaving, visiting Raukkan and learning more of the history of Ngarindjeri people.

Judy and Janet felt most privileged to attend the camp. Being part of a community gathering has helped break down the barriers between Aboriginal people and health providers. Elders were able to get to know Judy and Janet in a



An outdoor play area has been made possible at Brady Street due to a grant from United Way North. Shine SA and Nunkuwarrin Yunti successfully applied to this local community fund and have been able to install a cubby house with slide and other play equipment. Some children were recently overheard describing this addition as: "Heaps cool" and "wicked".



Camp Coorong

relaxed non-threatening, non-clinical environment. The Elders are very highly respected, influential people in the community and their acceptance has helped open the way for family and friends to attend the Nunga Women's clinic at Port

# Screening Tauondi

SHine SA has been involved in a joint project with Tauondi College, Port Adelaide Community Health Service, Nunkuwarrin Yunti, and Parks CHS. Once each school term health workers, doctors and nurses hold a screening day at Tauondi. Students are advised to fast over night so that cholesterol checks can be done, and a healthy breakfast is provided in the common room. The screening session and breakfast allows health information to be shared in small groups or one to one. All women attending are involved in discussions about women's health and screening and referred if necessary to the Nunga Women's Clinic or any other services they wish to access. After the last screening a women's health information session was planned for the next week at PACHS. Over time we have noticed that clinic attendances at PACHS rise greatly after screening sessions. It is an ideal way for students to "Check out" health staff before accessing services.

# Youth Plus

The Minister for Youth the Hon. Mark Brindal, MP, has organised a round table called Youth Plus. This is for young people to have a say about youth issues. There were about one hundred young people wanting to be a part of this group of fifteen. The selection process consisted of three interviews. It was a long wait to find out if I was going to be selected, as it had to go through Cabinet. Then came the good news, I was informed that I was one of the final 15 selected for Youth Plus. The launch of Youth Plus was held at Carrick Hill on 17th July 1999, we received a certificate, badges and a gold medallion to indicate our achievement. The

group will meet once a month for a two year period.



Hon Mark Brindal, Minister for Youth Affairs & Neville Abdullah-Highfold

# Nainmorendi:

# A Cultural Awareness Program for SHine SA staff

SHine SA has recognised the need for improved awareness of Aboriginal culture for its non-Aboriginal staff. During this period SHine SA staff participated in an Aboriginal and Torres Strait Islander cultural awareness training program. The aim of providing opportunities to improve staff awareness was to improve the quality of services for Aboriginal clients and to improve the partnerships between Aboriginal and non-Aboriginal staff, Aboriginal Health organisations and Aboriginal people in the community and ultimately to contribute to the improvement of sexual and reproductive health outcomes for Aboriginal people.

2-day workshops were provided with a total of 40 multidisciplinary staff members participating. The program was conducted by Aboriginal and non-Aboriginal facilitators. The workshops were



SHine SA staff and the facilitators of the Aboriginal Cultural Awareness Program

held at Tauondi College, Port Adelaide and information folders were provided to all teams. The following are some of the topics which were

- Impact of colonial settlement in South Australia.
- The Stolen Generations
- An Aspect of Culture Kinship
- The impact of discrimination
- Examining myths and stereotypes
- An exploration of an indigenous culture and introduction to Native Title



Aboriginal Cultural Awareness Training for SHine SA held at Tauondi College



(formerly Family Planning SA)

State and Federal government policies identify sexual and reproductive health as signficant health issues for people under 25 years of age. The highest concentration of young people in South Australia are found in the outer Northern (Elizabeth, Munno Para, Salisbury), outer Southern (Noarlunga), the middle and inner West and North Western suburbs as well as some rural and regional areas. These are also identified as areas of multiple social disadvantage with the poorest health status. Young South Australians are the future of this state and SHine SA is committed to working with young women and young men to improve their sexual and reproductive health.

# To work in partnership with young women and young men (12-25) to improve their sexual health, their access to services and

appropriate

information.

# Youth Drop-in – Aberfoyle Park

SHine SA's southern team has been co-working with Youth Answers (a group of young people advocating for young people in the Aberfoyle Park area) and Woodcroft Community Health Centre to provide a health drop-in service for young people in the Aberfoyle Park area.

The drop-in is currently open Monday and Wednesday afternoons to give young people access to information/flyers on sexual health, sexuality, relationships, drugs, alcohol, nutrition, domestic violence and various other health issues. We offer free pregnancy testing, counselling services or just an informal chat. We also offer free condoms/dams/lube, which are always a hit. We offer counselling services or just an informal chat, whatever is needed at the time.

The drop-in has taken a while to get going but, with word of mouth, advertising, support from Aberfoyle Park High School and young people popping in and seeing that we don't bite, numbers are on the increase.

Currently we are doing more work around increasing numbers and meeting needs of young people and the way we are going to do this is asking the young people themselves through a survey. We are working on the survey with the Student Representative Council and Teachers of Aberfoyle Park High School, Youth Answers, Woodcroft Community Health Centre, Second Story Youth Service to find out how we can improve the health of young people in the area. From the results we are going to make the service bigger and better than ever for young people.

Drop-In And Find Out More!



The City of Salisbury and supporting agencies including SHine SA and local young people jointly organised a massive youth festival called "OUTRAGE 98". This festival was held on 17<sup>th</sup> October at Pioneer Park in Salisbury. Activities and events were organised by a planning group that consisted of 4 workers from local agencies and approximately 8-10 young people.

The Youth Week Planning Committee worked hard for many months prior to the week to organise the events. It was expected that over 1000 young people from the northern suburbs would attend the festival. The young people on the planning committee contributed their ideas, suggestions and skills. The Youth Project Officer from the City of Salisbury coordinated the event and the supporting agencies contributed resources and worker time.

'OUTRAGE 98' included live music from local youth bands, drama, fireworks, food, health promotion stalls, and a huge dance party to end the evening. Due to the large demand for a local dance party, a ticketing system was in place so that people could get tickets ahead of time to guarantee entrance on the night. Young people and workers went to local high schools, youth centers and music stores to promote the event and explain the ticketing system.

There was a range of options for young people to get involved in on the day. There was an indoor performance area, a food and chill out area, outdoor performance area, a marquee for the dance party and a lawn area for a range of sporting activities as well as interactive health promotion stalls relevant to youth heath and wellbeing.

Each young person attending the festival was given a showbag with vital information on youth services in the area, freebees and giveaways as well as passes that enabled them to engage in sporting and recreational activities on the day.

Young people from the planning committee along with young people from the RIFF CAFÉ music project volunteered their time and energy to facilitate the running of the event. For example young people from the RIFF CAFÉ provided the security for the event.

Much thought and money had gone into ensuring that rain wouldn't ruin the event, as had happened the year before. BUT no one had predicted that gale force winds would come upon Salisbury in the early hours of Saturday morning when we were trying to get the tents and marquees up. As weird as it seems there was about 20 young people and adults working extremely hard to put these massive structures up. It seemed impossible to beat the winds and after 3 hours of persistence we thought we would have to cancel the whole event.

The planning committee really wanted the event to happen and an alternative venue was arranged. It was difficult because the festival was so large. We settled on the only available venue, which was the St Johns church hall in Salisbury. This was a considerable compromise in scale and many things got axed due the rush and circumstances.

All in all the festival was great and over 1000 young people attended the dance party with a huge line up to get in. The bands played and food was eaten and a heap of information was given out to young people. The young people who worked extremely hard under somewhat stressful circumstances should be congratulated for their persistence and dedication to their goals.

The RIFF CAFÉ held another youth week event the following weekend, which consisted of 15 live bands, and had a theme titled THE GOTHS, GHOULS AND GHOSTS SHOW. This was a huge success also.

Lets look out for up and coming youth events such as these and celebrate the oustanding achievements of young people in the community.



👱 🗮 Rationale

Aberfoyle Park Drop-In

# The Northern Youth Clinic "Salisbury Shopfront"

Working in a youth clinic is challenging, exciting, rewarding and sometimes overwhelming when one learns about the dilemmas some young people in the Northern Suburbs are faced with on a day to day basis.

At first meeting with a young person his/her issues may appear 'straight forward', but when gathering a sexual, medical and social history, it often becomes apparent that many young people have complex issues to cope with in their lives. Some of these issues relate to relationship difficulties with parents and friends, homelessness, abuse – physical, emotional and sexual, unemployment, drug and alcohol issues to name a few. Time is often spent assisting a young person to begin the problem solving process of managing their dilemmas, and helping with referral to other agencies.

There are many occasions when a young person will bring in one or two friends for support during their consultation with the nurse or doctor. This is always welcomed at the Shopfront Clinic as the staff are aware that it assists in making the young person feel safer and more relaxed during their visit. It also gives the clinic staff an opportunity to provide information and education to a wider audience. These consults require careful management and often the 'extras' have more questions than the client.

The Shopfront Youth Clinic does not advertise a 'drop-in' service, but staff are flexible about accommodating any young person who may 'drop in' for a consultation in an emergency, eg. ECP, a script for the pill or an infection check.

Currently we are looking at ways of extending the clinic, following a request from the Salisbury Youth Health Service. Our clinic numbers have steadily increased over the last 12 months which is an indication that it would be important to try and allocate some extra appointment times. Thanks must go to the Salisbury Youth Health Service Team for their ongoing promotion of our clinic, and for their support on a weekly basis to SHine SA Shopfront Clinic Team.



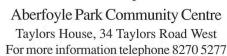
SHine SA Annual Report



# Youth Drop In

Confidential/Supportive

Monday & Wednesday 1 - 4.30 pm



### Do you want to talk or know more about:

Contraception; Sexuality; Sexual Health; Emergency Contraception; Relationships; Pregnancy (planned/unplanned); Counselling & Support; Sexually Transmitted Infections.

Drop in and find out more!

### We provide drop in:

Free Pregnancy Tests; Free Condoms and Dams; Research Information on health topics; pamphlets or just a chat!

### **Sexual Health Counselling**

By appointment: drop in to organise a time or phone SHine SA on 8325 8164 for issues or concerns around unplanned pregnancy, relationships, sexual identity, safe sex, information or anything to do with your sexual health.

# **Keep Safe & Stay Cool**

When someone ... keeps their partner under control ... calls them names ... uses put downs ... uses intimidation ... controls their partner's finances ... forces or coerces them into sex .. hits ... punches ... pushes ... shakes them ... embarrasses their partner in front of friends and family ... controls who their partner can associate with ... uses threats ... makes their partner scared ... This is violence: called relationship violence or domestic violence.



**Keep Safe and Stay Cool Coordinators** 

Domestic violence is so much more that physical abuse; it is when one person has control and power over a partner. This is the information that people need to know and understand to make informed choices in their own lives and the people around them.

SHine SA's southern team is currently working in partnership with Noarlunga Health Services in a peer education project called Keep Safe Stay Cool! Keep Safe Stay Cool is a based on a project called Peace at Home, which is a youth educators' training program used in Boston, USA and has been adapted for Australian use by Noarlunga Health Services and SHine SA.

What is peer education you ask? Well it is the training of people who then pass on information to their peers which can be done informally with friends and people around them or formally in presentations or workshops.

Keep Safe Stay Cool aims, through the process of peer education, to create a universal program which will increase young people's awareness and knowledge and will change attitudes, beliefs and behaviours about domestic violence. This in turn will create social change and reduce the incidence of domestic violence in the Noarlunga

We have just finished an 18 session training program with 6 peer educators (3 young men and 3 young women); covering topics including; what is domestic violence, what causes it, values and myths, human rights, effects, cultural issues, gay and lesbian relationships, building healthy relationships, and how to plan and present a workshop. The training was heavy going covering difficult topics with some very complicated issues had it's challenges, but the outcomes for the peer educators and workers involved have been well worth the challenge.

Currently thepeer educators are running workshops to educate their peers around what domestic violence is and how and what we can do about it. Feedback from workshops has been fantastic and a credit to the peer educators hard work, for instance: "useful information", "learned more about domestic violence", "the game was wicked fun", "good talking about relationships in groups", "I learnt about how people deal with anger", "how to manage my anger in different ways", "the amount of things that make up a healthy relationship", "I learnt that there are so many different types of abuse", "I learnt that domestic violence isn't just physical", "I learnt how serious domestic violence is!"

However, like many projects, money is running short and SHine SA and Noarlunga Health Services are currently looking for funding sources to continue the fantastic work the peer educators are doing.

Condoms have been proven to be the best method

# **Condom Vending Machines in School**

Should our school install condom vending machines in the toilets or

I think that it would be a good idea for more reasons than

I am sixteen nearly seventeen and go to a High School in the suburbs. People would agree with me that condom machines installed in the boys and girls toilets would be a brilliant idea.

Over the last few years the percentage of people seeing sexual

health counsellors for unsafe sex checks has grown immensely. When/if they install these vending machines the school should have a sexual health counsellor come out and talk to young people about promoting safe sex. Some people could be using glad wrap and rubber bands but that isn't very safe.



Cameron on Condoms

of safe sex. I don't think it would promote casual sex it would promote safer sex. If there is a machine in both the boys' and girls' toilets, girls could buy them in case their partner/s forgets. If younger people start to abuse the machines the toilets should be changed to years 10 and up.

People would rather walk into the toilets at lunch and recess and buy condoms than go up to

the chemist and buy them in front of everyone. The chemist usually only sells bulk packets instead of separately. It is also further to walk to a health centre so condom vending machines need to be installed in the near future.

# Peer Educator's Report - Keep Safe **Stay Cool**

I completed year 12 last year, and, not having much planned for 1999, decided I would dedicate myself to something that had some meaning for me. Something different. Keep Safe Stay Cool was just the thing.

Originally a team of six, Keep Safe Stay Cool now has four members due to members dropping out for personal or work-related reasons. Personally, I like to think of this process as a kind of 'survival of the fittest', as we are good friends as well as focused workers each involved in the project for our own reasons but working together for one goal: Creating awareness in the field of domestic violence, which we hope will

shrink the statistics. One in five households are domestically violent in some form; we would love to see that 'one' turn to 'none'.

Keep Safe Stay Cool's training program was intense (eighteen three-hour sessions in one month) and covered such topics as human rights, anger, gay and lesbian issues, causes of domestic violence, healthy unhealthy relationships,

(eventually) what can be done. One of my favourite sessions was on the cycle of violence in violent relationships, as it showed very clearly the stages the perpetrator goes through and opened my eyes as to why the violence continues and why the victim doesn't usually leave.

Knowing this is so important to be able to see things through the eyes of someone in a domestic violence relationship.

Come the time of our first presentations (to six classes of about twenty year 10s) we were all well equipped, even if some were a little more nervous that others. We were pleased with our efforts and we received plenty of positive feedback from teachers and students alike.

Being an 18 year-old male, I am of course invincible and all-knowing, but I can honestly say (with tongue no longer in cheek) that Keep

**Keep Safe Stay Cool Peer Educators** 



Safe Stay Cool has taught me so much that, because of the prevalence of domestic violence, I should have already known about. Now that the training is over it is up to my three workmates and I to spread the word:

Domestic violence is NOT ok.

# **Peer Education Workshop** at Flinders University

Each year SHine SA has had the opportunity to deliver workshops to Flinders University Education and Health Sciences students introducing the topic of peer education and sexuality. In October 1998 two health workers facilitated an interactive workshop about SHine SA's services, sexual health, sexuality and peer education strategies. It was an invaluable opportunity to deliver information regarding health promotion that in most cases was quite new to the students. It aimed to equip them to use these skills and knowledge during practical

A number of students have been accessing the SHine SA library and resource centre for presentations and work with their own classes, and have commented on their increased confidence to deliver sexuality information.

An unexpected development from these workshops at Flinders University was the employment of a health worker from SHine as a part time instructor at Flinders University. This has strengthened the links between the two institutions and benefited both parties.

# **South Coast Inspirations**

South Coast Inspirations is a fantastic example of Youth Participation working very well in rural areas of the Fleurieu Peninsula, including Victor Harbor, Mt. Compass, Goolwa, Port Elliott and Yankalilla. The group is comprised of 30 students aged 13 to 18 who live in those areas and have passion and energy for developing services for other young people.

The project is being coordinated by Southern Fleurieu Health Service and supported by local and statewide services, including SHine SA. Throughout the year, forums are held

> every six weeks health. The first project has been

these students to get together, to plan develop their ideas based on the needs of young people in the area. Some of the most urgent issues highlighted have been recreation, transport and

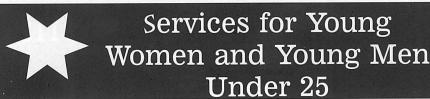
to develop an under age rave party during which there will be information from services available, and information about harm minimisation strategies.

Another area of work for the group is to establish a dropin clinic with a doctor present provide sexuality information and health care. SHine SA workers are collaborating with the young people, other workers and local doctors to assist the

process. It is hope that the drop-in centre will move to different locations to enable easier access for all young people living in the areas mentioned.

The most impressive aspect of this work has been the dedication, commitment and knowledge of the young people involved with the project. Every forum and event has been established by South Coast Inspirations, which is the name they gave themselves. The ideas already being promoted can be seen within the artwork designed by Tristan Goodfellow, a 16 year old man from Myponga. This is an excellent example of what is being achieved in the Fleurieu Peninsula





**Youth Clinics** 

### **Salisbury Shopfront**

Shop 4 72 John Street Salisbury Appointment Recommended. Tel: 8281 1775

# Second Story Youth Health Service (City)

57 Hyde Street Adelaide

Appointment Necessary. Tel: 8232 0233

# Noarlunga Youth Clinic

Alexander Kelly Drive Noarlunga Appointment Recommended. Tel: 8384 9258

# Drop-In Information Taperoo Youth Centre

403 Victoria Road Taperoo Tel: 8248 2122

# Young people are having a greater say about the services that SHine SA provide!!!!

In March 1999, a new project started, whereby a group of young people and a Community Health Worker from SHine SA began working together to develop a Youth Participation Model for the whole organisation. This project will clearly outline how young people can contribute to the ongoing development, maintenance and evaluation of SHine SA's services to young people. This is very exciting because young people will have the opportunity to be involved in the structure and running of the organisation in a greater and more valued way, as well as having formal ways to feedback their experiences of the services

SHine SA has a long and successful history of working in partnership with young people in regards to the services that are provided in the area of Sexuality and Sexual Health. Young people have co-written proposals and funding applications for projects. Young people have participated in forums, consultations and surveys. They have been an integral part of shaping projects and programs. They have been trained and employed as peer educators to deliver educational programs to other young people. Young people express their ideas and opinions in our clinics or counselling service as well as our community groups. They have also been trained and employed as Youth Consultants in our professional education courses.

The Youth Participation Model project has been researching approaches and models of youth participation here in Adelaide and Australia as well as overseas to see what works and what doesn't. The findings of the research will help in making crucial decisions about what this model will look like and how it will be implemented.

A Youth Advisory Group (YAG) has been

established. The six young people on this advisory group are helping the worker in the development of the model and providing guidance and accountability to the project. These young people have a range of life experiences and perspectives as well as many ideas and opinions about what the model could look like and how this will benefit other young people. Members of the Y.A.G. are paid for their

time and skills and will have a considerable amount of influence and decision making power in regards to the final outcome. They are assessing and making recommendations about what levels young people could be involved in within a Sexual Health organisation, with respect to some young people wanting to be involved in a major way and some in a minimal way.

Other young people will also be consulted in regards to the model when there are some draft proposals in place. This will ensure that a larger group of young people can have input into the process and shape its development. Young people

who have been peer educators or youth consultants will also feed into the process through one to one interviews about their experience of youth participation within the organisation.

Staff from other agencies have been interviewed to give their thoughts about what youth participation strategies have and haven't worked within their organisations.

SHine SA staff will also be interviewed to give their insight into what workers say are effective youth participation approaches within the organisation and what their hopes and suggestions are for the future. Workers ideas will then be combined with the views of the young people. This will then be fed into the overall model and its principles, strategies and approaches.

Overall the model will mean greater access for young people to give input into the services that SHine SA provides. This will then create more opportunities to work in partnerships with young people and provide services that better meet the health needs of young South Australians.

Look out for the up and coming launch of the model.....We'll keep you posted as well as the report of the project, which will document the latest findings in regards to Youth Participation.

If you are a young person and want to find out how you can be involved in our organisation please contact one of the regional teams, or check out the website for more information.

Youth Advisory Group: Youth Participation Model Project, July 1999



# **★** Fact or Fiction **★**

Drinking alcohol can lead to a person's participation in unsafe sexual practices.

**True:** Alcohol (and other drugs) can affect your level of control by decreasing your inhibitions and affecting your judgement and communication abilities. Hence, this may lead to your participation in unsafe sexual practices.

# Reality

One of the resources

developed & used in the

**Reality Program** 

The Northern Team has had the opportunity to work with Peer Educators from the "Reality -Our Truth of being a young Parent" project. This project is managed by the Young Womens and Childrens Support Services Coalition Inc. The project offers a unique opportunity for students to hear from young women who are peer educators and mothers, about their experience as an adolescent mother. information presented is realistic and thought provoking enabling young people to make good choices for themselves.

This project started with grants in 1996/7 that helped to develop a pilot program for secondary

schools. With the support of a community artist the young women developed an innovative resource which is used to show a comparison of life as an adolescent and life of an adolescent parent. The resource is a large banner and a number of icons depicting various aspects of young people's lives.

The Northern Team became involved when the peer educators identified that there was a need and an opportunity to provide sexual health information during their programs. Workshops have been provided for a number of peer educators and have included the topics of:

Values Clarification: giving the young women opportunities to explore their values around a range of sexual health issues including abortion,

STREET

LEVEL

sexual diversity, age of consent and women's rights.

Contraception: Methods available to young people, issues that impact on a person's ability to access and use contraception, how much information do young people

contraception and services available for young people to access contraception.

After we started providing sexual health training the peer educators decided they had time at the end of their program to provide some sexual health

information to students. More

need to have about

icons were developed and now the sexual health component is an important part of the session.

Some of the peer educators have gone on to further training and have participated in the Community Education in Sexuality training at SHine SA

One peer educator is now involved in the Youth Advisory Committee of the Youth Participation Model project.

As a team we look forward to continuing our support of this very worthwhile and exciting project and will soon be offering further training opportunities for the peer educators.

If you would like more information about this project, contact Nicoline Kovatseff on 8359 1022.



Counselling - Group Work - Referral & Advocacy - Health Information - Training & Tutoring - Work Readiness Support - Job Placement

SHine SA staff this service on Wednesdays 1 - 4.30 pm

Developed by the City of Charles Sturt and City of Port Adelaide

433 Torrens Road Kilkenny - \$\mathbb{Z}\$8244 4700 (Opposite Westfield Arndale)

202 To Tens Roda Rincently 2021 Troo (Opposite Wedgetta Innation)

# **Young People Down South**

This year the Southern Team has used a few different ways to hook up with young people in our region.

We've been to expos, a music festival, drop-ins, health days, a heap of forums and even a camp.

The expos gave an opportunity for service providers to "show their wares" at local high schools and were organised by the Metropolitan Early Intervention Team and the Adelaide Uni by the Student Union's Sexuality Officers. This gave us some excellent opportunities to access the entire student population for a lunchtime stall - the SHine SA stalls were always popular for our "goodie bags". These expos were also a great chance to do some professional networking with the other agencies involved.

"The Big Bounce Theory" music festival was another opportunity to promote SHine SA with a stall - and listen to some really wild bands at the same time. This event was one part of Youth Week's events down south. At the end of Beach Road, next to the white sandy beach and crystal blue waters, on a stinking hot day, with food, bands and heaps of information and or course condoms galore.

A number of local schools have been running Youth Health Days for their students. These days give us a chance to present a safer sex workshop as part of a program involving other service providers. It's good to see schools taking an active part in their students' health.

This year SHine SA has participated in a number of forums that have been run to give young people a chance to voice their opinions directly to service providers. The "Youth Participation - Out a Loud" forum and the "Surviving Unemployment" conference both had a high level of youth involvement - and this shone though in the relevance of the discussions.

Both re-enforced the fact that young people *can* make an impact!

Ahh, the joys of camp life - a camp provides the perfect relaxed atmosphere for discussing sex and sexuality. This was the setting for a safer sex workshop for The Hallet Cove Youth Project's annual camp (this year at Blanchetown). A camp is a great way to educate about sex and sexuality! Can't wait 'till next year!

These events, together with all the usual networking and co-working they require, has provided a lot of valuable partnerships both with Young People and the Youth Sector in the southern area.

Ps. A huge thanks to all the Young People and the Youth Sector.

# Sex Week 99

SHine SA was approached by Adelaide University's two student sexuality officers to participate in Sex Week 99. This was a weeklong fun and awareness campaign celebrating sex and sexuality

As part of this, SHine SA was asked to participate in a Sexy Services Information Day on May 11th, by having a stall during the lunch time break to advertise SHine SA services. This was an opportunity for all students to seek out and get information about the different types of sexuality, sexual health services in Adelaide and to find out relevant information from services they may be interested in. There were around twenty services/agencies represented, and a large number of students accessing information about SHine SA services as well as accessing free

condoms, dams and lube from the stall. Many people wanted to know about the importance of using lube with condoms and dams.

This was a good opportunity to connect with students from our many communities of interest including:

- Gay, Lesbian, Bisexual and Transgender people
- People from culturally and linguistically diverse backgrounds
- People with disabilities

It was also a good opportunity to promote our work and demonstrate a commitment to other communities that we see as important to work with

SHine SA Annual Report



(formerly Family Planning SA)

To work in partnership with people from culturally and linguistically diverse backgrounds to improve their sexual health.

# Objective Ctive



Service delivery to communities from culturally and linguistically diverse backgrounds has been a major focus for SHine SA during 1997/98. Historically, these communities have not adequately accessed SHine SA services because of language barriers, isolation, different health priorities and cultural hesitation in addressing sexual and reproductive health issues. SHine SA has adopted pro-active measures to reach out to these communities by identifying their needs, by liaising and networking with Community Health Workers and Welfare Workers operating within those communities and by conducting culturally appropriate educational programs on sexual and reproductive health matters.

# **Youth Camps**

We had the opportunity to organise, in collaboration with other health agencies, two very successful youth camps. On 28th and 29th September last year, 20 very enthusiastic young people from Africa attended a well supervised camp at the Woodside Accomodation Centre in the Adelaide Hills. The camp had been highly recommended to us by African men and women who had attended previous programs run for them. Funds for the camp were provided by the West Torrens Council, the Female Genital Mutilation (FGM) program and SHine SA. In addition women from the African communities volunteered their time.



Partipants at the African Youth Camp came from various African countries eg Eritria, Ethiopia, Sudan and Somalia

These young men and women came from various African countries e.g Eritria, Ethiopia, Sudan and Somalia and they took time to talk candidly about a number of matters which directly concerned them i.e

- Cross cultural issues
- Settlement issues
- Youth issues
- Communication and relationships.

We also discussed issues surrounding racism at school and other school related issues, mental health and sexual and reproductive health. A number of guest speakers from the Police, the Multicultural and Mental Health Access program kindly donated their time and provided the participants with very valuable information. Two youth workers from the Multicultural Community Council and the West Torrens Council organised and supervised the many recreational activities that the young people were able to engage into e.g Horse Riding, Bush Walking and other games. We were also very ably assisted by a Welfare worker from the Wesley Uniting Mission and to all these people, on behalf of the participants - we at SHine SA extend our sincere thanks and

gratitude. Importantly though, our biggest "thank you" must go to the 20 young people who participated with great enthusiasm and fun in the program.

The feedback from the camp was very positive with many of the participants seeking other opportunities to "do it again". They enjoyed the food, the relaxed atmosphere, the discussions and information sessions but not ....the cleaning and chores they all had to do.

An important spin off from that Camp has been the continued involvement by other health organisations eg the Parks Community Centre and Migrant Health Services, in running programs for African young people. These sorts of programs are essential in assisting these young people to settle more easily in our Australian society.

Further in November last year, armed with that previous experience, we organised a *Latin American Youth Camp* with the assistance and collaboration of the Dale Street Women's Health Centre, the Federation of Spanish Speaking Communities and the Multicultural Community Council. Some 12 Latin American youths (a



Participants at the Latin American Youth
Camp

few were "second generation latinos") attended in very pleasant surroundings at Goolwa. Similar topics were addressed and discussed as was the case with the African Youth Camp and we were very ably supported by guest speakers from the Police, Centrelink, the Multicultural Communities Council and volunteer parents.

The participants also talked about issues surrounding health and alcohol awareness. They also took great pleasure in the many aquatic activities on offer e.g surfing under the supervision of a professional instructor. As was the case with the African Youths Camp, the feedback was very positive with many of the participants acknowledging the opportunity to talk openly in English/Spanish and discuss issues which may be taboo in the family home and also the chance to share their ideas and concerns with other youths from their community. They enjoyed the range of activities organised for them and suggested that consideration be given to the organisation of another camp next year. They also saw the need for the creation of a Latino Youth Support Group as well as a need to better educate their parents on youth issues, particularly health and adolescent issues.

# Multicultural Project & Forum

In last year's Annual Report I introduced the Multicultural Task Group, a project of Noarlunga Health Village. The project started in 1994 as a small conversation group on health issues for migrants and built up to quite a large group of 20 different nationalities with their own newsletter. A SHine SA worker from the Southern Team attends the group's meetings.

The five year priority commitment by the Noarlunga Health Village to the multicultural project is currently under review and although coordinated support will continue in the short term – it is hoped that cooperation between agencies will ensure the project continues as a strong community based program.

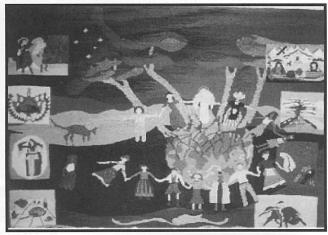
The group took the opportunity to express its appreciation of support, raise current issues, and voice concerns for the future at the Multicultural Forum, which was held on 13<sup>th</sup> May 1999 at the Noarlunga Community Arts Centre. The Forum was co-hosted by the City of Onkaparinga, Noarlunga Health Services and Migrant Resource Centre of South Australia and all agencies agreed with the need to assist the group in this time of transition to community ownership.

The intention of the Forum was to provide an opportunity for service providers and the migrant community within the City of Onkaparinga area, particularly more recent migrants, to come together. The purpose of the Forum was to share information and discuss issues regarding the range of services available in the City of Onkaparinga.

As a service provider we also had participated in the Forum with a display of our pamphlets and Annual Report.

The Forum was chosen for the launch of a tapestry, created

by a group of women from the Multicultural Task Group. The women incorporated themes of their cultural heritage, migration and resettlement in the Southern region into a tapestry called "Common Ground" (see photo). This



The women incorporated themes of their cultural heritage, migration and resettlement in the Southern region into a tapestry called "Common Ground"

beautiful, colourful example of art shows how people from different cultural backgrounds can work together.

# Multicultural Youth Speak Out

Our organisation ran a very successful Health Workshop at the Multicultural Youth Speak Out - a 2 day gathering of youths from a diversity of cultural backgrounds, organised by the Multicultural Youth Network and the Office of Multicultural and International Affairs and Multicultural Community Council.

At our Health Workshop, participants were able to present their ideas and concerns in the area of health (including sexual and reproductive health) to Ms Christine Charles, Senior Adviser to the Minister for

Human Services. She answered many issues and questions raised by the young people present. A number of observers from various government departments were also present and took note of the issues that were raised and the strategies proposed by these young people. A report of all the workshops is currently being prepared and will be presented to the relevant government

In February this year SHine SA had a display of

services we offer to the Vietnamese Community.

We were able to display posters and photos of

the programs we have run with the Vietnamese

community. We also displayed our pamphlets

This speak out was designed so that multicultural

youth could discuss, and then present to ministers

their ideas on a range of issues affecting them,

such as family, drugs and alcohol, racism, and

health. Groups of about 15-20 young people

worked with workers from relevant agencies on

the various issues, then presented their ideas

together to the larger audience of students,

SHine SA had a display at the Multicultural

Youth Speak Out. The display contained

posters, pamphlets, condoms, lube, dams, and

information relating to sex and sexual health. The

display had specific information on sex and sexual

**Young Participants** 

workers and ministers.



Young People at the Speak Out

departments in a bid to address the health and welfare issues and other issues raised in relation to youths from diverse cultural backgrounds.

This gathering provided a great opportunity for young people to focus on an area which from their perspective can often be taken for granted

in Vietnamese and English. The festival was very

well attended by the Vietnamese community.

Different government and non-government

agencies had displays of information. The festival

was organised by the Vietnamese community.

Park

A Young Person's View of the

**Multicultural Youth Speak Out** 

i.e health, welfare and to discuss their needs and concerns in a friendly and relaxed atmosphere. They commented at the conclusion of the program that they had found the gathering very productive and recommended that more regular opportunities be given to young people to voice their views on issues which affect them directly.

From our perspective, we at SHine SA welcomed the opportunity to become involved in such an important and very worthwhile initiative and see the work done with young people of

today in better educating them in health issues (in particular sexual and reproductive health) as a major investment in the concept of preventative health. It is also an important opportunity for mainstream services to take stock of the needs and concerns of young people and to that end, we applaud the involvement of the various government departments that attended.

### **Multicultural Afternoon Tea**



# Other

We have established in each regional office within

# The Future

We are in the process of finalising arrangements for a program involving women from Middle Eastern communities. As well, we are planning for a program targeting Vietnamese youths and also for Latin American parents. We will continue our efforts in the area of community education and will encourage the use of our services through continuous and appropriate liaising with ethnic ommunities, mainstream services, specific services, advertising and promotion in the ethnic media, the distribution of educational material on sexual and reproductive health in ethnic communities. We will continue to make significant contributions to workshops and conferences in order to raise the awareness of the needs of our clients from diverse cultural and linguistic backgrounds.

# **Break Free** - Hoi Sinh

SHine SA also participated in facilitating a workshop on "Health risks associated with drug usage, sexually transmitted infections (STIs) and minimisation strategies" as part of the Break Free - Hoi Sinh Conference on Alcohol and Other drugs. The conference was organised by the Vietnamese Community in Australia for workers involved in working with the Vietnamese community and who were concerned about the effects of alcohol and other drug use.

Other agencies who assisted in the running of our workshop included the Parks Community Centre, the HIV/AIDS Peer Program from the Multicultural Policy and Program Unit and the Drug and Alcohol Services Council. The participants found the session to be very useful and informative.

# The Parks Clinic

A new SHine SA Clinic is held at: The Parks Community Health Centre

Trafford Street, Angle Park Clinic Hours: Mondays 1.30 – 4 pm **Appointments:** Telephone 8243 5611 (Parks reception)

Interpreters can be arranged free of charge.

This clinic is run in partnership with The Parks Community Health Centre. It is staffed by a SHine SA Community Health Nurse and Doctor and a Bilingual, Bicultural Community Health Nurse from The Parks

# **Biosciences Conference**

In May of this year, SHine SA, Migrant Health Services and the Female Genital Mutilation Program (MPPU), presented two workshops at the well publicised Australian Sexual Health Conference held this year at the Hilton Hotel in Adelaide. This conference was attended by medical practitioners and other health practitioners from Adelaide, interstate and even, overseas. It was the first time at such a conference that cross cultural issues related to migrants and refugees have been addressed as a specific theme and we at SHine SA were very proud to be able to co-present these workshops which covered such areas as:

- Working with different communities facing different health issues
- The social, physical, physiological and emotional issues faced by ethnic clients about which medical practitioners should be aware.

The workshops were well attended and generated a lot of discussion and opinions. The feedback was certainly very good with all participants reporting that they had found the workshops to be useful and had raised and confirmed their awareness of cultural issues in their work environment.

# Vietnamese Festival at Regency



# **Initiatives**

SHine SA a worker representative with a focus on clients from culturally and linguistically diverse backgrounds. We feel that this is a significant step in the identification of our clients' needs as well as in the provision of the best possible service to them and educational programs. We continue to seek better and more effective ways of delivering our services. To that end, we have provided to our staff regular inservice training eg, interpreting services, on cross cultural issues so that they can be more responsive to the needs of our clients. We have policies in place to deal with such things as client complaints, service delivery and the use of Interpreter services. We have taken steps to provide our clients with greater access to literature in their chosen language through more translated pamphlets.

# Multicultural

On 5th March 1999 the East/West team of SHine SA held an afternoon tea to promote the clinic run at Port Adelaide Community Health Service to people from diverse cultural backgrounds. The clinic is run every Friday and is open to the whole community however SHIne SA was aware that many people from migrant and refugee backgrounds may not know about the clinic and so decided to promote the clinic directly to these communities. The afternoon tea was very well attended by many leading members of the ethnic communities and workers from other health agencies and this networking has resulted in an increase in clients from a variety of cultural backgrounds. In addition the latest SHine leaflets which have been translated into many different languages were on display and given out. The clinic is staffed by an experienced female nurse and doctor who have experience in working with migrant and refugee people and interpreters can be arranged at no cost to the client. SHine SA hopes that continued networking in the western area will see even more people making use of these specialist clinical services in the Pt Adelaide area.

context, ie pamphlets in a variety of different languages. Before the conference and during the breaks the participants showed a strong interest in the sexual health information, amid much giggling and initial shyness. One young man asked what 'lube' was, and on hearing the answer replied he was much too young for such stuff, but was later observed to frequent the collection of both condoms and lube at a steady rate for the entire two days. SHine SA's presence at the conference was very visible, colourful, well attended, and served as a constant reminder that safer sex and open discussion about sexual health concerns is okay for young people to engage in. Overall we found the response

health that was presented in a multicultural

excellent. We were both surprised and excited that 14-17 year olds were so open and honest about sex and sexual We were very impressed with the maturity of the people who asked us about information, took information, and also took information. condoms, etc for their friends. We gave out so many condoms, lube, pamphlets, posters, and general information on SHine SA. Thus, the majority of the participants

Multicultural Youth Speak Out would have left with some information from SHine or now know of the services that we provide.

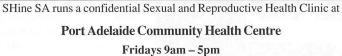
This year, we have had a very busy and successful time in working with people from culturally diverse backgrounds. We have maintained our strong commitment to the improvement of service delivery for our culturally

diverse clients and have focussed very strongly on the work we do with young people

**Multicultural Participants** 







• Pap Smears • Safer Sex Information • Men's Sexual Health • Contraception

• Breast Checks • Sexually Transmitted Infection Checks • Menopause • Drop in Pregnancy Tests • Unplanned Pregnancy Counselling • HIV, Hep B and C Testing and Counselling • Any Sexual Health Concern

> To make an appointment telephone 8364 5033 Interpreters can be arranged free of charge



(formerly Family Planning SA)

To work in partnership with people with disabilities, their carers, advocates and service providers to develop sexuality education and advocacy services for people living with a disability.



The Strategic Directions document identifies the high need for information and education in the area of sexuality and sexual health.

SHipe SA's Strategic Directions document has identified groups of people who have been sent as a sexual manner.

SHine SA's Strategic Directions document has identified groups of people who have most need and least choice in accessing sexuality education and information. One of these groups is people with disabilities.

There is evidence that people with disabilities are more at risk of sexual abuse and have often not been offered appropriate education about sexuality and sexual health.

Some community attitudes and values do not acknowledge the sexuality of people with disabilities and the needs of their parents, guardians, carers or workers. This is an area of priority for SHine SA.

# Launch of Resources for Women with Disabilities

On 24 September 1998 the Minister for Disability Services, the Honourable Robert Lawson, officiated at the launch of information resources for women with disabilities.

The function took place at Disability Information & Resources Council (DIRC) and was well attended by both women with disabilities and representatives of many of the agencies who work with clients who have a disability.

Sue Gilchrist (SA Cervix Screening Program) opened the proceedings and Kathy Nirta (a member of the Consumer Representatives Committee) was the guest speaker. For those guests who were hearing impaired the speeches were translated by a sign interpreter.

The project initially began with the SA Cervix Screening Program developing resources for women with an intellectual disability, to provide them and their carers with information about Pap smears.

The project grew with the Cervix Screening Program funding SHine SA to employ a project

worker to promote these resources, assess the needs for information resources for women with other disabilities and develop a directory of services where women with physical disabilities could have their Pap smears.

The outcome of the project has been the development of a number of resources including:

- a pamphlet for women with physical disabilities letting them know where there are adjustable beds so they can have a Pap smear
- a flip chart and comic for women with intellectual disabilities and their carers
- braille, large print and audio cassette for women who are visually impaired

These are all available from the SA Cervix Screening Program and can be ordered by phoning the Program on 8226 8181.

The Launch of the Resources for the "Women With Disabilities Need Pap Smears Too" Project



# \* Fact or Fiction \*

The contraceptive pill may be obtained from supermarkets and petrol stations.

**False:** You must get a doctor's prescription in order to go on the oral contraceptive pill.

# It's on for young and old! Mental Health Week

Mental Health week is a yearly event. Consumers of mental health services, survivors of mental illness and the mental health system staff, tend to be the largest focus of attention in Mental Health Week. SHine SA believes that sexual health and healthy relationships are an important part of any person's mental health. We also know that sexual health and relationships support, are often a neglected area in mental health service delivery. It is in this light that SHine SA this year, decided to have a public presence for one day of Mental Health Week. We set up a stall in Rundle Mall amongst peer support organisations and neighbourhood houses for people experiencing mental illness. Unfortunately, the day we chose to be there, few people seemed to have a case of the shopping frenzies, so we almost saw more bricks than people. Better luck next time.

We also understand the funding support for this event is not likely to continue or improve, so SHine SA will continue to improve its availability to the mental health effort in other ways. SHine SA, looks forward to a productive working relationship in the future with the many dedicated and hard-working staff and consumers who are inspirationally turning mental illness into mental health.

# Sexuality & Protective Behaviours Program

A Sexuality and Protective Behaviours Program was run over 13 weeks at Dover Gardens Primary School.

Eleven students aged between 8 - 13 years with varying disabilities attended.

Parents and Caregivers attended an information evening where they were able to explore their fears and concerns about introducing the topic of sexuality to their children. Information was provided on the program outline and activities and feedback between school and parents was encouraged throughout the program.

A SHine SA Community Health Nurse and the Class Teacher facilitated the program and a SHine SA Community Health Worker was able to gain experience in working with young people with special needs. The topic of each session was addressed in a follow up session with the classroom teacher during the week. This proved to be very beneficial to the students as



Kelly, SHine SA Community Health Worker, with Matthew (receiving award), Ricky & Ryan.

the topics could be expanded further to assist their understanding.

The program covered a wide range of sexuality topics including feelings, body awareness, touching, friendship, relationships, conception and birth, recognising early warning signs and developing a network of people students can talk to about personal safety issues.

It was a challenge for the facilitators to develop some innovative resources which were more relevant to the group's age and specific needs.

Some highlights of the program included: the students demonstrating increased levels of self confidence and group skills, enthusiasm for role playing and activities such as designing a relationships poster and making the friendship wall.

The program concluded with a shared celebration and presentation of certificates acknowledging the students participation in the program.

# "It's like having a coke but not being able to drink it"

A research project on the sexual health of people who live in boarding houses and other residential facilities in the western region of Adelaide

SHine SA recently completed a research project that examined the sexual health of people who live in hostels in the western region of Adelaide. This research was funded by a Health Enhancement Research Grant from the Department of Human Services.

The principal investigator for the research was Sally Gibson and Ralph Brew was the Project Officer for the research project and conducted most of the interviews. Murray Couch from the Australian Research Centre for Sex, Health and Society at La Trobe University was a consultant to the study. A reference group was established to provide a forum to discuss the research, emerging themes and to assist in strategies to recruit people to be interviewed. Members of this reference group were from the North Western Mental Health Service, Supported Residential Facilities Unit DHS, Intellectual Disability Services Council, Supported Residential Facilities Association (SA Inc) and there was also a consumer representative.

There were a number of challenges in conducting this research. Many people who live in hostels have a mental illness, intellectual disability or both. The research process tried to enable the participation of people with intellectual disabilities but this proved to be difficult and most people interviewed were those with a mental illness.

Providing a space for people to articulate their experiences and desires around sexuality and sexual health was considered to be a vital part of the research process. The research methodology consisted of semi-structured interviews that were then transcribed and analysed for common themes. In addition focus groups were run with workers and owners to provide further insight into the sexual health experiences of hostel residents.

One of the significant findings of the research was that almost all of the people interviewed believed that they would not be allowed to have sex in the places they lived. As one man said:

A: "The rules are in that place you can't have

- Q: "Mmm, What do you think about that?"
- A: "I think it stinks.....Its like, its like...you bring a bottle of coke home and you can't drink it...you know what I mean."

(Greg, 36 years old)

Even though there was a perception that sex was not allowed, many people reported personal experience of sexual activity in the facilities or had observed that this took place. This sex was often furtive and unsafe and so the perceived ban on sex actually greatly increased people's risk of infections and unplanned pregnancy.

The key finding from the research was that people who reside in hostels experience significant barriers to achieving healthy and safe sexual relationships. These barriers can be grouped under the following headings:

- 1. The physical and social context of the residential facilities.
- The impact of illness and medication on sexual functioning and relationships.
- The lack of support and education on sexual health issues.

A report has been written on this research which contains recommendations for action that should be taken to improve the sexual health of people who live in the residential facilities. This report concludes with the following statement —

"Sexuality is often an overlooked issue. It is considered too private to talk about or less important than other issues such as the management of the mental illness, income or employment. This research has shown however that sexual health is a major determinant of a person's overall health and well being, and that to ignore this dimension of an individual's humanity is to severely limit people's potential to live emotionally and sexually, safe and satisfying lives."

Contact the SHine SA Library for a copy of the report which is titled "Its like having a coke but not being able to drink it": A report on the sexual health of people who live in boarding houses and other residential facilities in the western region of Adelaide.

# 1:3 Ratio Works Well

# Sexuality Education for Young People with Disabilities

SHine SA and IDSC Options Coordination Western Suburbs, had a rare opportunity to maximise learning opportunities for a group of vulnerable young people with intellectual disabilities in 1999.

With two workers from each organisation and a group of about 12 young people, the Sexuality Education Program which they collaboratively provided, offered opportunities for connection and learning which is often denied other similar groups.

Run over a 10-week period, the program was modelled on previous programs, which have been run in the disability sector by disability workers and sexual health staff. Funded by IDSC Options, Western Suburbs, the program enabled young people who were at risk of sexual exploitation or difficulties relating to past abuse to spend time learning together in a safe, fun and respectful environment.

With the combined experience and creativity of the disability and sexual health workers, and the high ratio of staff to learners, group maintenance and management of challenging clients could be maximised. The commitment of IDSC Options to supporting young people in this way was fantastic. It gave the staff involved the opportunity to focus the program more strongly to particular participants' needs and to develop stable working relationships through the duration of the program.

We are also very grateful to the staff of the Parks Library for letting a raucous and time-limitchallenged group use their space free of charge.

# Tanunda Women's Group

October & November 1998 marked the beginning of the Tanunda Women's group. Prior to the commencement of the program we journeyed to Tanunda to spend time with the group to access their current knowledge and to find out what they wanted in the program. The program was requested by Barossa Enterprises, which is an employment agency for people with a disability, based in the Barossa Valley.

The women themselves requested the program. Many had come through their schooling prior to programs on adolescent development being set up. Most had had limited opportunities to make friendships during their growing—up years, which are an important source of information around women's issues. They had all had limited access to accurate information due to their learning difficulties. They now were in a supportive working and living environment, which encouraged them to seek out information around women & relationship issues.



Tanunda Women's Group From left: Christine, Elizabeth, Brenda, Belinda

The program was for 7 weeks with each session

lasting 2 hours. Topics covered included body

parts, puberty, public & private, feelings,

friendships, relationships, reproduction.

The group consisted of 10 very enthusiastic women and 4 carers who assisted the women

Tanunda Women's Group

From left: Belinda, Alison, Anne, Debra,

Laurine, Fiona

pregnancy, sex rules, sexual responsibilities and

women's health issues.

with tasks during the program. After each session we had "Fun work" which consisted of worksheets that they completed with their carers prior to the next session.

their carers prior to the next session. These worksheets were used for revision at the beginning of the next session.

Games, drawings and videos were popular. There were mixed feelings and reactions to the birthing video, but all agreed that it was good to see. After several of the sessions we had a shared lunch before we all went back to work. All the sessions, except the final celebration, were held in their workplace at Tanunda.

Our final session included a tour of the Northern base, the awarding of certificates and a celebration lunch. At the completion of the program the women had an extra treat of being able

to check out the shops at Munno Para.

Some of the women will be part of an extension of the program later on in 1999 when we hold sessions for couples, which they and SHine SA staff are looking forward to.

A Men's Program is to commence at the same workplace in July 1999. Workers are also hoping to attend a workshop later in 1999.

Tanunda Women's Group: From left: Emma, Louise, Maureen, Flana

# Overview of Southern Service Provision

This year, as with many previous years, working side by side in partnership for people with disabilities is an integral part of our service provision. This is done through 1 to 1 counselling/education or with a variety of group work activities. The Southern Team continues to have requests from most areas of the region, which keeps us on our toes.

The group programs have the flexibility of 5 weeks to 12 weeks depending on the needs of the group. Consultancy around issues and program planning with workers from agencies for people with disabilities is also an important part of our work.

A new group for couples with an intellectual disability 'living and loving together' has

months, and is commencing early August. The interest by couples has been tremendous and both facilitators from southern and support services teams, are really looking forward to this pilot program. The couples program has included such topics as communication, understanding the male and female bodies, sexual relationships, dealing with feelings, stress and parenting, with the help of our new resource the "vital reality doll", which is an educational tool to assist people who are considering parenting. Feedback from support workers is that the seven couples are eagerly awaiting a specific group program targeting their needs of living and loving together. Another new venture! What will we work on next?

overcome a few obstacles over the past six

# Disability in the North

During the last year the Northern Team has worked in collaboration with IDSC to provide programs for young people with an intellectual disability. We have successfully completed two programs: "Girls Gang" run over 8 weeks and a Young Men's group that ran for 9 weeks. Both groups were run at Salisbury office of IDSC.

The groups happened as a result of a need identified by workers, who had noticed through conversations with the young people that they had limited and often misleading information about puberty and sexual health issues. The Northern Team agreed to run the programs with a proviso that IDSC workers would be involved and through their participation in the programs would become more confident in providing information and education on

sexual health issues to their clients.

Topics discussed included: male and female body parts (including private and public), puberty, sexual hygiene, reproduction, feelings and emotions, friendships and relationships, public and private places, sex rules and sexual responsibility. Throughout the programs there was an emphasis on protective behaviours: keeping yourself safe. An information

night for parents and carers was offered prior to the start of each program to provide parents with an overview of the program and for us to answer any questions they might have about the program.

A variety of strategies were used to keep the attention of the young people. Whereas the young women loved to do work on butchers paper, the young men preferred videos or activities where they could make lots of noise. The more noise the better! Each person was given

an exercise book in session one and they were encouraged to complete the 'fun work' sheets that were given out each week. The "fun work" idea was so workers could assess knowledge but it also encouraged the young people to share their new knowledge with parents and carers. We had good feedback about this from parents and carers.

At the start of the program each group developed their own Group Agreement of what they thought was needed to make it safe to meet each week and discuss 'sexy things'. These included: no butting in, be nice and polite to each other, no teasing, no rude body noises, hands up to speak. We had consistent numbers each week and that was achieved by having transport available to



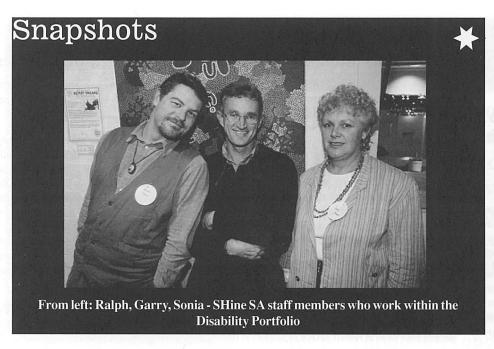
Young Men's Group

enable the young people to attend.

Each program finished off by having a celebration with lots of goodies to eat and a certificate of attendance was given to each participant. The young women chose a 'disco' theme but the boys wanted something physical: so we went bowling!!

All in all everyone had a good time with lots of learning occurring for all involved.

SHine SA Annual Report





Cornelia & Phillip at the Name Change Launch October 98

# Update Meetings for SHine SA Disbility Workers

SHine SA disability workers are supported to meet 4 times per year to discuss disability resources and programs.

The meeting is an important part of the disability work within the agency. Staff have ongoing updates of current resources and literature that is available for our practice. Peer support remains increasingly important in our 1 to 1 and group programs when working in the area of disability. These meetings become a showcase of how a whole service can work together providing updated educational tools. SHine SA is looking forward to a 'show and tell' activity that will take place for all staff who work or plan to work in the area of disability. This will provide an opportunity to show what is new, and discuss the highs and lows of this vital role we play, when we work in parternship with people with disability.

# Snapshots from SHine SA Photo Albums



Given the Star Treatment!
From left: Arthur van Deth, Andrew Davis, Barbara Renton, Jenny Turner at
Name Change Launch, 29 October 1998

Spreading the News!
Kerry and Sue, SHine SA Southern PHC Team Members





They've Seen The Light ... SHining! From left: Bernie, Fiona, Paul & Dorian at Name Change Launch, 29 October 1999

Planning Ahead!
John (Professional
Education & Resources
Team) and Ralph (East/
West PHC Team),
faciltating at a SHine SA
community education
course.





And It Shall Be Now Known as ... SHine SA Guests at the Name Change launch, 29 October 1999



Guests as the launch of the Aborginal Health Workers Certificate Course, 27 May 1999



Stalling Around for World AIDS Day! Stephanie and Annie, SHine SA Southern PHC Team Members



(formerly Family Planning SA)

To work in

partnership with

Lesbian, Gay,

Bisexual &

Transgender

people to

increase access

to sexual and

reproductive

health services.

"SHine SA upholds the rights of lesbian, gay, bisexual and transgender people to express their sexuality free from discrimination and to have access to the full range of sexual and reproductive health services.

SHine SA will strive to positively influence community attitudes and counter discriminatory practices and negative attitudes which prevent lesbian, gay, bisexual and transgender people accessing services.



# Do Lesbians Need Pap Smears?

SHine SA has been working collaboratively with the SA Cervix Screening Program and the Women's Health Centres of SA to produce a new pamphlet: "Do Lesbians Need Pap Smears?" which will be launched in October 1999.

Most information about Pap smears tells us that "all women who have ever been sexually active should have a Pap smear every two years". However most information is written assuming women are heterosexual. This leaves many lesbians and health workers unsure whether lesbians need Pap smears.

For this reason, a working group formed to produce a pamphlet for lesbians and health workers in South Australia. While pamphlets on this topic are already available in Victoria and

New South Wales, the SA pamphlet has been developed in consultation with lesbians and health workers in South Australia and includes information about services in South Australia.

"Do Lesbians Need Pap Smears?" explains how and why a Pap smear is done, why lesbians do need Pap smears, and gives suggestions about where to go to have a Pap smear or to get more information.

"Do Lesbians Need Pap Smears?" will be launched during the Health in Difference 3 conference in Adelaide in October 1999 and will be distributed widely across SA. For more information contact SA Cervix Screening Program, SHine SA or one of the Women's Health Centres in Adelaide

# A Policy in the Making

Rationale

Throughout the year SHine SA staff members have been working together to develop a draft policy entitled "Sexual Health Services for Lesbian, Gay, Bisexual and Transgender People"

SHine SA is committed to providing high quality services to lesbian, gay, bisexual and transgender people hence the need to develop a policy which will guide future work in the organisation.

SHine SA recognises that heterosexual dominance and homophobia have detrimental effects on the health of lesbian, gay, bisexual and transgender individuals and communities. The organisation wishes to ensure that there will be a coordinated approach in advocating for the sexual and reproductive health rights of these communities.

All staff who work in the organisation have had the opportunity to comment and provide feedback on the draft policy and the organisation is now ready to provide opportunities for members of the lesbian, gay, bisexual and transgender communities to provide comment. SHine SA looks forward to receiving the feedback and to developing comprehensive implementation plans in partnership with the

# Health in Difference 3 Conference

SHine SA has joined with the AIDS Council of SA, Bfriend, Womens Health Statewide and PLWHA SA to provide support for the next Health in Difference Conference; A National Conference on Lesbian, Gay, Transgender and Bisexual Health. This conference is being held in Adelaide on October 20 –22 1999 at the Hyatt Regency Hotel and is timed to coincide

with Feast, Adelaide's Lesbian and Gay Cultural Festival which runs for 3 weeks from 22<sup>nd</sup> October 1999.

Workers from SHine SA are on the organising committee for the conference and have been successful in securing funding from a variety of sources to enable the conference to proceed.

The conference aims to:

• Explore social, sexual and cultural health



- Inspire new ideas and approaches
- Provide a forum for networking, discussing and debating health issues.

The conference is shaping up to be an exciting and informative event and is open to all lesbian, gay, transgender and bisexual people and others working towards the health and wellbeing of those communities. For more information look at the updates on <a href="https://www.shinesa.org.au">www.shinesa.org.au</a> or email <a href="mailto:gmhealth@merlin.net.au">gmhealth@merlin.net.au</a>

# Did You Know

A SHine SA staff member worked in partnership with staff from Second Story Youth Health Service to deliver a program entitled "Challenging Homophobia" at a large southern suburbs high school for 100 teachers.

# FEASTing & Picnicing

In October and November a keen bunch of staff trundled off to two events which are favourites on the calendar ... the opening of 'FEAST: Adelaide's Lesbian and Gay Cultural Festival' and 'Picnic in the Park' – a day of entertainment, food and socialising by the River Torrens.

The FEAST opening, held in the Lion Arts Centre courtyard, provided the first opportunity after the name change for SHine SA to display its banner. We had give-away condoms, dams and lube as well as posters and pamphlets about sexual health. It was a bit of a challenge for the stall to compete with the dazzling array of performances such as the spectacular drag queens, the biggest troupe of drag kings in the southern hemisphere, and a serenading piano accordion player. SHine was proud to be there as a sponsor of FEAST.

The Picnic in the Park was held in glorious weather on rolling lawns with scrumptious food and all-day entertainment. Highlights included the Dog (and owners) Show, a performance by Fruit that got some dancing happening despite the heat, and Pauline Pantsdown singing her latest naughty political satire. A steady stream of people stopped by the SHine stall to collect pamphlets, dams, condoms and lube or stop for a chat about our name change and services.

We are now planning what sort of presence we might have at the next 'FEAST' and 'Picnic' events and are proud to be an organisation working to improve access to services for lesbian, gay, transgender and bisexual people.

# Why have Good Sexual Health When You Can Have Better Sexual Health!

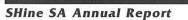
We know that being gay, lesbian, bisexual or transgender is not always easy. But, thinking about issues like safer sex, HIV/AIDS and accessing GLBT friendly services and service providers CAN be easy.

Better sexual health means:

feeling good about yourself • being able to get accruate information • being accepted for who you are • being treated with respect and dignity • having your needs met by health care providers •making decisions that are good for you • knowing about the things that may put you and your health at risk • having heterosexual people acting as allies and advocates in order to prevent discrimination • having choices if, how and when to have children • experiencing safe satisfying relationships throughout your life.

As **SHine SA** we understand that safer sex is much more than just putting on a condom or using a dam. It starts with being proud, celebrating your sexuality and living in a community that clebrates with you. **SHine SA** is working with the GLBT community to provide services and resources for better sexual health. You can contact us:

Northern Metropolitan Region 8254 8200 ◆ Southern Metropolian Region 8325 8164 ◆East/West Metropolitan Region 8431 5177





(formerly Family Planning SA)

SHine SA is committed to developing the competence and confidence of nations in the South Pacific and East Asia region to advocate for their own sexual and reproductive health. 40% of the world's population lives in this region. Their health and well-being is a concern for us all.



Rationale

Contribute to increasing the capacity of countries and communities in the East Asia/South Pacific region to achieve better sexual and reproductive health.

# biective

In August 1998 two Community Health Workers headed overseas again, negotiating with airline companies to take 100kg of luggage between them! This time is was to Western Samoa for the fifth round of Community Education in Sexuality training being held in Apia.

We arrived early on the Friday morning after having left Sydney on Friday evening. This was an eight-day week for us! This time we were working with Vika Tikinitabua, South Pacific Counterpart and Apineru Peniamina from Samoa Family Health who had a dual role as a participant and a trainee course facilitator. Apineru was involved in a training process, which would enable him to support Vika during the next training in Fiji 1999.

Samoa is very different geographically than the other South Pacific countries that have been visited. It comprises of two relatively large islands. Savaii and Upolu (which account for approximately 95% of the total land area) and seven smaller islands. Apia is located on the island of Upolu. Both islands have a good bitumen road and bus service, which makes it easier for the Samoans to access services.

The average temperature is 31°C with very high humidity. That was morning, noon and night.

Twenty-eight workers took part in the training with four people coming from the Solomon Islands. This time the majority of participants were women and over twenty fives years of age. The majority of the participants held "middle manager" roles within their workplace. There were very few "grass roots" community workers participating this time, which was different to previous training, held in the South Pacific.

The participants came from a wide range of backgrounds with varied levels of knowledge, experience and

skills in the area of sexuality and reproductive health. For some of the participants it was very new and challenging. Having quite a few participants who had middle manager roles changed the group dynamics considerably. After the training participants from the education department were keen to go back and make recommendations for sexuality education to be included into the curriculum for senior students.

# Talofa

The participants were impressed with the range of teaching methods and were keen to try them in their programs. All received a "Sexual Health Education: A Guide for Community Health Workers" at the end of the training which has a range of ideas for presenting different topics and also work sheets to be used in programs. This book provides workers with some activities to provide a range of training to different groups.

The training started off with the traditional open

with the traditional opening ceremony with representatives from AUSAID with other local dignitaries in attendance. After speeches we all enjoyed a large lunch. That night we had a cocktail party Samoan style where I was encouraged to join in the Kava drinking. Not as strong as Vanuatu!

On the last day of training we had the presentation of certificates and that morning the majority of the participants came in a 'green' uniform. Puletasses (dresses),

shirts and skirts had all been made out of the same bright green material. It was a wonderful experience and we were told it was a Samoan way of saying thank you. We were entertained by the participants and listened to some beautiful singing. Their voices were magnificent and whilst this was happening I was getting rather teary! Our contribution was a very poor verse of Waltzing Matilda.

From left: Juliet & John SHine SA
Community Workers facilitated the training program in Samoa

and reproductive

Whilst we were in Samoa we enjoyed some of the Teuila Tourism Festival attractions at night and during the weekend. We

watched some wonderful and colourful displays of dancing with bodies glistening with coconut oil. We also had the opportunity to watch a young woman being tattooed with a malu in the traditional Samoan way with fine chisels and wooden sticks. Not for the faint hearted! Often young women who are the eldest girls in the family are tattooed as a sign of seniority and are then able to server their fathers at traditional feasts and gatherings.



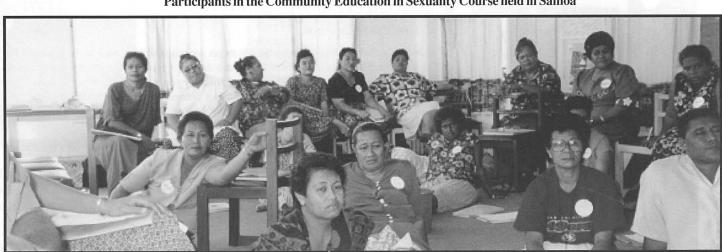
Course Participants - Western Samoa

Apineru managed to borrow some transport from Samoa Family Health for the weekend and took us for a tour around Savaii. First we had to catch a rather crowded Ferry over to Savaii and then we were on our way passing through villages and many churches, some painted white with amazing architecture. We travelled on dodging the pigs and piglets that were roaming the roads. We headed for a small village which was the family home of Apineru's wife where we were treated to some wonderful and memorable hospitality. We had more mangoes than we could manage. We felt really at home because they had their TV on and guess who was playing - the Crows! We found a small motel type place to stay the night with a resident frog in the shower. Up early the next morning to catch the early ferry back to Upolu. This time we had a very rough

The training was not without some challenges but many happy memories were taken back to Australia after this round of training. The following comment summed up the feeling for the majority of participants after being together for two weeks of training.

'I would like to say thank you very much for sharing, teaching, and being with us for the last two weeks. I really appreciated your help, kindness and everything that you'd done. I found this workshop very factual and useful to myself because this is the first time of learning about sexuality. And I'm telling you that I feel proud of myself, feel safe and healthy because I learned more and more on how to protect myself and family.'

Participants in the Community Education in Sexuality Course held in Samoa



# Community Educators Course Follow Up - South Pacific

The most recent Community Education Course in the South Pacific Family Planning Training Project (SPFPTP) was conducted in Apia, Samoa in September 1998.

A total of 27 participants, including 23 from Samoa and four from the Solomon Islands spent two weeks using adult learning principles to address such issues as developing sexual health programs, diversity in sexuality, culturally appropriate sexuality education, women's and men's health, values clarification and inter-agency collaboration. All participants were presented with a

Certificate of Participation and a Community Educators Manual for Sexuality and Reproductive Health Education produced especially for South Pacific countries.

Follow-up is an integral part of the SPFPTP. In this case, as a course facilitator, I met the participants in November in their own workplaces, where they organised a workshop for a community group, including choosing topics, preparing resource materials and presenting their own sessions. I was able to support them and give them feedback, as well as assess their presentations.

The 23 educators from Samoa presented their workshops in groups of two or three, either to young people, women attending antenatal clinics, or to local Year 11 students. The Solomon Islands educators organised a one-day workshop for 24 youths.

They spoke on a range of topics, including Anatomy & Physiology of Reproductive Organs; HIV/AIDS and STIs; Safe Sex; Condom Demonstration; Teenage Pregnancy; Pregnancy Complications; and Contraceptive Methods. The condom demonstration created a lot of interest among the youth and students.

I was impressed with the educators' knowledge, skills and confidence, particularly as they had to talk about some very sensitive issues to their



FPA Community Educators Course Facilitators: John McKiernan, Vika Tikinitabua & Juliet Watts

own people. The workshop participants had a lot of questions to ask and were hungry for knowledge, so much so in the Solomon Islands that the educators now plan to run monthly workshops for the community in Malaita Province.

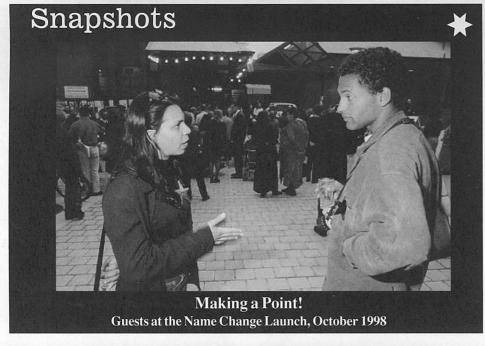
I continue to be amazed at the breaking down of barriers when community educators are confident to talk about sexuality with their own people. The South Pacific community is ready for sexuality information. All the participants in the September course have found the Community Education Manual very useful. To watch them presenting and reaching out to many hundreds is a reward in itself.

Article written by Vika Tikinatbua, Family Planning Australia South Pacific Officer

# **★** Fact or Fiction **★**

Safer sex may include knowing the facts about the topic.

**True:** Correct knowledge is important as it allows you to make informed decisions about what is safe and what is an acceptable risk for you when practicing safer sex.





# Sexual Health Counselling

SHine SA has Sexual Health Counsellors in each of the Primary Health Care teams. You may want to talk about:

- Sexual Difficulties
- Sexaul Assault/Abuse
- Living with HIV/AIDS
- Making choices about parenthood
- Unplanned Pregnancy
- Post Abortion Counselling
- Sexuality/Sexual Relationships

Or other concerns related to your sexual health or sexual relationships. You can make an appointment in each of the PHC Teams: Northern Metropolitan Region 8254 8200 • Southern Metropolian Region 8325 8164 • East/West Metropolitan Region 8431 5177

# **Owning My Privilege**

# My Experience as a Community Health Worker in the South Pacific

The following is a personal reflection of my experience as a Community Health Worker in the South Pacific.

Over the past four years I have had the privilege of working in six different countries in the South Pacific region. I have been involved in the planning, implementation and evaluation of a two week Sexuality and Sexual and Reproductive Health workshop for local community Health Workers. The workshops are a

component of a South Pacific

Project funded by AUSAID

and coordinated by Family Planning Australia. The countries involved are Samoa, Vanuatu, Solomon Islands, Fiji, Tonga and Tuvalu.

I want to share some of my thinking about working in partnership with indigenous peoples in the context of my experience in the South Pacific islands.

I am white, and with this identity comes privilege,

I may not recognise the privilege or even feel it but I do know that in our society the colour of your skin mostly affords you more options and choices for how much power you have in your life.

One of things that separate human beings from animals is our ability to use our intelligence - that is, our ability to communicate in a vast range of styles, ability to reason, use logic, work in partnership and many others. Through a series of 'oppressions' we have lost some of those abilities and as a result one of the things we are left with is racism.

I own this sense of privilege and take responsibility for ensuring that I do not abuse it. Sound confusing so far: that is one of the purposes of racism, to keep people confused about getting close to other human beings because of difference. If another purpose is to separate human beings and to generate power from one group of people over another group (one definition of oppression) then I have seen evidence of this in my life. It can frighten and send me

into despair (it does at times) or I can take some action to make things change. I am not a victim in this process and have privilege that I can use as a motivator for social justice.



South Pacific Project Participants

The reason I had successes working in partnership with indigenous people in the South Pacific is a personal decision to take full responsibility for the privilege I am conditioned to use. I am not saying that I did not at any time act in racists ways, but I took some risks getting to know people and their cultures and I shared some rich and rewarding times.

It is probably not useful to talk to indigenous people about your struggles and the issues for indigenous people. What is useful, is to seek out awareness raising workshops, explore your values and their origins and think about how the impact of racism might affect you if you lived with it each day of your life.

I have included some more ideas for things to do about racism. These strategies have been lifted from a session of Culture and Sexuality (Migrants and Refugees) workshop that SHine SA offers. (see page 20 for more information).



# Some Things To Do About Racism

- 1. When challenging racism be clear about your goal.
- 2. Analyse the situation where you are challenging racism and identify barriers and possible outcomes.
- Clarify your own role and purpose.
- 4. Clarify the situation/comment and keep in mind what we know about how people learn and change their values and attitudes.
- 5. Develop a list of ways to handle controversial issues and tackling racism.
  - Make opportunities to explore your own racism
  - Begin gently and assertively
  - Clarify the situation/comment
  - Don't assume you know everything
  - Take a clear stand against prejudice
  - Ask what the person's evidence is and give yours
  - Make you evidence relevant
  - Explore peoples feelings. Information alone is not enough
  - Don't reinforce stereotypes
  - Attempt to finish on a positive note
  - Have some clarity of perspective's before moving on in a process/conversation
  - Accept that you can't please everyone
- 6. Implement strategies to oppose racism and its effect.
- 7. Develop formal arrangements for consultation with people from other racial and ethnic groups and who are affected by what your organisation does.
- 8. Support groups to empower people who have experienced racism.
- 9. Support groups and organisations seeking to end racism at community and political levels.

(Taken from Chambers, B & Pettman J 1986, Anti-racism A Handbook for Adult Educators, Human rights Commission) - adapted by Jacqueline Riviere and John McKiernan SHine SA May 1999.



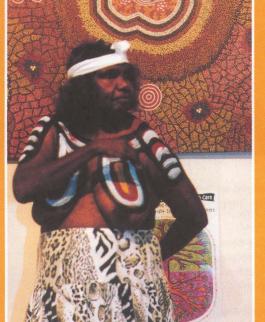




















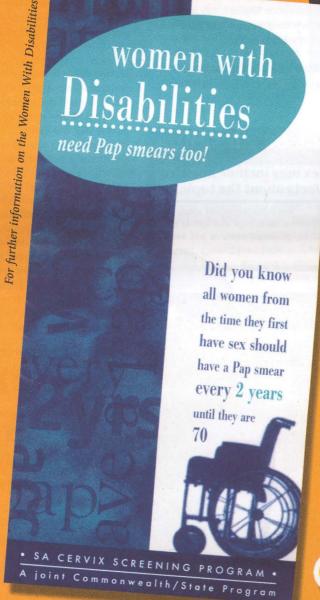


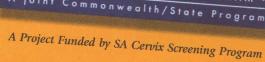


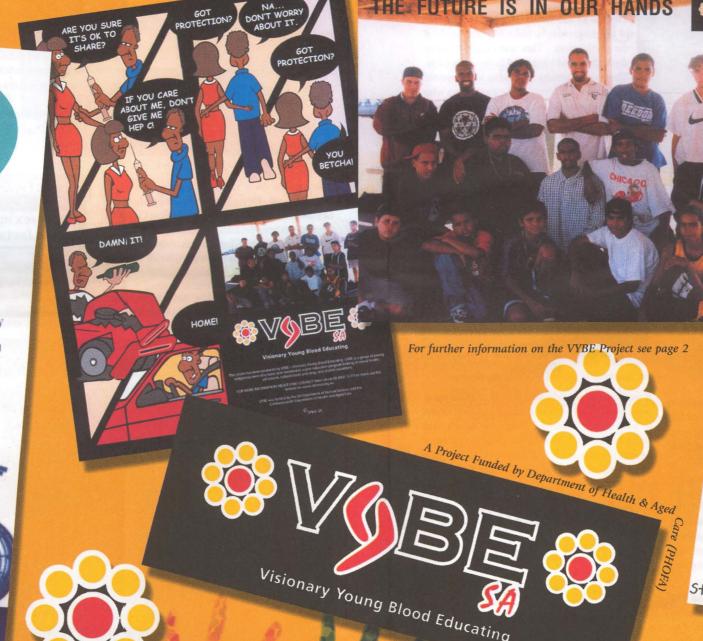


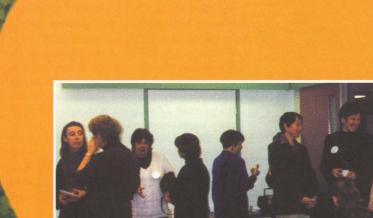










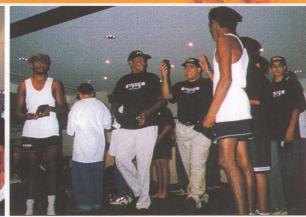




A Project Funded by Department of Human Services









(formerly Family Planning SA)

To work in

partnership with

rural and remote

communities to

support and

equip them to

advocate for their

sexual health

needs.

SHine SA acknowledges the difficulties for people living in rural and remote areas in accessing sexual health services due to their geographical isolation. SHine SA works in partnership with these communities to support and equip them to advocate for their own sexual and reproductive health needs and focus education and training opportunities on the rural/remote workforce.



# "Working with Common Sexual Concerns for Rural Professionals"

In 1998, SHine SA submitted an application for a \$2,500 conference support project grant to Living Health SA. The granting of this financial aid allowed SHine SA and the Australian Society of Sex Educators, Researchers and Therapists, [ASSERT] to collaborate in providing training in working with common sexual concerns for rural and remote health professionals.

The aim of the conference was to provide professional development and support to rural health professionals who now, or in the future, may provide counselling for people who have sexual concerns. The provision of specialist counselling in sexual concerns has mainly been limited to Adelaide and access for remote and rural clients has been difficult.

Difficulties in regard to sex, whether they are physical, psychological or relational, can seriously impact upon a person's sense of well being and be a major factor in relationship difficulties

Magazines and newspapers are full of advice on different sexual concerns, but to effectively resolve some of these issues requires considerable knowledge and expertise. A range of professionals, including sexual health counsellors at SHine SA and professional members of ASSERT provide therapeutic services for different sexual concerns, but many people are unable to access these services due to factors such as geographical isolation or cost.

SHine SA and ASSERT have evolved a working relationship over the past two years, with SHine SA providing premises for ASSERT's professional meetings. In 1998, the two organisations designed a joint venture in training metropolitan health professionals in working with sexual concerns. The evaluation of this two-day workshop highlighted the unmet needs of rural and remote professionals in gaining access to this type of specialised staff development.

The eighteen participants who registered for the two-day conference provided services to the major rural centres of South Australia with outreach services to many of the remote communities. The specific rural communities included:

- Port Lincoln and the far west
- The Iron Triangle, Whyalla, Port Pirie, Port Augusta
- The Mid North, Gladstone, Crystal Brook
- Clare and Barossa Valley
- Adelaide Hills and Southern Fleurieu Peninsula
- South East region, Mt Gambier
- Murray Mallee, Murray Bridge

Participants of the Sexual Concerns Workshop





Participants of the Sexual Concerns Workshop

The conference attracted a range of professionals including, general practitioners, clinical psychologists, Aboriginal sexual health workers, social workers, nurses and mental health workers.

In order to assess the needs and interests of the participants, a flyer sent out to advertise the workshop also included a brief survey. This survey was used to help identify the following issues:

- With which communities are the participants working?
- What particular sexual concerns are presented by their clients?
- What do the participants hope to gain from this workshop?

The survey was invaluable in helping plan a program that met these needs and influenced the choice of teaching practitioners, how they were briefed and how much time was allocated to each session.

Evaluation of the workshop was obtained by distributing feedback sheets to all participants and 67% were returned at the end of the workshop. The participants were asked to identify their key areas of learning, their satisfaction with the workshop content and suggestions for future professional training and development.

The majority of the participants found the workshop very helpful and that the course content was pitched at a level that was appropriate. Three participants who were already working with these issues, stated that what they really needed was a more advanced workshop that allowed for an open exchange of information. All participants felt that the training highlighted the need for further workshops. While some nurses worked specifically with women's health, the general consensus was that the men's sexualities session was valuable because it allowed them to see the impact for women, living with the effects of men's sexualities.

Almost every participant found the session on working with abuse and sexual violence extremely helpful. They remarked specifically on the ideas and concepts of power, violence and abuse as being particularly helpful.

Overall the two-day conference was effective in attracting the target group: professionals who provide services to the rural and remote communities of South Australia, covering a wide range of professional settings. The promotion of the conference was comprehensive and timely and the subsidy provided by Living Health [now Health Promotion SA] was an attractive incentive. Time constraints, limited resources and the travel distance required would always

be a major constraint for rural and remote professionals being able to access staff development opportunities.

Rationale

The use of the survey allowed the content of the program to be tailored to the needs of the participants. This was clearly evident throughout and supported in the evaluation. The survey results were also instrumental in selecting and briefing the facilitators who made a genuine effort to understand the needs

and resources of professionals in these geographical areas. We were fortunate that the invited facilitators cleared time so that they could participate in sharing their experiences and skills with rural and remote professionals.



Participants of the Sexual Concerns Workshop

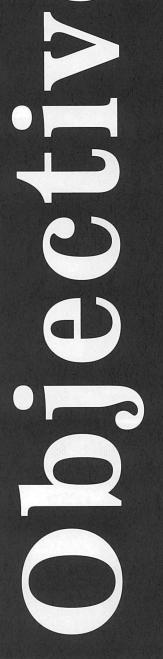
It would be of considerable benefit to build upon participant's current competences and motivation to provide an advanced workshop series that could be offered for both metropolitan and rural health professionals. Ultimately this would benefit all of the communities that they work with.

# Counselling in Southern Region Rural Areas

Face to face sexual health counselling is offered at the southern regional primary health care site and for people living in isolation it is offered through telephone contact. We are also able to offer counselling through email, for those people who may want this service and are technology wizards. Requests for counselling are many and varied, the majority of requests are in the areas of sexual desire, painful sex, pregnancy options, dealing with the effects of child sexual abuse, or sexual trauma. March saw the start of a rural counselling service which is offered at Murray Bridge once a fortnight. Although still in its early stages, counselling has been promoted through the region, and remains a service offered by the southern regional team. We remain committed to provide more rural counselling service for our region and there is some further discussion about where else we could provide this service.

A Sexuality Awareness Workshop was conducted at Murray Mallee Community Health Centre. Twelve women attended a workshop, to explore the impact of sexual assault on sexuality and sexual self-esteem and the skills needed to survive such trauma.

SHine SA Annual Report



# Making Services more Sexual Health Hotline **Accessible for Young People**

Young people living in rural and remote areas have a lot of difficulties in accessing sexual health services and information. Issues include isolation, lack of services available, confidentiality, lack of specialised workers, access to condoms/dams, support, the list continues on and on!

The Southern Primary Health Care team have been working in partnership with rural schools, health centres, youth forums, nurses and groups of young people in the southern region to provide support, information, counselling and workshops on sexual health and sexuality.

Over the past year we have been involved in working with teachers in schools and TAFE in rural areas in providing workshops for young people around sexual health and sexuality. These workshops cover topics such as: what is safer sex, the pressures and challenges around sex for young people, information about safer sex practices and the big challenge for young people in rural areas where to access information and support around sexuality and sexual health! Work

has been done in Oakbank, Mount Compass, Murray Bridge and Victor Harbour. Co-work has been done with South Coast Inspirations a project looking at and addressing the needs of young people in the Victor Harbor area.

Additionally this year we co-worked with the Port Pirie worker of SHine SA to provide a workshop for The School of the Air students at Tatachilla Camp. This is a once a year camp for students who do their schooling over the twoway radio to get together and meet each other and do extra curriculum activities. SHine SA was invited to provide information on sexual and reproductive health care, puberty etc - see separate article for more information.

At present we are looking into providing a Community Education Course in Sexuality for teachers, workers and community members in the Victor Harbor area to further support the high need in the area. Keep your eyes open for

# Women's Business -Ceduna

The quarterly visits by SHine SA staff to Ceduna/Koonibba have continued for the 1998-99 year and the program has continued to grow. SHine SA supply the staff with the expertise, a female Doctor and a Nurse Practitioner, while Ceduna /Koonibba Health handle all the other details including an Aboriginal Health Worker and a driver.

We continue to provide this service of 4 1/2 days every 3 months to the women of Ceduna with support and encouragement from the Ceduna/ Koonibba staff, especially the Women's Health Worker. Ceduna/Koonibba continue to plan and organise these trips as well as advertising and encouraging the community to be involved. The funding for this important on-going work, is provided by the SA Cervical Screening Program. This program has now been in operation for over 10 years.

On average we do between 120-140 individual consultations while we are in Ceduna, and our practice is based on holistic care. Many clients use the service to be able to access women practitioners, and to discuss issues that they may not feel comfortable talking about to someone who lives in their community.

It is often very hard for many clients who live in country communities to feel comfortable talking about very personal issues, to workers who also live in that community.

As part of our visits to Ceduna we have also continued to visit the Koonibba community to provide a clinical and health education service for the women which is more accessible.

As well as the clinical component to the Women's Business program, education sessions are also offered. This is being increasingly accessed, and we often co-work with the Women's Health Community Nurse and the Aboriginal Health workers. Recently we provided a 2 hour session on Contraception for 6 young Aboriginal women, and a 2 hour evening workshop on Sensuality, in conjunction with the Women's Advisory Group (WAG). This was a fun evening which 26 women attended, and we have had a further request to provide a similar evening for men in December. It seems the men of the district are hearing about what they are missing out on and want some of the same!!!

It continues to be satisfying to be involved in a program that consistantly provides good health outcomes for the women of Ceduna.

# **Remote But For How Long**

A significant number of children in South Australia live and learn in isolation. Mostly this is the result of their location; however some are excluded from mainstream education for health or other reasons.

These students are serviced by distance education. For those who live in the more remote parts of the state the School Of The Air (SOTA) based at Port Augusta is their school. Students are linked with teachers at the school via HF radio, telephone, FAX and the Net. All students have a Supervisor and usually learn at home, the supervisor is likely to be either a mother or a

Students have an opportunity to get together several times a year, either at school camps or experience weeks. The teachers also endeavour to visit the students when they go on patrol. Both of these opportunities are greatly appreciated by both supervisors and students.

Whilst learning achievements for these students

are in concert with mainstream education, the delivery of the curriculum is necessarily different. Specific curriculum materials are written to enable the students and their supervisors to cope in isolation and the teachers to monitor progress.

In discussions with supervisors via the HF radio SHine SA staff identified difficulties in delivering the HIV/Sexuality components of the curriculum, both due to the curriculum materials available and the skill and comfort levels of the supervisors. While there had been some input by specialists during camp it was felt that this was also barely

The importance of these young people having adequate appropriate education in the area is generally accepted. The imperative is that most of these children will go from their relatively safe, closed environment to a large city to continue their education or find employment. Without a full understanding and adequate personal skills these young people are at risk of

compromising their health and wellbeing.

In partnership with SOTA staff and supervisors SHine SA staff have provided input through programs for students and assisted in developing curriculum. It is hoped that funding can be sourced to provide further materials and training for supervisors to assist them in carrying out their task more effectively.



9 am to 1 pm, Monday - Friday (08) 8364 0444

**1800 188 171 (Country Callers)** (08) 8431 5177 (TTY)

sexualhealthhotline@dhs.sa.gov.au (email)



A confidential free phone-in service providing information and referral on all areas of contraception, relationships, sexuality and sexual and reproductive

This service is provided by nurses.



# **Emotional Wellbeing of** Young People in Rural and Remote SA

The emotional wellbeing of Rural and Remote Young People throughout Australia has been of concern for some time now. Young people in South Australia's Rural and Remote areas are at risk of being emotionally distressed by many factors which are peculiar to the environment in which they live.

Many factors influence their lives including issues like the rural downturn, lack of job prospects within their community:

- the need to move away from friends and family to secure employment or further education
- general despair and low morale in the community
- decline in community services and population
- the constant anguish of rural communities about their greatest export -young people.

While some of these issues are in common with their city counterparts they are often exacerbated in small rural communities. For example we are all aware of the difficulty faced by many young people when seeking meaningful employment.

This becomes a far greater challenge when one has to leave the comfort and safety of one's family, community and friends.

Many young people succeed and cope well. However many fail and some are not willing to take the risk and try. The frustrations felt by some young people may result in anti social behaviour, substance abuse, depression and possibly termination of their own life. If we add to this situation the usual complexities of

adolescence including developing their sexuality, SHine SA plays its part in some areas by relationships and identity one can gain some respect for the fortitude required to survive.

While most Rural and Remote communities are void of adequate formal services to support young people, there is a recognition of their needs



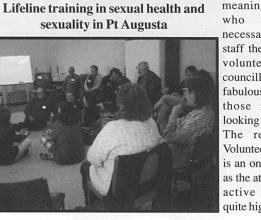
Volunteer Telephone Counsellors for Lifeline training in sexual health and sexuality in Pt Augusta

and an endeavour to do something. Unfortunately logistics and critical mass get in the way in these economically rational times.

Country communities do care and struggle with minimal resources to make a difference. Without the Volunteer contribution the situation would be much worse.

One of the major contributors is Lifeline. This service survives on the grace of a few major

sponsors and a huge contribution from well meaning Volunteers who raise the necessary funds and staff the service. The volunteer telephone councillors provide a fabulous resource for those in crisis or looking for direction. The recruiting of Volunteer Counsellors is an ongoing process as the attrition rate for active providers is quite high.



**Volunteer Telephone Counsellors for** 

providing training for Lifeline Volunteer Councillors in the area of Sexual Health and Sexuality. The training gained by the participants is not only applied when they are actively engaged on the telephone but also in their daily contact with people in the community.





SHine SA staff member working with young people in a

rural setting

SHine SA Annual Report



(formerly Family Planning SA)

# Spreading the Word

SHine SA Community Health workers were kept busy in 1998/1999 providing two opportunities for workers to attend Community Education in Sexuality training. These workshops were held at our Kensington and Munno Para sites. A total of thirty-five people completed the training with many of the participants attending electives that have been offered during the year.

The two day training aims to provide participants with the knowledge, skills and awareness to work effectively in the community around issues of sexual health, sexuality and reproductive health. Participants take part in a range of experiential activities that allows for an exploration of the concept of sexuality and how workers' own values may impact on the way they work with clients. A range of different strategies are used to provide information on contraception, sexually transmitted infections, HIV/AIDS and Hepatitis. Participants also have the opportunity to peruse the many different resources that are available for loan from the Resource centre.

Participants came from a variety of backgrounds/ workplaces including Women's Health, Disability, Teaching, Aboriginal Health, Youth Work, Drug and Alcohol, SA Sin, Social Work and Mental Health. We also had some young people attending who are involved as Peer Educators with other agencies. Most participants found the training stimulating and comments included:

"Fantastic, fun, interesting, informative, laughs, eye opening, stimulating."

"I found the sharing between workers fabulous."

"This has been an excellent workshop. I have learnt a huge amount. Now it's putting it into practice – but I know I have a lot of networks to assist me when I'm feeling lost. Thank You."

"WOW! So much information in two days. Excellent course. Excellent atmosphere."

"Day 1 was very interesting and has provided me with relevant information which can utilised in my job as a health worker."

"Not only gave me more awareness for my client group but also for myself."

As you can see from the feedback the Community Educators Course in Sexuality is a hit! Keep your eye out for course dates for the coming year; be there!



Members of the Professional Education & Resources Team

# Cross Cultural & Sexuality Issues (Migrant & Refugee) Elective

Our Community Education Program has also been very active. Recently in early June, we ran a 2 day elective on Cross Cultural & Sexuality Issues (Migrant & Refugee) as part of the Community Education in Sexuality Course. The elective is aimed at workers who work with migrants and refugees in their profession e.g teachers, welfare workers, youth workers, nurses etc. Some of the themes which we covered:

- Working with migrants and refugees in the workplace
- Culture, oppression and racism
- Settlement issues
- Use of Interpreters
- Resources in working with migrants and refugees

We were very pleased to have with us 2 panels of guests – one made up of workers who work with migrants and refugees and the other, made up of migrants and refugees who related their own experiences of settlement and use of services in Australia.

The participants commented that the elective was a challenge for them and that they had particularly been enriched and touched by the experiences of the panel members. Given the success of the elective, it is proposed to offer it again next year as a means of better educating workers in cross cultural issues and a way of breaking prejudice in the delivery of mainstream services to migrants and refugees.



# **Professional Education**

# Community Education in Sexuality Course

The Community Education in Sexuality Course aims to equip workers in the community with the knowledge, skills and awareness to effectively address sexuality issues with their clients.

Core Component:

The core component forms the foundation for further education in the elective topics chosen. Over two days, participants explore the concept of sexuality, values and attitudes towards sexuality issues and the impact these have for the work and client. Basic information about sexuality issues is provided eg contraception, HIV/AIDS and STIs. A range of sexuality teaching resources are demonstrated throughout the core component.

Core Electives:

Cross Cultural Issues & Sexuality (1 Day) ◆ Young People & Participation - How To Work Together (2 Days) ◆ Men's Sexualities (2 Days) ◆ Understanding & Challenging Homophobia (1 Day)

For further information please contact the Course Support Worker on telepone (08) 8431 5177; fax (08) 8364 2389; SHineSACourses@dhs.sa.gov.au (email).

# Young People and Participation Elective

Youth participation is an area of work that SHine SA is very committed to, and one way of promoting the principles of youth participation in the area of health has been to offer professional education for the topic. The Young People and Participation elective was held twice, in May and June, both over two days and was open to service providers in the health and youth fields.

An invaluable part of the course was the networking that occurred between teachers, social workers, youth workers and especially peer educators receiving training to complement their experience from current projects. One major component of these electives was the inclusion of young people employed as consultants for the two days. Their role was to give input about their sexual health experiences and their experience of youth participation projects and strategies. This gave insight to all people present about what is required to be successful in working in collaboration with young people about their sexual and reproductive health needs.

Throughout each elective participants were given an opportunity to reflect upon their own experiences as young people, and then relate it to themselves as workers with young people. Issues of sexism and gender were covered and the prevalent sexual health issues for young people were discussed. A range of models used in youth participation were presented, and projects and resources were demonstrated as

practical examples. The highlight for many participants was the opportunity to hear directly from the youth consultants about their experiences, and what they expected from workers in service delivery.

One participant commented on "Guidelines given about not judging and nothing being right or wrong gave me the courage to step out of my comfort zone – I was glad I did – process was excellent" and "Thanks again, this reaffirmed that I'm going down the right track. I'll go away with knowledge of more resources and try new things, which I hadn't thought about." Overall both Young People and Participation electives were successful and provided education and networking to a range of workers in the youth and health field.

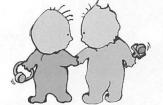
Overall Attendance at SHine SA's Professional Education Courses 1998/99

AND THE REAL PROPERTY AND ADDRESS OF THE PARTY.	
Aboriginal & Torres Strait Islander	
Health Workers Course	13
Community Education in Sexuality (2 Cores)	38
Community Education in Sexuality (4 Electives)	61
Doctors Courses	42
Nurses Courses	36
	117



Mark, SHine SA Name Change Launch October 1998

My mum went to SHine SA for her 6 week check up.



# **Nurse Education**

As one nurse wrote:

Nurse Education at SHine SA has continued to provide sexual and reproductive health education to Registered Nurses through the theoretical and clinical components of the SHine SA Course for Registered Nurses in Sexual and Reproductive Health Care.

Thirty-two nurses attended the two theory courses which were offered over the last year, one of six consecutive days and the other an extended course over a six month period. The evaluations of the individual sessions of the courses have been very positive. As one participant wrote about the theoretical course as a whole:

"The course overall was challenging and refreshing. Thank you to the people who participated in my learning. I was particularly impressed by the holistic care offered to clients by nursing and medical staff. Thank you to the organisation for the commitment to educating nurses and doctors. It is a unique learning environment.'

A review of both the theoretical and clinical components of the course took place in the first half of 1999. The final Report is not yet available, however the data suggests that the course does meet the participants' needs in the workplace

regardless of their place of nursing practice, as many of the topics covered in the Theoretical Component are valuable in all areas of nursing practice.

During the past year Nurse Education has guided the development of a Peer Review Process to review the clinical skills of the SHine SA nurses in sexual and reproductive health care. This process has been written, trialled and then redeveloped by a group of SHine SA nurses, and so far over half the nurses at SHine SA have participated

in this review of their clinical skills. This peer review process puts the onus for the review on the individual nurse. There are two parts to this review process, a written reflective practice exercise as well as the review of the nurse's clinical skills in a clinical situation. These written exercises have described excellent examples of advanced sexual and reproductive health nursing practice.

This Peer Review Process has been made available to Rural Nurse Practitioners through a Memorandum of Understanding between, The SA Cervix Screening Program, The National Women's Health Program and SHine SA. This yearly review of sexual and reproductive clinical skills provides nurses with the opportunity to:

- reflect on and critically analyse their own clinical practice
- affirm good clinical practice
- review their clinical skills and access their clinical competence
- work with a peer to share practice experience and to learn from this
- identify their staff development requirements
- set goals for the coming year

In addition to the above and as part of the Memorandum of Understanding, Nurse Education has also supported rural Nurse Practitioners through a mail out of recent written material that goes to areas such as Port Augusta, Minlaton and Ceduna. The SHine SA nurses also support rural nurses through phone contact or visits to rural



Participants in a SHine SA Course for Registered Nurses Course in Sexual & Reproductive Health Care

"The course offered an insight into a very broad range of sexual and reproductive health. Initially I expected to go into more depth about contraception, but I am happy about the leads, information resources I have been given'

The clinical component of the course has continued to be managed by the Registered Nurses of the Primary Health Care Teams. During the past year twelve Registered Nurses have completed the clinical component of the course. These nurses have come from many different workplaces including rural and remote and metropolitan organisations and hospitals and allocation of the clinical placements of the participants has been shared. One of the nurses has acted as the Preceptor for each participant, while the other nurses and doctors in the PHC Teams have worked with the participant as clinical teachers. The Preceptors work with the participants:

- before their clinical placement to work out their specific learning outcomes
- during the clinical placement to guide the participant through their new learning
- after the completion of the placement to support the participant to take their new learning into their workplace

Course evaluations of the clinical component were positive with comments supporting the use of Gynaecological Teaching Associates who work with the participants before they see any clients, the supportiveness of the clinical teachers and Preceptors and the learning environment in the clinical setting.



# Professional Education

# Post-Graduate Course for Registered Nurses in Sexual & Reproductive Health

The SHine SA Course for Registered Nurses consists of two separate components:

Theory Component (A) • Clinical Practice Component (B)

This is a Post Graduate Course which leads to a Certificate in Sexual and Reproductive Health Care. The curriculum can respond to both the needs of the participants and current trends in sexual and reproductive health.



For further information please contact the Course Support Worker on telephone (08) 8431 5177; fax (08) 8364 2389; (email) SHineSACourses@dhs.sa.gov.au

# **Medical Education** Activities in 1998/99

In August 1998 SHine SA conducted the first Certificate in Sexual and Reproductive Health for General Practitioners which was based on a new curriculum. In December 1998 and March1999. The Coordinator of Medical Education attended national meetings which saw the development of a nationally accepted course and assessment for the Certificate, which is largely based on the SA curriculum. This year has also seen SHine SA get more involved in the course for RACGP registrars so SHine SA doctors and nurses are participating in 2 of the 3 teaching blocks in their first 6 months. This was in response to a direct request from the registrars and reflects the need for confidence and skills in the area of sexual and reproductive health in general practice.

The Australasian Sexual Health Conference in May at the Adelaide Hilton Hotel, which was a joint conference for sexual health physicians and family planning practitioners, involved SHine SA staff at many different levels, from co-convening the conference to facilitating the workshops offered, as well as being delegates to the conference. It was a very good opportunity to get together with colleagues and exchange both formally within the conference programme and informally during breaks and social gatherings.

Many thanks to Drs Alison Clarke, Anusha Visvanathan, Lisa Dodd and Meredith Frearson for their help in revitalising the Medical Advisory Committee, which has overseen a range of tasks within SHine SA with particular attention to reviewing teaching and clinical standards and services. This year has also seen a very productive collaboration with the nursing staff with the work of the combined Committees which has addressed some of the many areas of overlap in our work.

We continue to respond to requests for sexual and reproductive health education in other organisations, which currently involves us in both Adelaide and Flinders Medical Schools, the School of Pharmacy at Adelaide University, some of the Divisions of General Practice, the RDNS and the Pharmacy Association. Much of this teaching is shared with other SHine SA staff and the scenarios range from small postgraduate groups with specialist interests to a practical tutorial for 80 undergraduate Pharmacy students.

All in all it has been a busy year with much progress made in developing our teaching base and resources and striving to meet the demand for high quality accessible medical education in sexual and reproductive health.





# Resource Centre

A wide range of video-tapes and teaching resources are available for loan to organisations and individuals delivering health information and

> Catalogues of the Resource Centre holdings, information about embership and conditions of hire are available on request from the Resource entre Coordinator on (08) 8364 5536; 1800 188 171 (Country Callers); (email) SHineSAResources@dhs.sa.gov.au



# Professional Education

# **Continuing Education** Courses for Doctors in Sexual & Reproductive Health

SHine SA offers a Post-Graduate course for Doctors in Sexual and Reproductive Health Care.

The course is designed for doctors working in general practice or primary health care who have had at least 12 months experience in these areas. The course will provide an opportunity for participants to further develop their professional skills, knowledge and awareness in the sexual and reproductive health areas.

The course consists of both theory and a clinical component. For further information please contact the Course Support Worker on telepone (08) 8431 5177; fax (08) 8364 2389; (email) SHineSA Courses@dhs.sa.gov.au



# Professional Education

# Women's Sexual and Reproductive Health Care

an accredited course for Aboriginal and Torres Strait Islander Health Workers

SHine SA is providing a Women's Sexual and Reproductive Health Care Course for Aboriginal & Torres Strait Islander Health Workers who are working or planning to work in the area of Womens Health.

There will be a maximum of sixteen participants. The Course is coordinated by Indigenous female Course Coordinator.

The aim of the course is to provide Aboriginal & Torres Strait Islander Health W...... with the knowledge, skills and confidence to improve sexual and reproductive health within their own communities.

### **Course Content**

The following topics will be covered in the course:

- Sexuality Values clarification Traditional healing and medicines Legal aspects of sexual and reproductive health care practice The structure of the reproductive systems
- The function of the reproductive systems Menstruation Menopause Methods of Contraception Unplanned pregnancy and abortion counselling Safer sex practices
- $\bullet$  HIV/AIDS  $\bullet$  Sexually Transmitted Infections  $\bullet$  Infertility  $\bullet$  Rape and Sexual

Assault • Prevention of Cancer of the Cervix • Prevention of Breast

Cancer • Common conditions of the female reproductive system

For information about course dates, costs and venue please contact the Course Support Worker on telepone (08) 8431 5177; Toll free 1800 188 171, fax (08) 8364 2389; or email SHineSACourses@dhs.sa.gov.au

# Our Tree of Life

The first ever Accredited Aboriginal and Torres Strait Islander Health Worker's Course in Women's Sexual and Reproductive Health Care took place at SHine SA from Wednesday 16<sup>th</sup> May '99 to Wednesday 23<sup>rd</sup> May '99.

Saturday the 19th May was a highlight of this course, as those who wished, attended a Traditional Woman's Business morning. The Law Women from the North West of South Australia were the focus and shared with those who attended their traditional culture in regards to Women's Business.

It was important to incorporate Indigenous



Participants role-playing the menstrual cycle

Culture into this Course as many Indigenous workers have lost contact with their cultural roots.

Thirteen Health Workers from various Health Services across South Australia attended the six day program.

The Course ran smoothly over the 6 days. Towards the end of the six days, the Health Workers felt more knowledgeable and confident to go back into their communities and talk to the women about Sexual and Reproductive Health.

Several sessions in the course were confronting. These particular areas had never been spoken about within the Indigenous community previously either individually or on a professional level. The Health Workers saw the importance of using this knowledge to open new doors within their communities.

The second Indigenous Health Worker's Course on Women's Sexual and Reproductive Health Care will be held in March, 2000.

For more information about the next course please contact Ros Pierce, Coordinator: Aboriginal Health Worker Education, Tel 84315177, fax 8364 2389 or email SHineSACourses@dhs.sa.gov.au.

ility • Rape and Sexual
tion of Breast
system

nd Care nal and kers "Getting The Message Across"

In July, 1998 SHine SA allocated resources from within its own budget to employ a Coordinator of Sexuality and Disability Education for 3 days per week. One of the first tasks identified by the Coordinator was to establish links with key people in the disability services sector and to conduct some needs assessment amongst workers from major disability organisations.

150 survey questionnaires were distributed to people who work with people with disabilities. Seventy eight questionnaires were returned from workers in the following agencies:

CSI Statewide; Disability Action Statewide; Barkuma; Options Coordination, Autism Association, Bedford Industries; Leveda Incorporated. The majority of respondents identified the need for basic information about sexuality and disability to be provided in a workshop setting.

Consequently three two day Introductory Workshops "Getting the Message Across" have been developed and will be provided in the second semester of 1999. The workshops will be conducted at the Disability Information and Resource Centre, Gilles Street, Adelaide. Participants will be offered a follow up session at SHine SA's Kensington premises following their participation in the workshops.

The Coordinator, together with a person who has a disability, planned and delivered a successful workshop to doctors at the Australasian Sexual Health Conference held in Adelaide in May, 1999. The aim of the workshop was to give the participants an opportunity to explore ways of improving communication and services to people with disabilities. Feedback from the workshop was very positive. Workshops have also been conducted with postgraduate students from Flinders University.



# Professional Education

# "Getting the Message Across" Two day basic training

The aim of this workshop is to provide workers with a basic awareness, knowledge and skills to work effectively with an individual with a disability around the issues of sexuality and sexuality health.

### The Program will include:

- Exploration of values and issues in relation to sexuality and disability
- Information about safer sex
- Strategies and techniques for implementing programs
- Strengthening networks.

For information about course dates, costs and venue please contact the Course Support Worker on telepone (08) 8431 5177; Toll free 1800 188 171, fax (08) 8364 2389; or email SHineSACourses@dhs.sa.gov.au

# Men's Sexualities Elective

This is now the fifth year in a row that this elective has been offered to the community. 19 people attended, which was a perfect number with about  $\frac{1}{3}$  of these being men, a new height of male participation.

This elective is particularly challenging for many male participants because it faces them with the inherently powerful position that men have in the community and asks men to take responsibility for this power.

The elective continues to have a central focus on the problems associated with the expectations placed on men about how to behave and on the positive and negative consequences for men in daring to be different. The program also saw a stronger, more detailed handling of the simulation exercise "Manhood and

Heterosexual Dominance" on the second day. This was the source of powerful learning for a large number of participants. There have been some useful criticisms made of the elective by 1999 participants and the staff working on the elective are excited about the refined format which is developing for 2000.

Participants from the Men's Sexualities





SHine SA's Registered Training Organisation Certificate



Left: First participants of the Women's Sexual and Reproductive Health Care, an accredited course for Aboriginal and Torres Strait Islander Health Workers held at SHine SA, Kensington June 1999

Right:
Participants and coordinator of
the first Aboriginal Health
Worker Certificate Course in
Sexual & Reproductive Health,
June 1999





(formerly Family Planning SA)

# 

# **SHine SA Clinical Services**

The provision of clinical services continues to be a core activity for the organisation and a high profile aspect of the service. Clinical sessions are offered from 9 sites across the three regions and spending represents 25% of the total budget. In 1998/99 17,940 services were provided by SHine SA clinics. Clinics provide specialised sexual health services to women and men in areas of metropolitan Adelaide where health status is lower and there is less access to free or low cost

Attendance figures across the regions represent a successful transition of clinical services from the Eastern Central region to the Northern, Southern and Western regions, where health status and health services per capita is significantly lower. As a comparison, 60% of all clinical services were provided from the Kensington site in 1994/95, compared with 25%

Over the year, there has been a steady increase in attendance across clinics. Particularly those clinics offering a population-focussed service for Aboriginal people, and young people. Issues within these clinics are rarely confined to sexual health alone: housing, poverty, family issues, violence and isolation being the frequently prominent issues identified. The activity at the Brady St Clinic has increased markedly, with sometimes up to 15 women and their families attending the clinic in a session.

The clinical service provided in partnership with Nunkuwarrin Yunti from the Brady Street, Elizabeth Downs venue continues to operate on Tuesday afternoons. A service meeting between Nunkuwarrin Yunti and SHine SA has been held to review the clinic. A grant has been received from the Playford Council to purchase play equipment for those children who accompany their parents and to develop the garden. The clinic staff have done developmental work to improve the collection of data from these clients.

The Aboriginal Women's Business clinic which started this year at Port Adelaide is now expanding to provide services to men and young people due to community demand. Interest in the clinic has been built through networking with key community members and organisations. The clinic frequently sees several young people attending together, though only one may be booked in. Particular features of these clinics are that services are confidential, free of charge, nonjudgmental and flexible in appointment structure.

The clinical service provided in partnership with Nunkuwarrin Yunti from the Port Adelaide Community Health Service venue continues to operate on Thursday afternoons. A positive response was received from a survey conducted by staff. The clinic staff have facilitated some community education with a young Nunga women's groups about issues related to their sexual and reproductive health.

The ongoing partnership with the Ceduna/ Koonibba Health Service has seen high attendance of Aboriginal and non-Aboriginal people at the clinics run quarterly in Ceduna.

Clinical work underpins the professional training of doctors and nurses, with 16 nurses and 10 doctors completing theory and practical components of sexual and reproductive health training. Clinics have also provided opportunities for 5th year medical students to observe a sexual health clinic after first attending a training session, where they receive clinical information as well as exploring values and communication. This also maintains valuable links between SHine SA and teaching hospitals.

The Northern and Southern Primary Health Care Teams continue to have difficulty recruiting doctors to work in their clinics, a problem shared with other GP and community health based services in the regions. Vacancies in both Teams have resulted in less clinical sessions being scheduled in these areas this year. This is an ongoing source of frustration due to the high demand for services and the high need profile of the Northern and Southern populations.

Data collection does not adequately reflect the work within the clinics and this has resulted in the focus of a current project to improve the coding and collection system. In particular strategies will be developed to better reflect the attendance of people within target communities of interest as only aspects of this data can currently be captured. It is currently possible to collate data on attendance by people from Aboriginal and Torres Strait Islander background, people of culturally and linguistically diverse backgrounds and to look at suburb/town, age and gender (excluding transgender or intersexual). It is not possible to assess whether people with disabilities or people who identify as lesbian, gay, transgender or bisexual have registered. A working group has begun work to draft a proposal about sensitive and appropriate ways to ask people to offer this information on registration.

# **Southern Clinical**

**Services** The Southern Team continues to operate clinics at Noarlunga and Flinders Medical Centre. Clients access the clinics for a broad range of sexual health services and often seek support and referrals for issues such as relationships, parenting problems, domestic violence, homelessness and drug and alcohol abuse.

The clinics provide excellent training opportunities for nurses, doctors and medical students.

During the school holidays, the Noarlunga clinic had an influx of young men seeking information and condoms. In response to this a male community health worker has made himself available during clinic times to talk with these young men about their sexual health needs.

Clinic staff regularly seek client feedback on their services. Here is some recent feedback:

"Your service is an essential life line for many individuals who need immediate help. Without your services there would be many disrupted families, ruined lifes and even suicides. The allowances you give to people in need (eg free consultation and medication) provide access to these needed things that may not be obtainable any other way. Your service is admirable".

"I found the staff always helpful and pleasant as well as putting me at ease. The only suggestion is the hours they are open are hard if you work".

"All the chicks here are really cool! I've recommended this place to some of my friends. The only problem is, it should be open more often like Fridays and after 4.00 pm".

"The staff here are very helpful and made the appointment for us a good experience and helped

"The staff at Noarlunga are always very helpful and very friendly".

# \* Fact or Fiction \*

Condoms are effective protection against all STIs.

warts, which may be spread by direct skin to certain STIs such as genital herpes and genital AIDS), they don't eliminate the risk of protection against many STIs (eg HIV/ False: Although condoms provide good

# Clinical Services

Doctors and nurses provide confidential sexual health services for both women and men. A fee of \$10 is payable each year. Concessions are available.

### Northern Primary Health Care Services

- Telephone: (08) 8254 8200 for details on days/times and appointments.
- Brady Street, Elizabeth Downs (Drop In Aboriginal Health Clinic) Modbury, Tea Tree Gully Community Health Service
- Salisbury Shopfront Youth Clinic (Appointment: 8281 1775)

# Southern Primary Health Care Service

Telephone: (08) 8325 8164 for details on days/times and appointments.

- Flinders Medical Centre
- Noarlunga Health Village (Appointment: 8384 9258)

# East/West Primary Health Care Services

Telephone: (08) 8364 5033 for details on days/times and appointments.

- Kensington
- Aboriginal Health Clinic Port Adelaide
- Second Story Youth Clinic (Appointment: 8232 0233)
- Port Adelaide Community Health Centre (Appointment: 8364 5033)
- The Parks Community Health Centre (Appointment: 8243 5611)



# **Therapeutic** Counselling

The Counsellors do a mix of 1:1 counselling, group work, community education and are also involved in the training of other health professionals.

# 1:1 Therapeutic Counselling

831 individual counselling sessions took place in 1998/99. Of these 722 were women and 109

117 were aged 15 – 24 years, 317 were aged 25 – 34 years, 257 aged 35 – 44 and 140 people were over 45.

The most common counselling service provided related to relationships, sexual problems, child sexual abuse, sexual assault and unplanned pregnancy issues.

# **Group Work**

Group programs increase the access to counselling for specific communities and include:

Workshop in the Riverland Region for survivors of child sexual abuse.

- Development of a 10 week workshop on relationships for couples with a disability.
- Two "Working with Sexual Concerns" workshops. One targeting ASSERT members and SHine SA staff and a second for rural and remote health practitioners.
- A Young Women's Sexual Coercion Project called "Just Us". This was a joint collaborative project with Shopfront Youth Service at Salisbury.

# Quality Assurance

A consultant has been working with the Sexual Health Counsellors Advisory Committee to review and redevelop a philosophy of counselling and a practice and procedure manual that includes quality assurance for counselling services at SHine SA. Consultation will also take place with key agencies to ensure that SHine SA offers a service which complements what is offered in the community health and women's' health sectors.



(formerly Family Planning SA)

# SHine SA Goes Techno!

www.shinesa.org.au

SHine SA website!

On the 29th October 1998 the Hon Dean Brown launched SHine SA's website (http://www.shinesa.org.au). The website was developed in conjunction with Webmedia and the SHine SA Website committee.

The purpose of developing this website was to provide the community with access to sexual and reproductive health and sexuality information, and to create opportunities for people to explore appropriate options around their sexuality. The website also provides SHine SA with information that will contribute to planning and prioritizing our work. There are four major databases within the website.

The Programs, Projects & Services section provides information on clinic and counselling services, professional education, library and resource centre, community education, telephone hotline, and information for young people and special programs/projects.

To achieve our goals relating to social change in the community, SHine SA works in partnership with the South Australian community and with other service providers to implement a range of innovative strategies which reflect our leadership role in advocating for the sexual health rights and needs of our communities of interest.

The Sexual Health Information section has a Information Database on such subjects as Abortion, Abuse/Violence, Contraception, Men's Issues, Pregnancy, Safer Sex, Sexuality & Relationships, Sexually Transmitted Infections, Women's Issues and Young People's Issues. There is also a Pill Pregnancy Flow Chart that outlines what to do if you've

forgotten to take the contraceptive pill.

At SHine SA we pride ourselves on producing information about sexuality, sexual and reproductive health that is accurate, up to date, easily read and readily available.

The 'About Us' section provides information on the Strategic Directions of SHine SA including mission and goals, communities of interest, core work, role of Council Members, summary of objectives, organisational values and how to contact us.

There is also a Links page which provides links to other sites on related topics

The site includes a Bulletin/Hot Topics database, which provide information on current events, media releases and upcoming professional education courses. These are attached to various pages within our website. So someone searching for information on HIV/AIDS

will also be able to obtain information on World AID Day.

New items are being added on a regular basis to the database and the website is under constant



review and improvement.

# Feedback on SHine SA Website

I would like to compliment SHine SA on their excellent web-site launched last year. I use the resources of web-sites on a daily basis in my work as a university lecturer, and find that there is a wide variation in quality of these sites. Many are cumbersome to use or have inappropriate backgrounds or graphics which make them difficult to read or print from. The SHine web-site is a pleasure to use because it easy to find information quickly, the content is well written and up-to-date and the user feels confident about the quality of the information provided. I can't speak for young people, but I believe that the graphics, colours and layout of the site would be appealing to them as well. There are many sites containing information directed to young people, however the sites are frequently presented in a form which does not invite interaction because they have been constructed without the needs of young people in mind. SHine SA should be congratulated for the effort it has made in developing a web-site which is easy to use and suits a large range of people.

Helen Calabretto, Lecturer, School of Nursing University of South Australia

# **Pamphlets**

The following pamphlets were reviewed:

- The Diaphragm
- The Cervical Cap
- Female Sterilisation.
- Male Sterilisation
- Genital and Anal Warts

250,00 copies of pamphlets produced at SHine SA are distributed each year with at least half of these going to external sources, eg General Practitioners, Community Health Centres, Pregnancy Advisory Centre, outpatient departments. Pamphlets have been translated into 8 different languages.

# Sexual Health Hotline

The Sexual Health Hotline has had 4,800 calls over the past financial year. This figure is consistent with the number of callers since this service changed operation hours in October 1997.

With the introduction of the Web Site in October 1998, this service has also started to receive email requesting both information and advice.

The Telephone Typewriter (TTY) was accessed, in at least 2 instances, by the deaf or hearing-impaired community and the Telephone Interpreter Service (TIS) has also accessed the service on behalf of clients from other countries.

Contraception issues continue to be the most common inquiries followed by sexually transmitted infections, pregnancy (planned & unplanned), and sexuality & relationship issues.

# **Condom Handout**

To ensure that SHine SA is being accountable to our clients who are accessing our free condoms, we have adopted the idea of a condom handout. The handout will be distributed with all condoms given out to make our clients aware of the pros and cons of condoms. The handout includes information about how to use a condom, how to help prevent breakage, how to care for your condom and safer sex information.

To signal the inclusivity of all sexualities and sexual practices that condoms are used for, the border has been created to inform readers about what sexual activities the condom can be used with. Examples of these are:

- Vaginal Sex
- Anal Sex
- Sex Toys
- Oral Sex

It also contains information on how to contact SHine SA teams and the Sexual Health Hotline. The handout is expected to be available shortly at all sites.

# Library & Resource Centre Update

Over the last 12 months there have been many developments, including an upgrade to the software D/Btextworks to version 3.0, which has been very exciting as this latest version has vast capacities that are still being explored.

Our membership is ever increasing and includes secondary and tertiary students, private, public and religious schools, universities, TAFEs, health professionals as well as disability and youth workers.

Many new books and resources have been purchased ensuring the Library and Resource Centre has increased holdings in the areas of the six communities of interest.

Some of the new materials include pelvic models, brown penile models and an STI resource in Pitjantjatjara. One of our most exciting purchases has been an Infant Simulator – a lifesize baby model with a 'cry box' intended for teaching young clients and clients with a disability about caring for a baby. New video titles include:

- Men Like Me Gender Reassignment
- Working with Translators
- Everybody's Business

New books titles include:

- The National & Indigenous Gay and Transgender Project
- The Lesbian Health Book
- Challenging Lesbian and Gay Inequalities in Education
- Sex and the Church
- Couples with Intellectual Disabilities Talk about Living and Loving
- Helping your Child Recover from Sexual Abuse
- Young people from Non-English Speaking Cultural Backgrounds and Participation

In the library we receive many requests from students for information for school projects.

Most of these requests are for information on abortion, IVF and teenage parenting. Information packs are currently being compiled to make this process easier.

A long-term project underway is the lead-up to launching the Library and Resource Centre catalogues onto the SHine SA website. This will mean improved access to the Library and Resource Centre materials to staff and clients.

Networking is occuring with other libraries such as Darling House and DIRC in order to investigate their collections and liase with the library staff. This forms part of an ongoing project to clarify our focus here at SHine SA and to get a good idea of what is held in other collections related to our field.

Tied in with this clarification has been an ongoing process of weeding the current collection to ensure that it contains current and relevant information for use by staff, workers, students and community members.

# Snapshots

Party On! Guests and SHine SA staff members at the Name Change launch October 1998







(formerly Family Planning SA)

# S S S

# Work Experience - Life Experience

In September 1998 the Executive Team participated in a Work Experience Program with two students from different schools who chose to undertake work experience at SHine SA.

Rebecca from Henley High School and Rachel from Banksia Park High School spent a week with the organisation to experience working within a primary health care organisation.

The young women also worked with members of the Professional Education & Resources Team and East/West Primary Health Care teams based at Kensington. Some of the duties they experienced included word processing, switchboard, photocopying and filing.

The young women enjoyed their time at SHine



From left: Rebecca and Rachel, Work Experience Participants

SA and worked well together. SHine SA welcomed the opportunity to participate in their learning experiences.

# SHine SA Nurses celebrate "International Nurses Day"

"Florence Nightingale, (born 1820) if alive today, would no doubt be pleased to see how far the nursing profession has come since those dark days of the Crimean War when she brought comfort and aid to the suffering soldiers. It is this progress

that is celebrated on May 12 as nurses worldwide mark 'International Nurses Day'.

Ref: Nursing Today, A.N.F SA Branch Volume 8, Number 4.

This year nurses from around the state arranged various work place activities to celebrate their achievements. SHine SA Nurses exhibited their



their clients.

The Northern Team invited all of the staff from the Munno Para Community Health Centre to an afternoon tea. This proved to be a very successful 'networking exercise', as well as attracting many laughs with nurses from both organisations sharing some experiences.

roles in Sexual and Reproductive Health, by setting up a display in each of the regional locations. These displays highlighted the work of SHine SA nurses both in the clinical and community setting, where they deliver a high level of quality sexual health care to

# Community Health Worker Advisory Committee

**Medical** 

**Advisory** 

**Committee** 

The Medical Advisory Committee has met on a

regular basis throughout the period. Also, there

have been two successful meetings with the

The Committee has planned, implemented and

evaluated four meetings for doctors with staff

development activities being included in each

meeting. The members also assisted with the

convening of the Australasian Sexual Health

Conference and planning and facilitation of

The Medical Advisory Committee initiated the

production of a regular newsletter called MEDS.

The aim of the newsletter is to keep staff

informed of new developments, treatments, etc.

in sexual and reproductive health. The newsletter

Extensive updating of the Clinic Procedure

Manual has been carried out in collaboration with the Nursing advisory Committee. A new set of procedures have been developed in relation to

men's sexual and reproductive health. The doctors have also initiated the production of some new information pamphlets and the reviewing

Feedback

I have used your services many

times and am very happy with

the service. Everybody was

always very helpful and helped

me. I particularly appreciated

arranging a Polish interpreter for

me. I don't know what I would do

if I had to find interpreter myself.

Thank you.

of existing materials.

\*

is circulated throughout the organisation.

special workshops at the conference.

Nursing Advisory Committee.

The Community Health Worker Advisory Committee had a name change during the year as it was previously known as Community Education Advisory Committee. The new name aligns more closely with other Advisory Committees that reflect a professional group within the organisation. The group meets approximately 5 times per year and is comprised of a Community Health Worker from each regional team, the Coordinator Community Education Courses and Staff Development and the designated Management team representative. The Advisory Committee ensures communication about the work of the group by verbal reports at team meetings and the circulation of minutes across the agency.

Some of the work of the advisory committee over the past 12 months has included:

- The consideration and recommendation of the purchase of new resources, the updating of current resources and the development of new resources in response to identified needs.
- Reporting and disseminating information about various networks and committees attended eg HEAIC.
- Ensuring quality assurance of Community
  Health Worker skills through the
  consideration of competency based training
  and support for assessment of group
  facilitation skills to be carried out annually.
- Identifying staff development needs and discussion about content of the Education Skills Forum, a staff development session held quarterly which is open to all staff.

Provision of recommendations to management re. policies and procedures which relate to education work, for example the Work in Schools policy and the Program/project proformas.

# Staff Development - 1998/99

SHine SA Staff participated in the following Staff Development Programs for 1998/99

- Aboriginal And Torres Strait Islander Cultural Awareness Staff Development Program
- Using Interpreter Training
- Female Genital Mutilation (FGM)
- Biosciences Conference
- CPR Update
- First Aid Refresher
- Computer Training
- NUDIST Computer Training
- Microsoft Access
- Update on DB Textworks
- Sexual Assault Training for people with a Disability
- Sexual Concerns Workshop
- Manual Handling for Nurses
- HIV/Aids Awareness training at COPE

- How to Write Successful Funding Programs
- Hep C and Intravenous Drug Use
- Drug and Alcohol Educating Workshop
- Transgender Workshop
- EMDR Training
- Viagra In Context
- Costs Of Violence Workshop
- Law Society Workshop Children And The Law
- Evaluation Workshop
- Cochrane Data base Workshop
- Re-inventing Community Social Capital
- Workplace Assessor Training
- CHASP Reviewer Training
- Group Facilitation Skills Two Day Workshop COPE



# Pregnancy Testing

A pregnancy testing service is available from all of the Primary Health Care Team bases.

Monday - Friday, 9 am to 4pm

There is a cost involved, which can be reduced or waived if necessary. Please bring an early morning urine sample.

Northern Metropolitan Region 8254 8200 ◆ Southern Metropolian Region 8325 8164 ◆East/West Metropolitan Region 8431 5177

# Friday with a **Difference**

I was approached by the counsellor, Munno Para Community Health Service to see if I was interested in co-facilitating a Men's Group which ran for eight weeks on a Friday morning. Traditionally, these groups, have been facilitated by male workers, but as a lot of the topics discussed are issues that involve women it was suggested that a female worker would benefit the group. As I was looking for some staff development opportunities to do with men's sexuality I was supported by the team to give it

The group was made up of men who had previously participated in the course or who had been referred through the Munno Para CHS, other services or through 'word of mouth'. The main topics or themes for the course were:

- How to manage your stress,
- Coping with separation and divorce
- Confidence and communication
- Building respectful relationships
- Enjoy being a man.

The group was mainly non structured in that there were topics that were covered throughout the sessions but opportunities were seized, as they arose, to explore in different ways the men's issues and concerns. Role play, role reversal and other therapeutic type activities were used and this worked well as we were able to work

reasonably successfully with the men's issues as well as hold their attention. This way of working (which is new to me) helped the men to identify their issues and gave them opportunities to develop 'next steps' and strategies for coping.

The men felt that it helped in having a woman in the group as they could ask me questions and I was able to answer from a woman's perspective. To start with I mostly listened and observed but soon felt I was able to respectfully challenge many of the myths the men held around issues of relationships and communicating with women. The men were also respectful of the fact that I was the only woman in the group and were careful to direct questions to me that were not of a personal nature. They also respected the fact 'my perspective' was not the 'only' voice of women. I ran a session on Human Sexual Response, which went well and gave the men "many foods' for thought!

For many of the men this group filled a gap as they expressed feelings of isolation having had limited opportunities to meet other men or women and to talk openly about their feelings.

It was a very valuable learning experience. It prompted me to consider how SHine SA as an organisation can offer alternative ways of giving men opportunities to discuss and explore issues around sexuality and sexual health which are respectful and thought provoking.



# **SHine SA Pro-active** in Celebrating **Diversity**

My introduction to SHine SA was as a first year women's studies student at Adelaide Uni. Our lecturers presented the agency to us as a great place to get resources and information for the subject. I finally visited the library here, when essay due dates became uncomfortably close, and found it to be everything promised: friendly and with heaps of information on sexuality, sex, and feminist ideas, which is what all good young women are seeking, of course! My introduction to SHine SA came from within a feminist environment, and this is very important to me and my experience of this agency.

For the first year of my social work degree I was a student on placement at The Second Story Youth Health Service. Through this youth agency I visited SHine SAagain, with a worker from Second Story. On this visit I met some of the staff at SHine SA, and was shown around by this worker, who had actually been on placement at SHine SA herself during her social work degree. SHine SA had a significant presence at my first placement, through running a youth sexual health clinic at Second Story Central on Tuesday afternoons. I was finding that not only were feminists welcome at SHine SA, but young lesbian, gay, bisexual and transgender people were

While on my first placement I began the 'Community Educator in Sexuality' course at SHine SA, and loved it!! Attending this course made me think that running groups like this was something I wanted to do myself. The discussion of values, ideas, and assumptions, challenging others, and being challenged myself was a fantastic educational experience. The values promoted by SHine SA at workshops such as this are of understanding, acceptance and celebration of diversity. The active display and promotion of these values and beliefs by SHine SA as an organisation is why I feel comfortable, welcome and safe in this agency, they are why I want to be here.

placement at SHine SA in the East/West team at Kensington I am very pleased to see the agency has not only continued to be a welcoming, accepting space, but has increased its display of being a place where traditionally disadvantaged groups have a strong say. This is evident from specific examples such as SHine SA's work in setting up a Nationally Accredited Course for Aboriginal and Torres Strait Islander Health Workers in Women's Sexual and Reproductive Health, and in SHine SA's work in organising the third Health In Difference Conference for Lesbian, Gay, Transgender and Bisexual people to be held in Adelaide in October. The pro-active role SHine SA takes in promoting the health of marginalised groups is perhaps the best way to disrupt the very segregation of traditionally disempowered people and allow us to have space, power and voices of our own.

# Library Services

The Janet Browning Library offers a large collection of books and information on sexuality and sexual health.

Become a library member by completing a registratoin form and paying a small fee.

A wide range of books, journals, reports, research articles and leaflets are available on:

Contraception • Pregnancy • Unplanned Pregnancy • Adolescence • Men's & Women's Health • Safe Sex • Fertility • Infertility • Sexuality • Sexually Transmitted Infections • Sex Education • Parenting • Human Reproduction • Foetal Development & Birth • Gay, Lesbian, Bi-sexual & Transgender Health • Disability • Relationships • Sexual Techniques & Pleasure • Muliticultural Issues • Aboriginal Health

Fees are as follows:

\$10 - Professional Education Participants and Workers

\$2.50 - General Public, Students

\$1.50 - Pension Card Holders and One-Off Borrowers

Assistance is available, please contact the Library Officer on 8364 6637; 1800 188 171 (country callers); SHineSALibrary@dhs.sa.gov.au (email)

Library Hours: Weekdays, 9.00 am - 5.00 pm



# **Shining Through**

A rather shy, reclusive cousin came to stay at a relatives home. She was apprehensive, as she had to see a specialist about a "woman's problem".

"You know one of those 'smudge or smear test thingy's", she intoned quietly.

"Oh a 'Pap smear', cousin replied knowingly. "I have one every year, no worries!"

Next day when cousin returned from the test, she was rather outraged at the familiarity of the city specialist.

"Well what did he say, or do?" Couz asked.

"Nu-nu-nothing really, he just kept saying: 'My you've gone to a lot of trouble'".

"What did you do?" fuzzled Couz probed.

"I had my shower in the morning, borrowed a bit of that 'fem spray stuff, hope you don't

"We don't use or have 'fem spray, show me the can you used".

To the bathroom the cousins dashed, and when the cousin pointed to the offending can, Couz let out a shriek of laughter.

"That's glitter for your hair, you 'Great Wally', no wonder the poor Dr thought you had gone to so much trouble!"

Lyn Hayward





# Pap Smear Reminder

# Women - Take Charge of Your Health!

Have you ever had sex?

Is it more than two years since you had a Pap smear?

If you answered YES to those questions it's time you had a Pap smear. Contact your local General Practitioner or SHine SA Clinic.

# SHine SA Rap



I sat down the other day I was talking to my mum asking her the way things were when she was young Could her and grandma talk about sexuality she said the only thing that got talked about was the birds and the bees.

> Then the 70's came along and a new exciting thing the emergence of a service called Family Planning Women now could get the pill and have greater control over how many screaming kids they would have to hold

Well it's taken some thinking, It's taken some time but the brand new of Family Planning SA is SHine!

I was waiting at the bus stop the other day when a friend of mine turned to me and said I think I'm gay Do you know a place where I could go for help and advice where they might understand what it's like to be a dyke.

I said get on down to SHine SA they will see you right with information and support for lesbians gays and bi's.

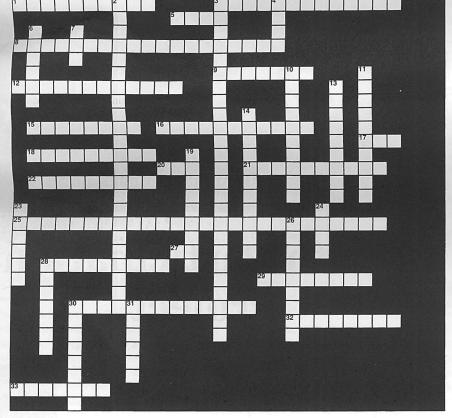
I was talk to a mate of mine the other day She said she needed a Pap smear but felt too much shame I said I know a clinic down at Nunkawarrin Yunti or at Port Adelaide Community Health where you can go for free

I was surfing the world wide web the other day when a friend of mine in Pinnaroo sent an email my way He wanted information on condoms and STDs The facts with no bull shit but so his parents couldn't see I said I know a web site that is user friendly SHine SA is up to date with information technology

Well it's taken some thinking It's taken some time But the brand new name of Family Planning SA is SHine!

Written by Jodi Anderson © SHine SA 1998

# **SHine SA - Crossword**



# Across

- Something that could make a diaphragm
- Female Sterilisation.
- The crime of forcing someone to have sex without their consent.
- A sexual and reproductive health telephone information service.
- If your partner says 'yes' to sex, they have given their \_\_\_\_
- Sexual self enjoyment. 12.
- Preventing exchange of body fluids between partners.
- 16. What does the I stand for in SHine SA.
- 17. How many hormones are in the contraceptive pill?
- 18. Number of hormone pills in a 28 day oral contraceptive pack?
- Something which can cause infertility. 21.
- Something you always check on your condom package.
- 22. Viral infections which can affect the liver.
- 25. What does ECP stand for?
- 27. What you say when you don't want to
- Male Sterilisation. 28.
- How often should the pill be taken. 29.
- 30. Kissing passionately.
- 32. Sexual climaxes.
- Using hands to release muscle tension.

# **Downs**

- Contraception given every three months.
- Something a man should do often to detect lumps.
- Something that should always be used with a condom.
- What does the first S stand for in SHine
- Rectangle of latex designed to make oral sex safer.
- 10. What does the N stand for in SHine SA?
- The number of hours after unprotected sex the Emergency Contraceptive Pill needs to be taken within.
- An STI which can be successfully treated 13. with antibiotics.
- 14. The tube which is cut in a vasectomy.
- What does the E stand for in SHine SA? 19.
- What does H stand for in SHine SA?
- 24. When a Ngarrrindjeri person is budli, this means they are feeling \_ \_ \_ .
- 26. Sexually Transmitted \_ \_ \_ Can be given to help prevent Hepatitis B.
- Creative sexual touching is sometimes
- A thin piece of rubber which covers the 31. penis to protect against STIs and pregnancy.

Answers on page 29

# Snapshots



An African Band entertained guests at the SHine SA Name Change launch October 1998

# **Dot-Com-Nip-Dick**

'Know what that means?" Nor do I, although Nip, Dick and Dora relate to our children's first readers at school. Dot-Com could be morse code, I suppose. Now 'SHINE' has me even more perplexed - an acronym meaning what?? "SEXUAL HEALTH INFORMATION NETWORKING & EDUCATION". Whoopee Chook!

I read this weeny message cloaked around the big word "SHINE".

Now I know "Family Planning" had to go, as I said in my last article it kinda excluded, shall we say more mature woman, but "SHINE" has her rattling round in her hand-bag for her bifocals, and still non the wiser.

Answer: More advertising. Great if you've got a few stray thou' laying idle in a bottom drawer. This is obviously not the right answer. Try again.

Education: Very interesting. We're obviously an organisation not lacking in new ideas, so put those 'thinking caps' on, and go, go, go!

"S" stands for Sexual

'H" is for Health Already this stands for all our wealth

'I" of course is for information

"N" is for networking all organisations

"E' stands for Education to finish the line.

Put altogether, it naturally spells 'SHine".

My suggestion is forget computers, and let's go back to the old word of mouth, brochures and pamphlets. In essence this could be as simple as people in our organisation giving presentations to organisations: able bodied, disabled, advantaged and disadvantaged, and distributing literature.

This all needs to be articulated well, and the word "SHine" will be as familiar as "Family Planning" used to be.

Lynette J. Hayward

# Do you want to make a Complaint or Compliment about SHine SA?

When you use SHine SA services you will be treated with respect, and receive the best quality health care at all times. This means that:

- you will be listened to and taken seriously
- you will be given full information about your health, and your choices for treatment
- you will be spoken to in a clear and respectful manner and in a language you understand
- you can ask to change the worker you see
- you can say NO to any treatment or advice offered
- you can ask for an interpreter
- you can choose to have someone else present during your appointment, such as a friend, partner, relative or an advocate

# SHine SA we keep records to help plan your health care.

- You can arrange to look at your file
- Your personal information is kept strictly confidential
- No one other than you and your SHine SA health workers have the right to see your file unless your permission has been obtained
- In some legal situations information may have to be released ask us about how this may relate to you

# SHine SA is a training organisation

We will tell you when a doctor, nurse or health worker is here for training in a clinic, or if a student is working with staff. You can choose whether or not to have them present.

# If you have comments or complaints about SHine SA services you can:

- speak directly to your health worker
- ask to speak to a manager
- fill out a comment form, which is given to you at each appointment.
- write to or call Kaisu Vartto our Chief Executive Officer: 17 Phillips St Kensington 5068, tel: 8364 5539, fax: 8364 2389, email: vartto.kaisu@dhs.sa.gov.au
- contact a member of our Council (see page 30)

# What happens next ...

- If you give your name and contact details we will tell you what has been done about your comment or complaint.
- We will keep your personal details confidential.

# Data Collection for the CHASPed Again! **Future**

SHine SA Counts

A small group of Shine SA staff have been working on a project with a consultant to improve the existing data collection system.

The aim of the project is to allow the organisation to collect data and provide reports which will more accurately reflect the work we do with the following communities of interest:

- Aboriginal and Torres Strait Islander people.
- People with Disabilities

Thank

- Young women and young men
- People who live in rural and remote
- Lesbian, Gay, Bisexual and Transgender
- People from culturally and linguistically diverse communities.

As well, the project will assist the organisation in providing more relevant information about the Professional Education courses that are delivered and more accurate profiles of course participants.

A great deal of thought has also gone into accurately reflecting the special project work and community development and education activities of the organisation.

Consultations have been carried out with a range of staff members in the development of code descriptions and data collection forms. Two staff members have been identified to undertake system administrator training and a staff education program has been planned for the next financial year.

Volunteers

SHine SA would like to thank the volunteers who work within our organisation. Their ongoing committment and hard work is much appreciated.

# SHine SA has recently undergone its second Community Health Accreditation and Standards Program (CHASP) Accreditation Review. At it's

first review, conducted in 1995, SHINE SA (then Family Planning SA) achieved a three-year accreditation. This represents the highest achievement possible for a first review.

CHASP is a quality improvement Program based on the beliefs that underpin Primary Health Care. This framework guides all of CHASP's work including the review process. CHASP puts Primary Health Care principles into practice.

Before each CHASP review Staff, Management and Council all work together to make sure that the organisation meets the CHASP requirements. There is strong commitment by staff to the process and a whole-agency approach is used to ensure a positive outcome



Bernadette & Sandra, CHASP Review Team at work



Jeanette & Rae, **CHASP Review Team at work** 

One of the tools used to measure development is the collaborative review process which is conducted by a team of CHASP trained people. The review team assesses the extent to which a service has achieved the CHASP Standards.

We now await with excitement the results of the review and look forward to a further accreditation period. A report document which describes in detail all the findings of the review will be available soon for public perusal.

As a quality improvement program, CHASP work is on-going. This means that SHine SA will be able to continuously monitor its work so that the South Australian community is assured of the best sexual health services.

# Snapshots Picnic in the Park! SHine SA staff at the SHine SA Picnic in the Park display.

# What Do You Reckon?

Issues for Young People by Young People. (Taken from a resource available from SHine SA to facilitate discussion about safety isssues.)

L	S	K	C	E	Н	C	H	T	L	A	E	H		C
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Y	C	N	A	N	G	E	R	P	U	C	S	A	0	В
C	W	K	A	L	C	0	N	S	E	N	T	G	R	A
N	R	D	L	E	S	В	I	A	N	Н	U	W	A	C
E	T	R	E	D	N	E	G	S	N	A	R	T	L	Y
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R	N	V	V	L	R	S	ı	T	1	T	A	P	E	Н
E	A	I	D	Y	M	A	L	Н	C	D	T	M	X	E
M	Н	N	S	T	0	E	S	U	С	K	I	N	G	P
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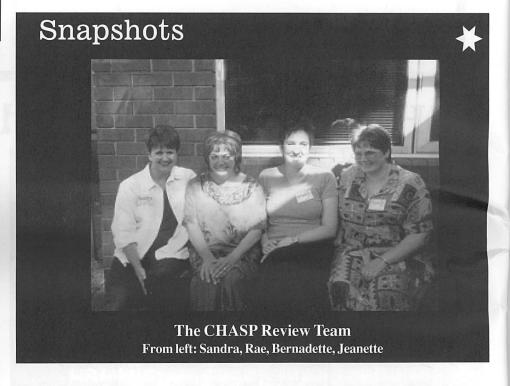
Abortion Alcohol Bisexual **Body Piercing** Celibacy Chlamydia Condoms

Dieting **Drink Driving Emergency Pill** Gay HIV **Health Checks** 

Hepatitis

Herpes **IVDU** Kissing Lesbian Masturbation **Moving Out** Oral Sex

**Pregnancy** Race Safer Sex The Pill Toe Sucking Transgender



# **Youth Participation Project**

Message from Youth Advisory Group

Greetings cybersurfers, readers of the Annual Report and visitors to the SHine SA website ... stop ... this area on your screen (or newspaper) has been commandeered by a radical group calling itself YAG .... stop .....our mission is to infiltrate, persuade and negotiate strategies encouraging youth participation within the organisation of SHine SA .... Stop ....

No, this is not a take over, coup de tat or website hi-jack but a cunning play to attract your attention. So read on ....

Yes, some of the above is true. The Youth Advisory Group (YAG) was initiated by Leanne Black (SHine SA) to:

- Develop in partnership with young people a flexible and sustainable youth participation model that can be implemented by SHine
- Ensure young people's contribution to the development, maintenance and evaluation of services offered by SHine SA.

Eight young people (including our legendary social work student on placement at SHine SA) representing SHine SA's communities of interest meet regularly (over pizza, pasta and good company) to talk about what youth participation means to us and how the model will facilitate the valued expression of young people's voices. Whilst addressing the issue of youth participation, we have had fantastic and confronting discussions about

distributions and uses of both overt and invisible

Our personal journey and conversations augmented by research into youth participation and interviews with SHine SA staff. Leanne asks



Officer

staff what works and what needs to change with regard to youth participation in the organisation.

Currently, YAG is at the melting pot stage and looks forward to cooking up a spicy, thought provoking, challenging, idealistic and realistic model of youth participation. Dinner will be served around November when the flavours have marinated to perfection.

Some of Youth Advisory Group Members



SHine SA Annual Report

(or is that "under" the stars) By yours truly, Madame Sexly



(21 March - 20 April)

Traits: Adventurous, energetic, pioneering, courageous, enthusiastic, dynamic, confident, impulsive and impatient.

People born in Aries are spontaneous and assertive. So sex is very spur of the moment, so be prepared! Sexually they are full of energy, vibrant and always trying new activities - they are lots of fun! If you are attracted to an Aries, tell them how attractive they are, but don't lay it



(21 April – 21 May)

Traits: Patient, reliable, warm-hearted, loving, persistent, determined, can be jealous and possessive. Although calm and steady

the Taurean loves beauty and comfort, touch and taste satisfy them! So be get creative and tickle those taste buds! To get to know a Taurus just be nice to them, they are sensitive.



(22 May - 21 June)

Traits: Adaptable, versatile, witty, intellectual, youthful, lively, nervous and tense.

Watch out for those twins, they can be very versatile and lively. When it comes to sex, they are full of excitement, so sex can be an adventure. To seduce a Gemini, know a lot about something and they will hang out with you until they learn it.



(22 June – 22 July)

Traits: Emotional, loving, intuitive, imaginative, cautious, sympathetic, changeable overemotional.

With their emotional and loving nature, intimacy is very special with a Cancerian, but their imaginative side could catch you by surprise. Keep those ideas alive and be creative when it comes to sex! They are a water sign and water shifts, so you need to be in tune with their moods .A cancer will never make the first move, so it's



(23 July – 22 August)

Traits: Generous, warmcreative, hearted. enthusiastic, broadminded, faithful, loving, patronising, intolerant.

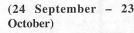
Warm-heartedness and creativity make Leo loving and interesting all in one, what more could you ask for? Keep your Lion happy and purring and during sex may they explore new territories. To win them over tell them they are the most wonderful person in the world.



(23 August - 23 September)

Traits: Modest, shy, meticulous, reliable, practical, intelligent, fussy, overcritical, perfectionist.

Everything must be perfect, and everything must be in sequential order, for things to go well. They want stability in their relationships and for them this is more a security thing. However, beneath the cucumber cool exterior there smoulders a very sexy person with depths of passion just waiting to be unleashed.



Traits: Diplomatic, charming, romantic, easygoing, sociable, peaceful, idealistic, indecisive, changeable and flirtatious



Romance is the call for the day with these charming people. Charm them and your wish is their command, the only limit is your imagination. They like you to pay attention. Being playful, they don't like conflict and they love being in a

(24 October -November)

Traits: Determined, intuitive, emotional, powerful, passionate, exciting, jealous compulsive and secretive.



The most sexual sign and always curious about sex. So with their passionate and compulsive side, sex will never be boring. Keep on your toes and keep the scorpion thinking!!

(23 November - 21 December)

Traits: Optimistic, loving, good-humoured, honest, straightforward intellectual, careless, tactless and restless.



They are fun, energetic and engaging when it comes to sex, lots of fun in the great outdoors with a Sagittarian. To seduce them, listen to what they say and let them know they are wonderful, but don't pry into their business, because they are independent.

(22 December - 20 January)

Traits: Practical. ambitious, disciplined, patient, careful, humorous, pessimistic and rigid.



The are earthy and passionate. They often like to be in control, which can have its positives and not so positives and sex is usually never over until they say it is. They are loyal and will do anything for you. Like all earth signs, buy them something practical they will love it.

(21 January -February)

Traits: Friendly, humanitarian, honest, loyal, independent, perverse and unpredictable.



They are the most charming sign, the bearer of water. They are very popular and everybody wants to be around them. All the air signs require intellectual stimulation, they are very interested in talking about sex and playing games leading up to the physical act, lots of fun activities to be

(20 February – 20 March)

Traits: Imaginative, kind, selfless, sympathetic, idealistic, secretive and easily led.



Leave it up to a Pisces to make sex imaginative but within that thoughtfulness is a sensitivity and compassion, a lovely mix don't you think? To seduce Pisces people, be nice to them and be in-tune with them and show that you understand



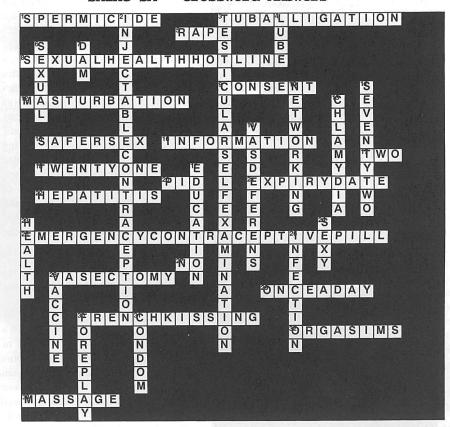
# SHine SA Online

Access information on sexual and reproductive health at SHine SA's website.

www.shinesa.org.au

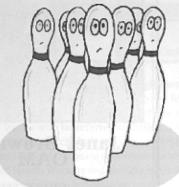


SHine SA - Crossword Answers









Why take the risk?

# Did You Know About ....

# The New Emergency **Contraceptive Method**

Women now have another choice in Emergency Contraception.

It is the Progesterone Only Pill Emergency contraceptive method and was introduced at Shine SA in 1999.

The Progesterone Only Emergency Contraceptive pill needs to be taken within 72 hours of having unprotected sexual intercourse.

To get this Emergency Contraception contact a SHine SA clinic or a doctor.

You can get more information about Progesterone Only Emergency Contraception by contacting:

# **Sexual Health Hotline**

9 - 1 Monday to Friday 8364 2389 (Telephone) 1800 188 171 (Country Callers) 8431 5177 (TTY)

sexualhealthhotline@dhs.sa.gov.au (email)



(formerly Family Planning SA)

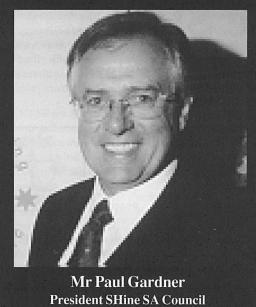
In December 1969 the Family Planning Association of South Australia (FPASA) commenced operations with a small grant from the then South Australian Government and the commitment and enthusiasm of a small group of volunteers and staff. The organisation now called SHine SA, has provided almost 30 years of service to the South Australian community, during a period of significant social change. The organisation is as vital now as it was in 1970. The ongoing commitment of volunteers, dedicated staff, funding from state and federal governments and the importance of sexuality, sexual and reproductive health services and education have ensured this. As society has changed, so has the organisation.

The caption on a 1974 poster advertising FPASA says, "We thought everyone knew about spacing! Visit Family Planning - the people spacers". The focus of the organisation in the 1970's was in improving women's access to

effective contraception and information about reproductive choices. Unplanned pregnancy rates were high, particularly in young women, who often had no other choice than opt for adoption. Additionally, until 1970, abortion in South Australia was illegal, forcing many women to have "backyard" abortions with complications such as infection or even maternal death, almost unheard of today. In 1971 the fertility rate per 1000 women in South Australia was recorded as 92.0 and the abortion rate as 9.6. In marriages in 1971, where both the bride and groom were less than 19 years of age, nearly 80% of the girls were already pregnant. It is what we used to call the "shot gun wedding".

Condoms were not widely available or used for contraception and not all doctors would prescribe oral contraception, particularly to unmarried women. While the 1970-1980 decade saw a dramatic decrease in the fertility rates for women under 25 years, the legalisation of abortion on medical grounds saw a steady increase in abortion

# President



particularly in young women, a trend witnessed in other countries. Access to contraception was a community priority and SHine SA focussed services on meeting this community need.

The 1980-1990 decade was a period of strengthening the organisation capacity to provide education and prevention programs in the community and professional education programs for doctors, nurses, teachers and other community workers, while maintaining clinical services with a focus on contraception and women's health. The global HIV/AIDS threat gave further impetus to the prevention effort. Achieving and maintaining a state of good sexual and reproductive health was seen as an important goal for all of the community. As a small organisation, it was acknowledged that in order to bring about positive change in the community's health, the community and other service providers would need to have knowledge about sexual health issues.

In 1981 the fertility rate per 1000 women in South Australia was 64.5 having reduced by some 33% within the decade. The abortion rate was 13.7 having increased only by 4.1 per 1000 women and "foundling" homes and babies for adoption were becoming a thing of the past. Women and their partners were generally opting for smaller families and later in life, the goal of "every child a wanted child" was closer to being achieved than ever before.

The decade between 1990 and 1999 has seen further significant change. Our definition of family has moved from "nuclear" to a greater acceptance of diversity in family structure and roles. There are more "single" parent families now than even before, but the number of teenage single parents has reduced. In 1998 the abortion rate was 17.2 per 1000 women and the fertility rate was 58.2 For SHine SA the major challenges have come from a mixture of internal and external factors. The organisation has become increasingly clear about its strategic direction, the need for productive partnerships, clarity about what it can and what it cannot do, who with and for

While the majority of Australian's would now support the idea that nutrition education can lead to healthier food choices, Australia is one of only a few highly developed affluent countries that does not have sexuality education as a compulsory course of study for its young people. We know from recent research that access to quality sexuality, sexual and reproductive health education before sexual activity begins, can lead to young men and women exercising greater control over their own health and well being.

In Australia, there is a lengthy preparation for social participation, but we do not prepare our young people for sexual activity, relationship responsibility and respect. The countries that do, can demonstrate significantly lower levels of unplanned pregnancy and abortion. This is an area that SHine SA will continue to provide leadership for.

# Janet Browning OAM

Born: Died:

Adelaide 3 October 1920 Adelaide 21 June 1999

# Obituary

Mrs Janet Browning was a founding and life member of SHine SA (formerly Family Planning South Australia). She served as honorary secretary from 1971 to 1982. She also worked tirelessly at lobbying for political support for the organisation and for essential funding, and she spoke to professional and community groups about the organisation and

Mrs Browning established the Australian Federation of Family Planning Association and was it's first SA delegate. Mrs Browning also contributed internationally to the family planning movement as a delegate to the International Planned Parenthood Federation.

Mrs Browning was one of many very brave women in the 1970s and early 80's who came from conservative middle-class backgrounds, but could see that many women were doing it tough controlling their own fertility, spacing their children because they didn't have access to friendly family planning services.

# Council Members 1998/99

- Paul Gardner (President)
- Peter Kay (Vice-President)
- Pushpa Osborne
- Sharon Clarke
- Raven North
- Richard Bruggemann
- Patricia Cox (Staff Nominee)
- Kathy Alexander (Minister's App)

Snapshots

- Margaret Bako
- Barbara Baird



# <u>Feedback</u>

The members of the Annual Report Committee (ARC) hope you find this newspaper both interesting and informative. If you would like to comment on this (or on any of our services) contact the:

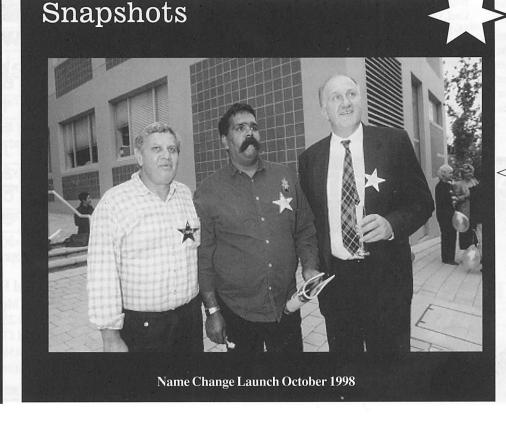
Chief Executive Officer SHine SA

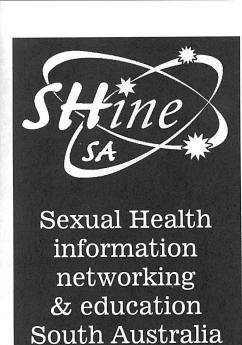
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(formerly Family Planning SA)

Inc

# Chief Executive Officer

This Annual Report is full of interesting stories about the work of SHine SA written by staff, clients, Council members, volunteers and management. In putting this report together, we are mindful to give examples of the work we do, our partnerships with other providers in the health, education and community sectors and the communities with whom we work. Your feedback is welcomed and you can contact me by telephone, letter or email me on kaisu.vartto@dhs.sa.gov.au

SHine SA is a small but vital community based organisation with almost 30 years of service to the South Australian community and a history that goes back to 1969. It was the year when Russell Morris was Australia's undisputed king of rock'n'roll and the "Real Thing" the hottest single. Man walked on the moon, we protested against Australia's involvement in the Vietnam War and women's liberation was an item on the public agenda. It all seems such a long time ago.

1969 was also the year the South Australian Medical Women's Society and the National Council of Women urged the Government to provide financial support for establishing a service that would focus on reducing unplanned pregnancy and abortion and make contraception more accessible to women. Unplanned pregnancy in the late 1960's was a major social issue, particularly among teenagers as it had been for many decades before and illegal and often backyard abortion a major cause of maternal mortality and hospital admission among women.

In 1970, following the efforts of many men and women in South Australia and a small grant (\$8,400) from the State government, the Family Planning Association of South Australia was born. For the first time, South Australian women

had access to effective contraception, greater control of their reproduction, accurate information about reproductive choices, health and well being. In the two and a half decades that followed, the major focus of the organisation continued to be on the provision contraceptive and well women's services. For 25 years, approximately 75% of the operating income were applied to the provision of clinical services and 25% to community and professional education.

As a result of a preliminary external review in 1992, undertaken by the then

Community Health Accreditation and Standards Program, a restructure and reorientation of the organisation began in 1994/95. The aim was to refocus services to prevention, health promotion and professional education and reallocate resources to communities that historically had not accessed sexual and reproductive health services or prevention programs. By 1998/99, 25% of the operating income was applied to the provision of clinical services and 75% on community based prevention and professional education programs. The organisation once called Family Planning became known as SHine SA.

SHine SA has always been known for high quality service provision and we take great care to provide services that meet individual, community and professional expectations. The Quality Improvement Council (previously CHASP) provides an external peer review process that ensures the services provided by Accredited organisations comply with world class standards within an organisational environment of continuous quality improvement. In February 1999, we undertook our second Accreditation Review and have been recommended for the maximum 3-year Accreditation.

As a non-government organisation (NGO) almost entirely reliant on government grants, one of the difficulties we constantly face is our ever-decreasing government grants resource base and the ever-increasing cost of providing services. Having to make decisions about what service we cut in order to pay the increased costs of service provision is particularly difficult. Government's say they do not fund salary increases for NGO's, we have to fund the increases from within existing resources or we could fund raise? Reducing primary services, clinical or education, to populations with high need, in communities with

Chief Executive Officer

Ms Kaisu Värttö
Chief Executive Officer SHine SA

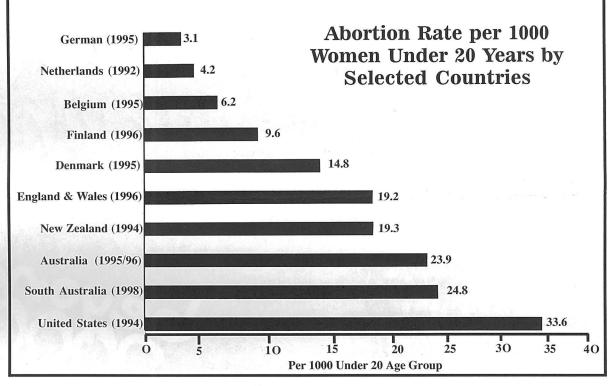
inadequate numbers of other providers and a history of poor access to prevention and education, makes neither economic or common conse

Federal and State government funding in 1998/99 (66% and 29% respectively) provided \$1.9 million dollars for operations, with an additional 5% being raised through the provision of some services. This funding in actual dollar terms is the same as it was in 1992/93, at a time when it was possible to raise some revenue from contraceptive service provision and the sale of oral contraceptives. We no longer provide the quantity of contraceptive services and it is no

partners are able to make decisions about when and how many pregnancies they will have and many women are deferring first childbirth until their thirties. The early family planning strategies, which increased women's access to contraception and the number of doctors able and willing to provide the services, have been successful. While abortion rates increased steadily in the 1970's in South Australia, as they did in all other developed countries and Australia as a whole, they have now begun to plateau and South Australia has an abortion rate for all women that is well below the national average. Still, this is not enough.

Next to the United States of America, Australia has one of the highest teenage pregnancy and abortion rates in the developed world. Every year some 2500 young women under the age of 20 years become pregnant in South Australia of which 75% are unplanned. Approximately 50% of these pregnancies end in an abortion and in 1998 24% of abortions in teenagers were 16 years or under. Some teenage mothers and their children live happy and fulfilled lives, particularly if they are emotionally and financially secure. Far too many do not; they live in poverty and social exclusion. Many young women have said, "Don't get me wrong, I love my child but if I had only known what the consequences were, I would never have had sex".

High rates of teenage pregnancy are not inevitable. Some countries like Germany, Belgium, Finland and Holland with pregnancy and abortion rates among teenagers similar to South Australia in the early 1980's have experienced two decades of rapidly decreasing rates. These reduced rates have not happened of their own accord. The changes have resulted from a very deliberate



longer possible to raise revenue through these means. Most women will visit their doctor for contraceptive advice, while clients with more complex issues will be referred to SHine SA. Additionally, as the clinical services underpin professional clinical education of doctors, nurses, Aboriginal Health Workers and medical students and are targeted to populations with poor social health and complex sexual and reproductive health issues, consultations are usually lengthy and the clients simply unable to pay. SHine SA does not duplicate services provided by other providers and the organisation cannot continually reduce services to fund the increased costs of providing the service. We also cannot cease service provision.

Pregnancy rates have reduced dramatically since 1969; in fact they have halved among all age groups. More than ever before, women and their review of public policy, the addressing of policy vacuum and policy barriers and the adequate resourcing of government and non-government agencies in health, education and community sectors. These have included the introduction of compulsory school based education programs on relationships and sexuality, better access to contraception, the targeting of young people from at-risk groups and focussing on young men, who are half of the solution.

The choice is ours, we move into the next millennium with complacency or we agree that we can work together. Governments, communities, organisations and in particular young people can make the difference, cultural factors aside, there is much we can learn from the countries that have already demonstrated this possibility.



# Thank You

Council, Management and staff of SHine SA would like to thank

- The Hon Mr Dean Brown, Minister for Human Services
- Ms Christine Charles, Chief Executive, Department of Human Services
- Aboriginal Health Services, Dept of Human Services
- Public & Environmental Health Services,
   Dept of Human Services
- SA Cervix Screening
- The Hon Dr Michael
  Woolridge, Federal Minister for Health
  and the staff of the Department of Health
  and Aged Care, Canberra and Adelaide.
- The many State and Federal politicians who support SHine SA; and
- The many organisations and individuals with whom we work in partnership to improve the sexual and reproductive health of the South Australian community.

