

## Sexual health rights

There is much talk about rights and the abuse of rights these as it marked the first international consensus on the principles of days, particularly through the stories reported in the media about child sexual abuse. At SHine SA individual rights are the daily topic of conversation with our clients, and the community's right to good sexual health is often the cup-of-tea conversation in the staff room.

and plans. It is the organisation's way of ensuring that people understand what they are entitled to and their responsibilities. However, we have discovered through our work with young people particularly, that few know about their rights and responsibilities around sexual health and relationships.

The Universal Declaration of Human Rights was agreed to by the General Assembly of the United Nations in 1948, with Australia a signatory among some 150 nations. The United Nations was established in 1945 by like-minded countries to secure peace and reaffirm fundamental human rights based on the dignity and worth of each individual person. In 1966 the Universal Declaration of Human Rights was further strengthened by the development of two legally binding treaties, the International Covenant on Civil and Political Rights and the International Covenant on Economic, Cultural and Social Rights. Collectively these two documents are known as the Bill of Rights.

While Australia has agreed to protect and promote the rights described in the Declaration (which includes the right to be free from discrimination on the basis of sex, race, religion, disability, age, sexuality and political association), Australia herself does not have a bill of rights enacted in law.

The United Nations Convention on the Rights of the Child (CRC) was declared in 1989, Australia becoming a signatory in 1991. One hundred and ninety two world Governments are signatories to the CRC. The CRC is a set of legal rules, with 54 different 'articles' which focus on the rights of young people below the age of 18 years. Some of the rights specifically apply to the sexual and reproductive health rights of young people. These rights define what young people are free to do, as well as the supports and services they are entitled to in a civilised society.

Australia does not have a bill of rights for young people, nor a bill of rights for sexual health specifically.

Major advances in the scope of sexual health rights were achieved at the 1994 International Conference on Population and Development in Cairo 1994 and the 4th World Conference on Women in Beijing in 1995. Beijing was particularly significant

#### All young people have rights.

These rights belong to you and no one can take them away from you, no matter whether you are a girl or a boy, rich or poor, married or unmarried, whatever your religion, colour, nationality, sexual orientation, disability or health status, for example, being HIV-positive.

Adapted from Article 2

#### All young people have the right to live, grow and have a healthy life.

Some sexual and reproductive health problems, such as HIV/ AIDS and unsafe abortion can lead to illness and death. With information, skills and services that help you to make informed choices, you can protect yourself and others from unwanted pregnancy, HIV and other sexually transmitted infections.

Adapted from Article 6

#### Young people have the right to participate

Find a word.....

When decisions are made about you and your sexual health, you have right to be a part of making that decision. Your feelings and opinions should be listened to and taken into

Adapted from Article 12

#### sexual rights. Very little has happened to strategically advance improvements in sexual health rights at a national level in Australia for all population groups, but young people particularly. Many would argue that there has been a recent and insidious process to undermine historically hard won rights.

Rights are articulated into our policies, procedures, practices Following on from Cairo and Beijing, the Nordic countries (Sweden, Finland, Iceland, Denmark and Norway) developed the Nordic Resolution on Adolescent Sexual Health and Rights. Their experience demonstrates that with commitment to the rights of young people, acknowledgement of young people as sexual beings, access to education, information and services, and developing the confidence and skills of parents and carers, many of the sexual health issues faced by young people can

> Through the provision of comprehensive and age-appropriate sexual health and relationships education at school before young people become sexually active, confidential and accessible sexual health services including contraception, availability of condoms, and information for responsible decision–making, they can boast amongst the best adolescent sexual health indicators in the world. They have some of the lowest teenage pregnancy rates (half to a quarter of that in Australia), delayed first sexual intercourse (17 to 18 years of age compared to 16 in Australia), high use of condoms and contraception among young people, low rates of sexually transmitted infections and blood-borne viruses including HIV/AIDS, reduced sexual violence, and much more inclusive and aware societies unafraid to talk openly and honestly about adolescent sexuality.

> The Nordic countries are pioneers in providing youth with rights, information, education, communication and services in sexual health. These indicators clearly show that it is possible to solve the issues related to adolescent sexual health by accepting the fact that young people are sexually active and by making a serious commitment to address their needs, placing great emphasis on early intervention, prevention and education.

> SHine SA is an advocate for the following to form the foundation for the development of a Bill of Sexual Health Rights for young people in Australia. The statements are based on articles from the Convention on the Rights of the Child which is available at www.unicef.org.crc/crc.htm.

> > Kaisu Vartto

#### Every young person has the right to freedom of

Young people have the right to learn about sexual health matters. You have the right to seek, receive, and pass on information, for example, how your body works, pregnancy, contraception and sexually transmitted infections, and to talk to friends about what you learned.

Adapted from Article 13

#### Young people have the right to freely think and believe what they like as long as it does not harm

You have the right to form your own views about sexuality and sexual health issues. As you grow older your views about your sexual health should be taken more seriously into

Adapted from Article 14

#### A young person's private life should remain

If you tell a medical person or a teacher something that you don't want anyone else to know, then he or she should respect your privacy. If you have been abused, adults have a duty to inform others who can help protect you or help you protect

Adapted from Article 16

#### What's in this report President & council 30 Primary health care team - North 20 Aboriginal & Torres Strait Islander peoples 8 Primary health care team – South Advertisements 28 Primary health care team – East/West 22 Chief executive officer – Sexual health rights 2 Professional education 18 26 Regional, rural & remote 13 Culturally & linguistically diverse backgrounds 10 Relationships by the stars 27 Entertainment 26 Sexual Health Awareness Week 25 \_\_\_\_\_\_26 Youth advisory teams (Y@s)

Organisational 23 Wiltja mural People with disabilities 12 Workers This publication together with the 2004/2005 audited financial report constitutes the 2004/2005 Annual Report for SHine SA.

Gay lesbian bisexual transgender queer intersex 14 Young people 19 years and under 4

Information services 24 Young adults 20 – 30 years 15



#### All young people have the right to enjoy healthy lives and to be able to access the best possible health-care services.

For example:

- You can visit a doctor or nurse to receive the full range of sexual health services that are available, including contraceptives, abortion services and easy to understand advice about your sexual health.
- When you visit a health centre you are made to feel welcome, safe and comfortable.
- Services should be affordable for you.
- No one should turn you away or stop you from receiving services, or demand that you get someone else's permission first eg. the permission of a parent or spouse, if you are married.

Adapted from Article 24

#### Practices that are bad for young people's health should be stopped.

Some traditional practices are bad for your health, such as early and forced marriages, female genital mutilation, which is also called female circumcision or female genital cutting, and killing girls in the name of honour. You have the right to know about the dangers of such practices and be protected

Adapted from Article 24

#### All young people have the right to information on good health practices.

You should be given wide-ranging and easy to understand information on sexual health issues so you feel comfortable with yourself, your body and your sexuality. This information should enable you to make your own decisions about your sexual health. You should be given this information without being judged or being made to feel embarrassed or guilty. Adapted from Article 24

#### Young people have the right to 12 years of education.

Everyone has the right to receive an education. You should not be denied education simply because you are poor or have a disability. If you become pregnant or have children you still have the right to go to school.

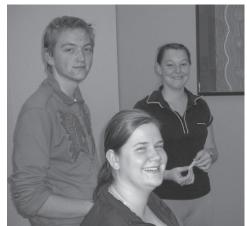
Adapted from Article 28

#### Young people have the right to be protected from physical, sexual or mental harm or exploitation. The government must make sure that all young people are protected from abuse and also take action to help abused young people.

This means no-one, including the people who take care of you, should force you to do things with your body that you do not wish to do. You have the right to say no to sex or any other unwanted act such as being touched or being forced to touch other people. Child trafficking, child pornography and prostitution are against your rights.

For SHine SA, this forms the basis for further consultation with young people about a Bill of Rights in Sexual Health.

Happy Y@ members in the north.



#### Getting included is a rewarding experience

I first found out about SHine SA a few years ago through friends who had used the service before. Before becoming a Y@, I had little to no knowledge of what SHine SA actually did and still do for our community. I found out about the Y@'s by accompanying a friend to have a drop in pregnancy test. Whilst talking to the community health worker, I found out about the Y@'s. Since I really wanted to study and become a youth worker, I thought that being a Y@ would be an excellent opportunity to get my foot in the door. And sure enough, I was right!!

Since being a Y@, I have had the opportunity to do so many great things promoting sexual health. Schoolies week at Victor Harbor and going on pub crawls promoting safer sex by giving out free condom packs are just two of the many great events we have participated in.

Becoming a Y@ has enabled me to not only gain knowledge and insight into sexual health and our community, but also meet new people and create new friendships. Working for SHine SA has been and I'm sure will continue to be an educating and rewarding experience.

Southern Y@

#### The night that rocked!

This year the northern Y@ ventured out to the vibrant and happening pub The Southern in Gawler, during one of SHine SA's most memorable **Sexual Health Awareness Week** 

The Y@ members and workers entered the awesome venue with bags full of funky lanyards, cool condom packs, yummy lollypops and grouse badges. And by the end of the night the bags were empty, yes that's right they were EMPTY! By the end of the two whole packed awesome hours not one person had left the joint without knowing what SHine SA was. Even the bar people participated by wearing this year's funky SHAW t-shirts.

All round it was a fantastic night, everyone enjoyed themselves and there was a great reaction from the crowd of fantastic people which made it a great night to spread the word of SHAW, SHine SA and safety, pleasure, respect! Well done to all involved. It rocked!!!

> Luke Northern Y@



Promoting **Sexual Health Awareness Week** at the

#### Stall in the Mall for Youth Week

Sex, sex, sex, as youth advisory team members we're not afraid to talk about sex and sexual health matters and we have been doing a lot lately. Our most recent event was held in the Rundle Mall (a favourite spot for our stalls!). We returned there this year for Youth Week, where condoms and pamphlets were supplied to the masses.

This year we put a spin on the event and had an art competition. The art could be as creative as people liked, but of course had to be themed around the sexual health motto of safety, pleasure and respect. I was surprised at all the budding young artists out there, and even more surprised at how much young people knew about sexual health issues. I say congratulations to us young people, both talented and

The Y@ chose six winners out of the abundance of entries, each receiving a \$30 Borders voucher no less. Entrants ranged from 15 to 25 years old and competition was tough.

East/west Y@



#### Southern Y@ busy with events and recruitment drive

The southern Y@ have attempted all kinds of activities this year, so I'll start from the beginning. In February we went with Community Health Workers on a "pub-crawl", giving out condom packs for SHAW and promoting safer sex in hotels including Seaford Tavern, The Pier and The Vic. We had a whole

In April, two Y@ members went and did some co-facilitating at O'Halloran Hill Technical and Further Education (TAFE) for the Learn To Earn program. It was good to get first hand experience in facilitating a group.

We also did Willunga High School Expo, which was fun. We gave out a lot of pamphlets, got asked a heap of questions and played the Condom basketball game, and it was great!

In May all the team went out on the road dropping off posters, and pamphlets for Y@ recruitment. We had so much fun but it was a long day and we were glad to get back to southern

Noarlunga Technical and Further Education Big Day Inn made up another community participation activity, which was

Two Y@ members went down to Victor Harbor with a community health worker to do some training with Victor Harbor High School students on safer sex and healthy relationships.

In June we did Yankallila High School Expo, we were asked heaps of guestions and felt comfortable answering them because we have been out and about so much this year. Also some Y@ members went down to Colonnades and Noarlunga shopping centres for a Reconciliation Fair.

So we've had a big year so far and can't wait to do more. We are loving the experience and enjoying getting to know each other. With anticipation we are now waiting to meet the new Y@ members and share our experiences.

Southern Y@

#### Southern Y@ members learn about STIs!

Youth advisory teams

The southern Y@ has had some interesting and helpful training. Sue, SHine SA southern team nurse, came in on two separate occasions and informed us about sexually transmitted infections and pregnancy testing. We learnt a lot, it was worthwhile clearing up misconceptions about different sexually transmitted infections, and to learn the facts; some of which are shocking! Many of us now feel confident on how SHine SA can assist community members with information on sexually transmitted infections.

Southern Y@ members enjoy the Youth Celebrations

We also learnt how the drop in pregnancy testing works at SHine SA and reviewed the process involved and how it can help young people in need. Continuing our training and education later this year some members of the southern Y@ will complete the SHine SA **SE&X course** aimed at assisting workers help young people with sexual health issues.

> Allie SouthernY@



Northern Y@ outside the Davoren Park office

#### Involving young people in the north

community. February saw **Sexual Health Awareness** issues and brainstorm strategies to address these issues. **Week** roll around again with the Y@ going to Elizabeth Technical and Further Education campus with a display and information for students. Northern Hotspots returned to the Village Tayern at Golden Grove for another busy event, and also added The Southern Hotel in Gawler to the list with a fun filled night with the patrons. The Y@ handed out lots of goodies to the people and everyone got involved, having a guess at the jelly beans in the jar game with great prizes being given out. The hotels were very supportive with management, staff and DJ's enjoying the events.

National Youth Week also brought a few events with the northern Y@ attending Paralowie High School for their Youth Week Expo. The team also attended Gawler's youth week event and had fun making badges and tie dying bandanas with the students who came to check it out. On the Saturday we attended City of Salisbury Youth Week finale and enjoyed a day of music, tattoos Once again, the northern team has recruited some new Y@ and activites, while handing out SHine SA goodies.

In June, the northern Y@ with the support from the northern staff, planned a youth forum, Y@s speaking to youth, and invited local high schools and youth groups to attend the day.

The northern Y@ has had another busy 12 months in the The aim of the day was to get young people discussing youth

The Honorable Stephanie Key, Minister for Youth, opened the day and encouraged the young people to speak their minds and get active in the community. Approximately 100 young people from local northern suburbs schools, Job Placement, Employment and Training (JPET), Para West Adult Campus and teachers and support staff attended the day. Many issues were discussed and young people were invited to present their strategies to a panel of members from local government, Community Police Unit, Youth Affairs Council of South Australia, Ministerial Youth Council, Department of Education and Children's Services Interagency Behaviour Management team and Innovative Community Actions Network. The day was a great success with many young people urging that progress is made with their strategies, and stating a keen enthusiasm for themselves to get out and do more in their schools and community.

members bringing in new experiences and new energy to the team. We look forward to another busy 12 months in the

> Michelle Northern Y@ worker



#### East/west Y@ making a difference

The t-shirts will have the Y@ symbol printed on the back and will be in different colours so the Y@ members can be recognised at all health promotion events we support. Make sure to look out for us at events, strutting around in our funky Y@ t-shirts.

Talking of events, the Y@ participated in health promotion activities during Schoolies Week. Safety and respect was the theme, so community health workers, nurses and Y@ members attended the schoolies events speaking to young people about safety and respect and distributed free condoms.

We also checked out the Feast activities during November 2004, which is Adelaide's gay, lesbian, bisexual, transexual, queer and intersex cultural festival.

The Y@ organised and ran a health promotion event called Stall in the mall for Youth Week. The event promoted healthy and respectful relationships and was well attended by young people.

Y@ members are in the process of obtaining official Y@ t-shirts. For the second year in a row, and hoping to make it a third next year, we also attended a health promotion stall at the 2005 Big Day Out! Feedback from Y@ members said it was an awesome experience! And why wouldn't it be when you get to have a stall that has a novelty sperm throwing (basketball) game, featuring a condom hoop! Better explain for those who don't know, the game involves throwing novelty plush sperm shaped pillows into a giant condom. It's educational and fun!!! (And the idea for the game came purely from Y@ members).

> The next event the east/west Y@ supported was Multicultural Week, which was held behind the Festival Theatre near the

The Y@ members don't just do events, we have also requested to have the sexual health pamphlets more visually interesting (for us youth who love pretty colours) and obligingly SHine SA has done so. The new pamphlets can be seen at youth events, health promotion events and even on the SHine SA website!

#### A new Y@ worker for the east/west team

Since I became a Y@ members a year and a half ago we've done some fantastic work, we've had a lot of fun and I personally have enjoyed being out there and doing good for the community. We have suffered though because we have lost a lot of members due to other commitments, and we've had to work with four different Y@ workers. All of the workers were great but it was hard to get the job done when the leadership kept changing hands. I'm happy to announce that the east/west Y@ now has a new and permanent worker, which means we can now start the process of recruiting and training new Y@ members, and the future is looking bright.

I was invited to be involved in the process of selecting the new community health worker (with a youth focus) for SHine SA, to sit on the selection panel and represent the east/west Y@. I had no idea how huge the task was until I sat down to start. After setting aside the applications that didn't answer all of the apply for my own work. I learnt a lot about SHine SA, I learnt a essential minimum requirements, we were left with a huge pile of those that did. It took more than a day to read them and they were all fantastic. We got together to compare results, and we finished up with five people to interview.

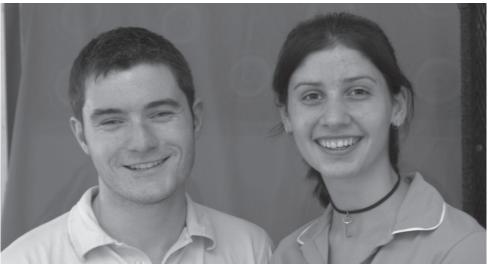
We spent a day interviewing the final five, after each interview everything's working out well. we had a discussion about what they'd said, what we saw as

their strong points and how they compared. At the end of the day one applicant was chosen.

It's a very stressful process, interviewing job applicants, possibly the most challenging thing I have ever done. A lot rides on the final outcome both for those who hope to get the job and for the organisation. It was obvious that a lot of time and effort went into preparing those applications, and I felt obligated to work just as hard to give them all the attention they deserved. I under estimated the stress, and the amount of work involved in the process but I also didn't realise how fantastic it was going to be. I am grateful I was offered the chance to be involved, I feel honoured to have been trusted with the responsibility and I know I did a good job. I learnt a lot from the experience too. After hours and hours of studying applications, seeing the process from the other side, I now feel a lot more confident in my own ability to lot about myself, and I have gained a new appreciation for the qualities that make a good community health worker.

Congratulations to Rob Gerrie on getting the job. He has officially taken over the role of Y@ worker for the east/west team and

East/West Y@



George and Amy, MCs at the Youth Celebrations

## Young people under 19 years



#### Supporting students to explore a future in the arts

The 1:1 project is a partnership project between SHine SA and Carclew Youth Arts Centre funded by Innovative Community Actions Network (ICAN). The project follows on from the **Makin** it peachey program, but with a specific focus to work more intensively with the students to identify learning paths and support individual needs. The students involved in Makin it peachey program were invited to attend interviews with Carclew's Youth Programs Manager, an arts worker and a SHine SA community health worker. The interviews were to discuss the student's

future involvement in the 1:1 project by identifying their individual needs and supports. Some students chose not to be further involved but eight wanted to continue.

In term two the eight students had opportunities to attend group workshops, classes at AUSDance, industry places including ACArts, Actors Ink, Lowdown and Rip it Up to pursue possible career and study paths. These activities were supported by the arts worker and community health worker. Term two also included a public performance at the Playford Civic Centre as part of SHine SA's Youth Forum and a full day workshop at The Odeon Theatre with professional dancers coming in to work



Peachy Belt kids show their style.

Term three will further support the students individual needs with more industry visits and personal and professional development workshops. So far the project has been a great experience for both the students and workers with many students demonstrating great potential in the Arts.

At the end of Term 3 the students will have a celebration of the project and their experiences.

This has been a great experience to work with and support young people to fufil their full potential in school, community

#### Doin' the Peachey walk!

Northern Area Youth and Community Services (NACYS) and faces around the neighbourhood with a wave and a smile. Swallowcliffe Primary Schools, organised a **Peachey walk** for students and their parents of Swallowcliffe Primary Schools. The objective was for the students and parents to know what services are available in the area and how to access them.

Starting at the school with a healthy breakfast, the students, their parents and teachers, then walked to NACYS to take part in activities and find out what services they offer. Leaving NACYS they walked to Playford Community Health Centre and enjoyed morning tea and took part in more learning activities. The group finished up by walking to SHine SA for a BBQ lunch under the pavilion, including healthy eating alternatives such as soy burgers and soy nuggets.

Students had been provided with a calico bag to put goodies in from each service that they went to and enjoyed collecting activities, fruit, information, stickers, bookmarks and lollipops from each service. Parents also received a bag and each agency provided relevant adult information to inform parents of the services available and how to access them.

Rob and Michelle kept the young people entertained with badge making and games, while Robyn spoke to parents about the services we provide for them.

SHine SA in conjunction with Playford Community Health Centre, It was a great success and the young people now recognise our



SHine SA display - part of **DECS on Show** at Marion

#### Just chillin'with multicultural young women

Eight young women from a range of cultural backgrounds from the young women included that they: (Iraq, Turkey and Russia) attended a six week Just chillin' self development program with team members from the east/west and southern regions. The program has been run with other SHine SA clients previously in all three primary health care regions.

The content of this program was tailored to suit the needs of young women from culturally diverse backgrounds. Although there are many similar issues between Australian born young women and the young women from culturally diverse backgrounds there are also several differences.

At the beginning of the program the young women were taken through a goal setting activity and asked to record personal goals and dreams that they wanted to achieve by the end of the program. All of them reported achieving most if not all of their goals.

Throughout the six weeks, the participants had the opportunity to discuss issues relevant to them including friendships, relationships, stress, anger and coming to a new country as a young woman. A craft activity each week, for the second half of each session, enabled those conversations to continue and friendships to develop in a relaxed setting.

At the end of the program the evaluation feedback that came

- were healthier and more confident
- were at ease with expressing themselves and sharing their
- had increased their life skills
- had developed new friendships
- had decreased their isolation by increasing their confidence to participate in other programs that agencies run
- were given an opportunity to talk about being newly
- were given an opportunity to discuss their values and beliefs and what occurs in their different cultures.

The workers have been encouraged to run similar programs for other young women from culturally diverse backgrounds. They also learned about the different cultural practices of the young women who participated in the program and had some media/literature portrayals of their culture clarified. The young women shared their experiences of day-to-day living which was both interesting and enlightening.

The final group meeting was held at a belly dancing school. The young women showed a lot of skill and natural ability, (the workers did their best to find natural ability) and everyone had

Cherice

#### Why we work with this community ...

State and federal government policies identify sexual health as significant 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

#### Young people 19 years and under portfolio

With membership from each of the primary health care teams and professional education and resources team, the portfolio group each year disseminates information to all government and non government schools in South Australia, outlining SHine SA services, information and resources that maybe of value to teachers and students. This was carried out in February of this year, reaching approx 280 high schools.

Late 2004 saw the portfolio group focus on the review of the young people 19 years and under policy, and the development of the Strategic directions 2005 – 2008. The portfolio group consulted with the youth advisory teams and key stakeholders to develop the strategic directions. The portfolio group also continues to develop the work around gender, power and identify and develop resources for young people.

An important area of work in the forthcoming year is the development of an evaluation tool to evaluate SHine SA services to young people. This has been instigated by the youth advisory teams and the portfolio and Y@ members will work together to develop and implement the evaluations.

#### Training to just chill in the north

This year after a very successful year of **Just chillin'** in the nort, the facilitators decided to offer peer education training to young women who had participated in the six week **Just chillin'** program. Five previous participants were selected, based on their demonstrated leadership skills, and invited to participate in a peer education program and two days of training. The training program covered:

- roles and responsiblities of peer educators
- communication skills
- group dynamics
- dealing with conflict and personal safety.

The aim of the two days was to introduce the young women to peer education and provide them with some practical information and support for being a peer educator. After the two days, all five participants were keen to continue on as a peer educator, despite saying they felt challenged by the training.

The peer educators have since designed and delivered Just **chillin'** school holiday workshops and supported young women who have attended the program. We have been successful in gaining some financial support from the City of Playford to ensure the peer educators can be involved in community events to promote information, services and support for young women and we are pursuing new grants to support the peer educators in developing a new resource for young women in the north.

For more information about the **Just chillin'** program for young women or about the Just chillin' peer educators, please contact SHine SA northern team on 8252 7955.



**Just chillin** peer educators take time out

#### **Cavan Training Centre**

to support young men in secure care at Cavan Training Centre with sexual health and relationships programs.

Young men are often at high risk in the community, including deaths related to motor vehicles, incarceration, drug and alcohol related problems, resulting in some young men engaging in high risk behaviour/activities, including those that put their physical and sexual health at risk.

It was identified that young men in detention have limited access to sexual health and relationships information and this is the underpinning reason for our program. Our aim is to improve the sexual health for young men in detention and to increase the young men's knowledge of sexual health, sexuality and relationships.

A six session **Relationships and sexual health program** was presented to young men in detention during February and March 2005. Young men are identified by the Cavan workers to attend the group and are then invited to participate. It is a closed group and young men were expected to attend all six sessions if they chose to participate. The sessions were an hour and a half long with two sessions delivered a week.

As part of our services for young people in the north, we continue 
The programs have included:

- sexual health and personal hygiene
- sexual reproduction and human sexual response
- sex rules, responsibility and the law
- sexual coercion and rape
- gender issues and stereotypes
- sexually transmitted infections
- contraception, pregnancy and pregnancy options.

The young men were presented with certificates for their participation and their involvement was proudly incorporated into their personal development records.

This program has been successfully delivered at Cavan Training Centre for the past five years and continues to develop and improve with young men keen to be involved in future programs. A further program is planned for September 2005.

Both SHine SA's northern team and Cavan Training Centre are committed to ensuring young men in detention receive information and education to improve their sexual health and

Michelle





#### Another great year of chillin in the north! The school holiday workshops discussed how to make and

**Just chillin** has been running in the north for the last three years. It is a group for young women in the north that provides an opportunity to meet with other young women and discuss issues that are important to their lives. Issues discussed include relationships, feeling good about ourselves, dealing with conflict, managing stress, and getting to know people. It also gives young women an opportunity to connect with two youth services in the north, The Second Story and SHine SA.

In 2004 we continued to offer school holiday workshops for young women which gave them something to do and introduced them to programs and services. Once participants have completed the school holiday program they have been keen to be involved in the six week program.

(self esteem). The workshops are very interactive with many participants making friends and finding support networks while talking about important issues and making funky crafts. The six week program held at The Second Story included a

sustain friendships, and how to feel good about ourselves

constable from South Australia Police Community Programs Unit attending a session and talking to the young women about personal rights and personal safety. Another session included making face scrubs and face masks, some personal pampering and baking some yummy biscuits. All of the young women said they enjoyed the program and most of all enjoyed making new friends.

Michelle



#### Supporting school communities

Working with school communities to support the delivery of relationships and sexual health programs continues to be a focus for workers at SHine SA.

The nature of our work includes:

- general information sessions about SHine SA services
- working collaboratively with staff to plan and implement programs
- supporting staff in the writing of programs and working with parents to increase understanding and awareness of sexuality issues for young people.

We work with both mainstream and special needs students. Primary school sessions have included participation in health expos program development and support in program delivery, while secondary school involvement has included sessions centring around contraception and sexually transmitted infections, puberty, safer sex, gender issues, friendships, and relationships. Health expos have also featured in secondary schools and have proven to be an excellent way in supporting a partnership approach to

Evidenced based research into best practice continues to inform the work that we do. In this way the capacity of teachers increases and the delivery of good relationships and sexual health education within school settings is more sustainable.



Students at share Student Health and Wellbeing Day

#### It's just peachey for some students

**Making it peachey** program. Carclew Youth Arts Centre in conjunction with a range of services and departments including City of Playford, Social Inclusion Initiative, Arts SA, Department of Education & Children's Services, Northern Area Community and Youth Services and SHine SA, have been working with a group of students from Fremont Elizabeth High School and Smithfield Plains High School to support their involvement in school and the Arts. The project was held at the McVeighty Centre on Peachey Road, Davoren Park and gave the students a space and opportunity to learn dance and music. Some of the students already had a keen interest in hip hop, break dance, rap and beat boxing.

The group met twice a week with students getting a chance to learn dance moves from professional dancers. Other students who were not as keen to participate in the dance, were given opportunities to record songs and design and develop materials

SHine SA has been supporting a new initiative in the north, the for the project including some graffiti work and a mini booklet highlighting the project and student's experiences.

> The aim of the community workers involvement was to support young people's involvement in the project and to link with appropriate youth services in and around the Peachey belt.

> The project culminated in a dance performance at the Playford Civic Centre as part of the Come Out Festival 2005. The performance included a DVD of the workshops and interviews with the students and a vocal performance by some of the students and a dance. The performance was attended by many young people, adults and service providers including the Mayor

> It was a great experience to be involved in the project and to have an opportunity to use arts as a medium for supporting young people and their health.

> > Michelle



Panel of community members at **Y@s speaking to youth forum** 

#### Supporting teenage parents in the north

During 2003 a range of youth related agencies from the north got together and formed the Northern Regional Youth Services Planning Committee. After many meetings a northern region youth services plan for the health of young people was developed and with this a number of key areas were identified. Sexual health was one of the key areas and a working group was formed to action some of the key issues identified.

As SHine SA is the key sexual health agency in the north we took on a co-convenor role of the sexual health working group with The Second Story.

During the last year the working group has focused on teenage pregnancy. After much debate from within the group, we decided to work on two projects. One of these was the development of a pamphlet for workers which shows the range of support programs available in the north for young women who are pregnant or parenting. Considering there are lots of programs offered within the area it became clear that it would be good to have a 'list' available which would then make it easier for workers to refer clients to suitable and appropriate programs and services, that is, who offers what, where and when! Also many programs north are more aware of the issues that young women who are and services were either short term or had certain criteria that pregnant or parenting face in their daily lives.

had to be met and often workers were unaware of this. Another working group will be responsible for the updating of the pamphlet and making sure information is current.

In May the working group ran a forum for workers Today's Teenage Pregnancies-Perspectives Unleashed. It drew an audience of 48 workers and interested people from across

The forum covered the areas:

- teenage pregnancy the reality of pregnancy and
- pregnancy and school retention why retention is so important
- pregnancy and education- what's available
- teenage mothers the reality young mothers stories.

Speakers included young parents involved in the northern Talking Realities program and workers from SHine SA, Lyell McEwin Birthing Unit and Para West Adult Campus.

As a result of the forum we are hopeful that workers from the

#### Karoonda students organise school program

In June four students from Karoonda Area School emailed the SHine SA Sexual Healthline asking for some information or a guest speaker to talk on contraception and sexually transmitted infections. As a result the southern team contacted them.

The students were put in charge of organising the whole program once it was decided that two SHine SA workers would visit Karoonda for two days. Over the two days a workshop was held for year 8 and 9 students, another one for the year 10 students and an evening session was held for parents and teachers. Topics varied depending on the session but some of them included how could Karoonda students/community members access sexual health services, relationships, contraception and sexually transmitted infections. A southern nurse and the **share** regional coordinator attended.

It was a very rewarding two days as SHine SA workers linked



Cheryl and Sue

in with several community groups including parents, teachers, nurses and the young people in the area. The students did an excellent job organising accommodation, a venue, consent forms and a timetable for the two days. It was great to have students taking the initiative to set up such programs that benefit the whole community.

Cheryl

## Young people under 19 years





Whyalla young mums who contributed to the **HYPE** project.

#### The HYPE about young parents in education

The HYPE (Healthy Young Parents in Education) **project** is approaching completion in September 2005.

The project's goal was to improve the educational, social and physical wellbeing outcomes for teenage mothers and their infants. The project has focused on four key areas:

- research
- resource development
- agency collaboration, each with it's own separate

We know through research and statistics that young women have babies and drop out of school. This leads to serious disadvantage in terms of further education, future employment options and training opportunities. They are unlikely to return to high school because it's 'too difficult'. This has an increased disadvantage for their child/children. This project aims to support young pregnant and parenting teenagers to remain engaged in education by providing the tools, through various forms, that offer a framework to secure these young women's right to an education.

There are individual teachers and schools that are currently providing flexible curriculum and a supportive school environment that allows these young women to remain at school. They are doing this without a State policy that provides guiding principles and a positive profile for this group of students. Every young person has a right to receive an education up to and including the end of year 12 if they desire.

The **HYPE project** is achieving it's aim to support young pregnant and parenting teenagers to remain engaged in education by developing a package comprising the following: · a journal for young pregnant and parenting teenagers that

provides information, during the pregnancy and the first

issues and all other social services needs

- a website for workers that provides links to all relevant services mandated to support young people
- a draft pregnant and parenting policy
- a document that describes flexible curriculum options for pregnant and parenting teenagers so that they may remain engaged in education
- a model for community-based agencies to work collaboratively to support schools to better support young pregnant and parenting teenagers to remain engaged in education
- a research report and literature review, containing key findings from consultations with young pregnant and parenting women in education, and staff from four different high schools who provide specific programs for the target
- a training and development workshop package for schools, with strategies for working with both students and
- a final report of the entire **HYPE project.**

SSABSA accreditation for the **HYPE** journal is being sought so that it can be used in schools within the CommunityStudies curriculum. A teacher could utilise it with an individual student or as a whole class activity in many different ways. We will develop the accompanying documentation required to direct teachers regarding multiple usage. This is an exciting outcome of the projec. Based on the commitment and orders that we are already receiving from schools in the northern region of Adelaide, we know that it will be put to good use.

We look forward to presenting the HYPE journal for young pregnant and parenting teenagers, the website for workers and the final package later in the year.

Gerri



SHine SA promotes the right of young mums to continue their education.



Kaisu presents certificiates to the **RESPECT** peer educators at the **Youth Celebration** 

#### Young men learn to speak out with RESPECT

In December 2004, SHine SA completed the **RESPECT getting it together... project**, based in Adelaide's northern metropolitan region. The key project aim was to assist in reducing the incidence of sexual-based violence and promotion of healthy relationships for young men aged 16 to 25 years living in the north. Youth participation, peer education and research provided the process and content framework for this project.

Fifteen young men successfully completed training as peer educators and peer researchers. Topics covered included gender, power and sexual entitlement, relationships and sexual and reproductive health, peer education, group facilitation and peer research.

The prevention program was delivered to young men at one high school and in one secure care facility. Components of the **RESPECT** program were incorporated into an existing regional violence and abuse program specifically aimed at young men.

Thirty five young men aged 16 to 20 participated in the **RESPECT** program with six peer educators, a community health worker and project officer supporting program delivery.

Issues examined included sexual offences and the law, challenging sexual harassment, coercion, sexual assault and rape. It also explored coercion, sexual assault and rape, gender and power in intimate partner relationships, challenged dominant myths that support sexual assault and rape, promoted healthy relationships and the right to safety, choice, freedom

The **RESPECT** project included the development of a booklet. Four peer educators assisted in developing the booklet which supports the promotion of healthy relationships. The booklet

uses a narrative approach incorporating cartoon 'icon' characters which encourages healthy and respectful relationships. It is due for release towards the end of 2005.

Throughout the project there was periodic and ongoing evaluation covering all of the components. The evaluation found that with appropriate training and support, young people can actively share positive health and wellbeing information, support their peers and contribute to and make a postive difference in their respective communities. The self-esteem, self-worth and respect of and for young people can be improved by participation and involvement in projects and activities connected with their local communities. Personal, family and community relationships of young people can also be improved through participation in respectful and positive community-based programs.

The evaluation also found that the young men who participated in the community education prevention program enjoyed the inclusion of peer educators in the program. The majority of young men participating in the program indicated that violence and abuse towards women, children and other young men was wrong. The participants indicated that more young men would benefit from participating in the **RESPECT** program with ongoing peer education community prevention programs to motivate and challenge individuals and communities to address the issue of sexual-based violence and abuse of young people.

The evaluation also recommended:

- the development of a complimentary prevention program for young women
- further comprehensive research on the issue of gender, power and expectations of sexual entitlement.

Rob



**RESPECT** peer educators enjoying the **Youth Celebration** 

#### Would you like to become a Youth Advisory Team member?

We're looking for young people who

- are interested in sexuality and sexual health want to see services for young people improve
- can express an opinion

can be organised, creative and punctual. The Youth Advisory Teams (Y@s) are a mixed group of young people aged between 15 and 25 years who meet once a month and

are sometimes involved in public events. They also get paid to attend meetings. To date the Y@s have run stalls, been trained, spoken with young people in Sexual Health Awareness Week, Youth Week and Big Day

Out. The Y@s have also advised SHine SA about clinic waiting areas, pamphlets, strategic directions and team planning.

If you are interested please contact SHine SA on 8431 5177 or info@shinesa.org.au. There are three Y@s, one for each region in the south, north and east/west.





Teacher training with Jane and Helen

#### share program

The sexual health and relationships education project (known as The aims of the day were: **share**) continued to be implemented in fifteen state secondary schools across South Australia. As in 2003 the main elements of the project were fifteen hours of lessons at years 8, 9 and 10, fifteens hours of teacher training and establishing a committee called the Student Health and Wellbeing Team whose role is to implement actions to support healthy relationships and sexual health in the broad school environment.

During 2004, 61 **share** teachers were trained, compared to the 200 teachers trained in 2003. Many of these teachers continued in their schools teaching the program again in 2004, but for most schools there was some staff turnover meaning a few staff that had been trained left the school and new staff were appointed. In many schools the number of staff requiring training was small, but in one school there was a significant staff turnover.

Effective learning methodologies were explored through the topics of the program by teachers participating in and experiencing many of the classroom activities and gaining relevant knowledge as it related to the topics. Effective methodology in teaching relationships and sexual health education is often different to that used generally by teachers in other learning areas and it is not always a style they initially feel comfortable with. Ideally teachers selected to teach the **share** program expressed an interest in doing so and training can further improve their confidence and comfort.

Feedback gathered from the teachers showed that participants this year had much less experience than many of those who attended the training in 2003. Only three teachers indicated extensive and recent experience in teaching relationships and sexual health to year 8, 9 or 10 students. Half had little or no experience, with most of the rest having either limited experience or the experience they have was quite a while ago.

Generally 50% of the teachers reported that they were confident or very confident to teach in this area before the training, while 88% were confident or very confident after the training. Two components of the **share** program that were new to many experienced teachers were the sections on gender/power and sexual diversity. Although there had been a significant focus in the training, teachers still felt less confident in comparison to the topics such as puberty or relationships because they do not think that students will take the material seriously. Nevertheless teachers do believe these areas are important and are prepared to have a go and believe that they will get better with experience.

This feedback shows how important it is that teachers receive specialist training and support to teach in the area of relationships and sexual health.

#### Student health and wellbeing day

On 16 September 2004 the **share** team organised a special forum at the Education Development Centre for the student representatives on the student health and wellbeing teams. Approximately three students and one teacher from each school attended the day.

- to share with each other the positive things that are happening in the **share** schools and to celebrate these
- to listen to the student voice so as to hear what the issues are in the area of relationships and sexual health for young
- to increase the awareness and understanding of young people as to what are relationships and sexual health issues in the school environment as identified through research and personal experience
- to make a start or continue planning for action in their

- a youth focus was created both in participation and
- schools talked about what they were doing
- evidence based information was presented to highlight
- a panel of young people presented their experiences of school
- activities and discussions stimulated thinking and ideas.

The schools then developed areas for action. Some ideas were to set up a health room at the school with information on different subjects and places to go for help, to invite speakers such as young mothers to come and talk about their experiences, to have posters reflecting sexual diversity, to survey students about their health needs, to have condom vending machine in the school, to hold a health expo, to install a screen saver on all school computers that advertises various local health services and websites, to have a medical service at the school, to develop and promote a process where complaints about sexual harassment are taken seriously and followed up, for example name calling; and to develop an online counselling site that students can access.

The day was very useful and well received as seen in the following comments:

- 'the whole day was wonderful. It was great that all schools combined together and different thoughts and discussions were given. It was educational as well as fun! Thanks'
- 'loved the day. Well organized Loved the panels out the front it was very good. Good mix of kids. Well done'
- 'Well Done. An excellent interactive day'
- 'The day was great, it opened my eyes as to what goes on in
- '---now we are aware of ways to make students aware of problems facing today's youth'
- 'I enjoyed the day and learned a lot. Would like to come back again and see what has been done'.

#### Student feedback on **share** lessons

Students were again provided with feedback sheets that they completed at the end of the 15 lessons. The overall number of students completing this feedback was 1,540. This is almost

from nine schools completed surveys. It was also pleasing that in 2004 surveys were returned from all schools.

The breakdown of the number of students in each year level who completed the surveys was:

Year 10	:	443
Year 9:		552
Year 8:		545

Of these students 656 were female, 656 were male with 231 not answering this question.

#### Rating of the share program

Students were asked to rate aspects of the **share** program using a rating from 1 (poor) to 5 (excellent). The majority of students found the **share** program to be either good or excellent (79%) with a smaller number reporting that the program was satisfactory. This compares to the 76.4% of students who rated the course as good or excellent in 2003. It is pleasing to see that the number who rated the course as poor dropped from 6% in 2003 to 0.05% in 2004.

The stability of this figure suggests that not only is the curriculum relevant and interesting, but also being delivered in a way that students generally enjoy and feel comfortable with. The

double the 847 surveys returned in 2003 where 16% of students high rating for a safe and supportive class environment is a particularly positive outcome and reflects the emphasis given to this in teacher training and the teachers' abilities to successfully

> Again the issue of "relevance to life" drew mixed responses. Overall 61% rated the relevance of the course as good or excellent and there was no difference between males and females. It was pleasing to see that all year levels rated the relevance quite highly, with only .079% rating it as poor.

The **share** project is now in its third and final year and the formal evaluation being undertaken by La Trobe University will be completed in 2006. However already the feedback being gathered by SHine SA from teachers, parents and students shows that the program is well accepted and making a difference in terms of providing relevant and useful information.

The publicity generated around the **share** project has also highlighted the importance of a more systematic approach to relationships and sexual health education in schools generally. This has led to more requests for teacher training and resources from schools not involved in the **share** project. (See other reports on teacher training and SHine SA's work with schools).

Sally



Participants at the **share** students health and wellbeing day

#### Safety in our schools: responding to homophobia

In May 2004 SHine SA hosted a full day workshop entitled To achieve these aims the following activities took place on **Safety in our schools: responding to homophobia**. at school and schools being safer places. Staff from the Australian Research Centre in Sex, Health and Society at La Trobe University have run this workshop throughout Victoria and agreed to run a workshop in Adelaide for teachers. The day was attended by over 40 teachers and feedback was positive. With permission from La Trobe, SHine SA has since advertised to schools throughout the state our willingness to A very important final exercise was to reflect on the day with the conduct similar workshops.

> Late in 2004 Wirreanda High School, one of the **share** schools, invited us to facilitate a full day training for their whole staff on responding to homophobia. The program was held on 24 March 2005 and 67 staff members participated.

> The day started with a brief introduction outlining the aims of the program. We acknowledged for many that homosexuality and homophobia is a difficult topic and that the day would challenge some personal beliefs and attitudes. We were clear however that the day was about making schools safer places for same-sex attracted young people (and teachers) and that it is a teacher's responsibility to work to make schools safe places for all students.

> This was followed by a presentation of the most recent research data about same-sex attracted youth from Writing themselves in: a national report on the sexuality, health and wellbeing of same sex attracted young people Hillier, Dempsey, Harrison, Matthews and Rosenthal (1998). The report explored same-sex attracted youth's experiences of schooling, sense of wellbeing, harassment and discrimination, use of drugs, sexual behaviour, coming out, confidence in talking to others and suicidal thoughts and behaviour. The data presents a very disturbing picture and one that clearly indicates that schools are not safe places for many same-sex attracted young people.

> We then engaged the participants and several activities. The activities aimed to increase understanding of homophobia and discrimination that is often directed towards same-sex attracted people. We also explored the scale of attitudes held by many people and considered the barriers to positively shifting those

By far the most powerful response to the day, from the feedback forms completed by teachers, was to the panel of three young people who were prepared to share their experiences of schooling, people's reactions to them coming out and some very personal and valuable advice for schools on how they can

make a difference to young people dealing with sexual diversity

The three young speakers were recruited through The Second Story's Inside Out and Out LBW projects. SHine SA has a strong partnership with The Second Story, a youth health service of the Department of Health.

view to determining action and priorities for the future.

Participants were all asked to complete an evaluation form. Of the initial 67 participants we had 49 evaluations forms returned. For most sessions, on a scale of very useful, useful and not useful, over half indicated that the session was very useful, 39 of the 49 thought the panel of young people was useful.

Some comments in relation to action the school should take

- greater unity amongst staff to challenge harassment and discriminatory behaviour/language
- having a stronger harassment policy with all staff supporting the harassment and bullying policies
- training teachers to deal with issues
- providing safe spaces and mental and physical wellbeing for all as a priority.

Some of the general comments were:

- Good pace and variety of tasks, excellent discussion.
- Important stuff. . . it strengthens me to keep challenging the homophobic language in my classroom and to not stand for harassment.
- I felt a great sense of relief that staff had a forum where it was discussed openly, really good - should do more.
- One of the best [training and development] days ever. It actually relates to the students, shows that raising the issue and education is crucial.

A couple of comments regarding the young people's panel

- Excellent presentation, brave, wonderful confident and articulate young people.
- Good to hear young peoples experiences and ask
- Great to see the perspective of people who have experienced what we are talking about, best part of the day.

Jane

## Aboriginal and

#### Creating opportunities for young people



Hello my name is Derek. I am an Indigenous man from South Australia. Since January this year I have been doing a youth support traineeship with SHine SA. For the last seven months I have been working with a group of young traditional men from the northern Indigenous communities of South Australia.

Some of the issues we have talked about include:

- family violence
- sexual health and repecting traditions and customs
- drugs and alcohol
- looking after general wellbeing.

The young men involved in this project all come from different communities. They are known as the Wiltja mob. We also entered a local basketball competition reaching the grand final, just falling short by a couple of points. Not bad considering that some of these young men have never played a game of basketball before. So well done fellas. Hope to be working with them again in the future.

**Derek** 

#### Working with Indigenous young men to become leaders in their communities

The aim of the Wiljta youth participation and peer education pregnancies. project is to develop personal skills, knowledge and confidence of young Indigenous people attending the Wiljta Residential Program from remote communities in South Australia and the Northern Territory. The project is a SHine SA initiative that will run for 12 months throughout 2005.

The project will build self-esteem through participation, while developing leadership and peer education skills, knowledge of positive and respectful relationships and sexual health and wellbeing. Included in the program will be the development of health promotion resources appropriate for their peers.

Parents in remote Indigenous communities of South Australia and the Northern Territory who are committed to the education of their young people, often make the decision to send their students to secondary school in Adelaide. The students attend years 8 to 12 at Woodville High School and are supported by teaching staff from within a specialist Aboriginal education unit, incorporated in the school.

Throughout their time in Adelaide the young people are supported by the Wiljta Residential Program staff in all other aspects of their education, recreation and cultural transition, including being seperated from their families and communities during school term time.

These young people, the Wiljta Tji Tji Tjuta (home for many young people), are recognised by their communities as future leaders. Parents acknowledge that education is the key to the future.

While the project strategies focus on the development of leadership skills in young Aboriginal people at Wilita, woven into the project is a strong focus on health, wellbeing and safety, particularly sexual health and self-esteem. The project aims to improve relationships, sexual health, mental health and wellbeing and reduce the incidence of interpersonal violence, sexually transmitted infections and early teenage

The project follows the traditional Indigenous model of sharing the information with the young people in a culturally sensitive way. This means that the health messages are shared in single sex groups with a facilitator of the same gender.

In terms one and two, Indigenous male students from years 10, 11 and 12 participated in comprehensive peer education training and a community health and wellbeing program. The program has outlined to the young men the process of sharing relationship and sexual health information with their peers. The young men have explored many issues including safety, respect, communication, adolescent growth and development, violence and abuse, impact of drug and alcohol abuse on family and personal relationships and infections and contraception. For each topic the young men were encouraged to consider the impact of unhealthy choices upon themselves, their family and their community.

When the senior students felt confident, they delivered the same health and wellbeing information, with support from the Wiljta Project Officer, the Indigenous Trainee Youth Worker and Woodville High School Wiljta Unit teacher, to the male students in years 8 and 9. The senior students used a series of activities, games and videos to share the information with the younger students. This proved an effective and fun way to learn.

In the second semester, beginning term three the project will move into a new phase that will include the development of a resource to support the learning gained from participation in the Wiljta project. It is hoped the resource will be shared with the young men at school, at the Wiljta Residence and at home in their respective communities.

Rob

Rob and Derek with the young men from Wiltja





The health status of the Australian Aboriginal and Torres Strait Islander communities continues to rate worse than non-Aboriginal people on every indicator: infant and maternal mortality, and life expectancy. Sexual 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

#### **Aboriginal and Torres Strait Islander** portfolio

The **Aboriginal and Torres Strait Islander portfolio group** currently includes the Coordinator of Women's Aboriginal and Torres Strait Islander Sexual Health Course, the Coordinator of Investing in Aboriginal Youth, as well as a representative from each of the primary health care teams, usually the worker who holds the Aboriginal and Torres Strait Islander portfolio for that team. The group meets about 4 times per year. An important aspect of these meetings is the peer support and sharing information about the 'big picture' work that is being done, which is taken back to each team.

Each Primary Health Care Team works slightly differently with Aboriginal and Torres Strait Islanders in its region, depending on the networks and expressed needs of the communities, however all teams work with Aboriginal and Torres Strait Islander communities and other agencies on joint projects eg. the celebration of NAIDOC week.

Over the past 12 months clinical services have been offered at a range of venues for Aboriginal and Torres Strait Islander people. These include Port Adelaide, Murray Bridge and Ceduna. The Sexual Health Course for Aboriginal workers has been offered to groups of women and men. The **Investing in Aboriginal Youth** peer education program has been successful in reaching many young people.

The portfolio group had discussed an Aboriginal and Torres Strait Islander celebration day at SHine SA, but this did not occur largely due to primary health care teams being involved in celebrations at a regional level. Staff development for SHine SA workers has taken longer than planned, but the group is still working towards organising this.

Meetings were held early this calendar year to start some research and give input into the next Strategic Directions for our organisation. These meetings were very enthusiastic and positive and we all look forward to launching into the SHine SA's Strategic directions 2005-2008.

#### Young Indigenous men explore healthy relationships

Para West Adult Campus is an innovative educational facility In 2005 the campus requested SHine SA to develop a culturally located in the northern Adelaide metropolitan region. The appropriate **Healthy relationships program** to include campus is an adult facility for people who wish to re-enter as part of the Indigenous Sports Program. The program was the education system. One of the exciting programs on offer run with young men from a diverse range of communities is the Indigenous Sports Program. This program is available to and cultural backgrounds, including central Australia and the Indigenous young men and women who have a desire to create Northern Territory. learning and employment opportunities for themselves.

The young people attending the program come from a range of communities, including local, rural, remote and interstate. Football and basketball are the main drawcard sports on offer, but a range of other sports are also available. SHine SA has developed strong working relationship with the Para West Adult Campus and conduct many programs and health promotion activities on a frequent basis.

After consultation with the young men, a range of relationship and sexual health issues were explored which incorporated both traditional and non-traditional needs. The young men participating in the program indicated they appreciated the way the information was shared and that the infomation was important to their health and wellbeing.

Rob



Wiltja mob at the **Youth Celebration** 

#### Taking care of women's business in Ceduna

The **Ceduna women's business program** continues This year has seen some staffing changes to the clinic as one local medical centre has a female GP visiting regularly and this Aboriginal Health Service. provides women with a range of medical options.

by Ceduna/Koonibba Aboriginal Health Service with women's health services being provided four times a year. Harriet, screening rates in Australia. Aboriginal Health Worker, is responsible for the organisation of each visit including advertising and promotion of the clinic and the statistical follow up. The demand for services remains strong with between 100 to 120 women seen at each quarterly

into its fourteenth year. It is well utilised by the women of the of the doctors has taken leave. The new doctors have been Ceduna community and increasingly by Aboriginal women. The well accepted by the community and staff at Ceduna Koonibba

Funding for the program continues to be provided by the The program is provided by SHine SA staff and is co-ordinated Aboriginal Cervix Screening program. The Aboriginal women in the Ceduna region continue to have one of the highest cervical

Robyn



## Torres Strait Islander peoples



The Wiltja mob after their mural presentation enjoying the **Youth Celebration** 

#### Wiltja health and art project

During third and fourth term of 2004, students of the Wiltja Residential Program completed a painting commissioned by SHine SA as part of a partnership between the two agencies. The triptych painting depicts traditional and contemporary indigenous themes and topics.

Each panel was divided into three sections, with the top section being completed by the boys, the bottom section by the girls, and the boys and girls working together to complete the centre section of the text and portraits.

In this piece the young artists examine the past, present and future. The past is represented by the boys' and girls' artwork on the top and bottom sections, showing dreaming stories, which have been part of their ancestral culture for thousands of years. The dreaming stories are about activities, which are still carried out today, such as the gathering of bush tucker, ceremonial dance and story telling.

The portraits in the middle represent Anangu youth and the country to which they belong. The portraits were executed with the assistance of modern computer technology, giving students opportunities to learn new skills. The text along the centre is encouraging and positive explaining: don't be afraid (panel 1), choose for the future (panel 2) and keep on learning (panel 3).

The painting can be seen on pages 16 and 17.



Frances with students from Maree

#### Investing in the future through involving Indigenous youth

travelling around the State, and I also went interstate to Dubbo in New South Wales. Dr Christine Read from FPA Health (Family Planning in NSW) visited SHine SA early last year and was very impressed with all the training SHine SA offers for workers. They were very interested in the **Investing in Aboriginal &** 

**Torres Strait Islander youth** course and after negotiations between SHine SA and FPA Health they paid for me to go over there for a week and run the training.

I ran the Investing in **Aboriginal & Torres Strait Islander youth** course in Dubbo with eight Indigenous workers and two non-Indigenous workers who work for different organisations. It was deadly meeting people from a different community and working with them, also sharing of information and knowing we are all striving for the same goal. Hopefully the training will encourage the workers to feel more confident to access young people not currently in touch with their services.

**youth** course was also run in Adelaide in September 2004. Again we had a great group of workers who were interested

WOW, this last year has been really exciting. I have done a lot of in how to use peer education and youth participation. We also used a new video made at SHine SA of an interview with a young Indigenous man who had been involved in a peer education project at SHine SA. For the first time after the course, a basic sexual health training day was organised, which included guest speakers, and this also was found to be useful in planning peer education programs back in their communities.

> In March this year after many conversations with Ron Johnson the youth worker at Leigh Creek Health Service, I flew up to Leigh Creek to work in the school with years 7 to 12 classes. It was a great experience to work with Indigenous and non-Indigenous students and to consolidate the work being done in the school, not only on sexual health and relationships, but also on cultural

Henry Dalghetty, the sexual health worker from Pika Wiya Health Service Port Augusta, met up with myself and Ron in Leigh Creek and worked alongside me for that week. We also went up to The **Investing in Aboriginal & Torres Strait Islander** Marree Area School for a day and worked with the years 10 to 12 Indigenous young people. This was a deadly day as you can

#### Working together for reconciliation in the south

Reconciliation Day is an opportunity for the whole community to celebrate the rich Indigenous culture in the south. As a nurse from the southern SHine SA team, I was involved with the planning and implementation of the **Southern Reconciliation Event**. This provided me the opportunity to work with workers from other organisations in the southern area.

Kesha, an Indigenous Program Manager Trainee from Southern Futures helped coordinate Reconciliation Day this year, together with the Reconciliation Working Party which included both Indigenous and non-Indigenous workers. Working with this event was a great learning curve for Kesha, helping her develop skills such as interpersonal skills, networking and event coordination.

Kesha found the support she received from the workers encouraged and helped her along the way.



Sue

#### Improving the sexual health of young Aboriginal women in urban areas

SHine SA's Community Health Nurse, Janet Kelly, has completed a Master of Nursing research project looking at what sexual health nurses need to know and do in order to meet the health needs of young Aboriginal women in urban areas.

Through conversations and reflective practice, the research found that although nurses (and other health workers) are guite skilled and knowledgeable in their sexual health practice, they are unsure how best to provide holistic care across cultures.

An action research process involved young Aboriginal women, Elder women and older Aboriginal health workers and SHine SA nurses who work with Aboriginal women. Focus groups discussed what sexual health nurses need to know and do, and what assists or prevents young Aboriginal women accessing sexual health services. An Aboriginal reference group and Aboriginal mentors oversaw the whole project.

The findings indicated that while nurses are clinically competent and capable, what is needed is a clear model of cultural care to shape and sustain the practice of individual nurses and their health organisations. Three specific aspects are:

- the importance of establishing and maintaining trustworthy working relationships between nurses, Aboriginal health workers and Elders
- the recognition that Aboriginal culture does exist and is important in urban areas
- that understanding urban women's health business requires gender considerations.

A partnership approach was recommended as a way of utilising the findings of this research into developing an appropriate cultural model of care. Further research is planned to progress this agenda, with Janet receiving a scholarship and commencing PhD studies this year.

Janet

#### Pampering and Pap smears

Pap Smear Awareness Week is held each year in May to remind women about the importance of having a Pap smear every two years. More than 90% of cancer of the cervix is preventable with regular Pap smears as they detect early changes of the cervix, which can then be treated.

The incidence of cancer of the cervix is higher in Indigenous women, older women, and women of low socio-economic status. Again this year an Aboriginal Health Worker from Southern Women's Community Centre applied for a small grant from Cervix Screening to conduct an activity and promotion for Nunga women in the Noarlunga area during Pap Smear Awareness Week.

A nurse from SHine SA's southern team and a worker from to organise a Pampering and information session at Neporendi. Around 15 Nunga women attended the day with younger and older women all enjoying the opportunity to have a foot spa, facial, and a fantastic healthy lunch prepared by Neporendi Bush Catering.

Sharon from Cervix Screening, Aboriginal Services Division provided valuable information and video on the importance of cervix screening. Karen from Breastscreen SA also provided valuable information about breast health and



screening with mammograms. There were lots of conversations and questions following this information. A SHine SA nurse was available for anyone who wanted to talk about accessing confidential clinical services and information

This day provided agencies, workers and community members the opportunity to work together raising the awareness and the importance of Pap smears and breast screening.

Sue



The Wiltja mob

## Culturally and linguistically



#### SHine SA's multicultural workers strengthen community partnership

with various community groups over the past year. These were sometimes initiated from requests by community workers and at other times by the SHine SA multicultural community worker.

We were invited by the Multicultural Youth SA to deliver a session to multicultural young girls on sexual and reproductive health issues. Newly arrived girls from African, Middle Eastern and Bosnian background communities participated in the session, which covered safer sex issues and what is sexual health. We had many guestions and the group was very enthusiastic.

We worked with the Chinese Overseas Association in providing information session about women's sexual health, including discussion on breast examination, pap smears and common sexually transmitted infections (STIs) for women. The participants thoroughly enjoyed the session and there was much interaction with lots of questions asked. The community worker from the Chinese Association organised a small gift voucher for the participants.

During **Sexual Health Awareness Week**, we supported welfare and health workers who worked with diverse communities to run specific sessions relevant to their communities. We worked with the Oromo community and Serbian community in providing them with information about SHine SA services and about sexual health check ups.

Another newly arrived community that we have worked with was from Sierra Leone. The session was organised in collaboration with the African Community Council. The guest speaker, an African doctor from the Parks Community Centre, and our SHine SA multicultural community worker spoke about safer sex issues, STIs and SHine SA services. The session involved about 30 participants, some very newly arrived, and they gained much knowledge on sexual health prevention, as well as learning about how the health system works in Australia.

We gave interesting sessions to multicultural Year 7 students from Pennington Primary School, where we discussed growing up and puberty issues. We also talked about reproductive

We have been busy running a number of sexual health programs health, friendships and relationships. The students watched age-appropriate videos and did a number of group activities. They thoroughly enjoyed the program and the students made many positive comments. They increased their knowledge and understanding of their bodies and issues surrounding

> We have worked in close collaboration with the English Language Services (ELS) in providing information to newly arrived migrants and refugees about SHine SA services and men and women's sexual and reproductive health issues. We had over 200 students attending these sessions. Information was provided in different languages to the students. Some students are now regularly accessing SHine SA's services, which they previously did not know were there.

> We have continued with our objective of working closely with youth workers and other workers by providing a two-day workshop on cross-cultural issues and sexuality. Some of the topics covered included settlement issues experienced by migrants and refugees and sexual health issues. We also presented panels of multicultural consumers, who talked about their experiences of settling in a new country, and workers, who talked about their knowledge of working with clients from culturally and linguistically diverse backgrounds. The feedback from participants was very positive. They had increased understanding of settlement experiences and they had a broader range of skills and knowledge of how to better implement their services to newly arrived communities in their work.

> In conducting these community-based sessions, we aim to share our vision to provide better and more informed services to culturally diverse communities so that they can feel more confident of accessing our services and other health related services available to them. Networking has also been a key priority in achieving this vision. We have built relationships with the Multicultural Youth Network and we continue to work closely and collaboratively with many agencies.

> > Jacqueline & Miguel



Participants of the **Keeping it together** project

#### A national suicide prevention project helps young people keep it together

Last year saw the commencement of the national suicide During the consultation process the young people discussed that prevention project, **Keeping it together**, which focusses on seven population groups, one of which is young people from aims to promote resilience and connectedness amongst young people and their communities.

Using a partnership approach in project development and management, **Keeping it together** has engaged a range of services and community groups to prevent suicide. SHine targeting multicultural young people living in Adelaide's northern suburbs.

During the October 2004 school holidays the working group, consisting of Relationships Australia's PEACE Project, Cambodian Association of SA, Vietnamese Community in Australia (SA Chapter Inc.) and SHine SA carried out a consultation with 100 young people from Cambodia, Phillippines and Vietnam, as well as people from Spanish speaking backgrounds.

pressure to have sex and other relationship issues, body image, low self esteem, isolation, stress, pressure to succeed, high culturally and linguistically diverse backgrounds. The project expectations from parents, strict parents, money matters, noone to talk to about feelings, loneliness, discrimination, mixed identity (clash between two cultures) and communication issues with parents are some of the stressors for them, often leading to them becoming disconnected from their communities and social interactions with friends and peers.

SA has been a key partner in the development of the project. The next stage of the project is to work with a group of 20 young multicultural people to develop a creative resource based on the themes identified that will help young people keep it together and reduce youth suicide rates in the northern suburbs.

> For more information please contact Miguel at SHine SA's northern office.

> > Miguel

#### Why we work with this community ...

Our work with people from culturally and linguistically diverse backgrounds continues to be a major focus for SHine SA. These communities often do not access sexual health services because of language barriers, isolation, different health priorities and cultural hesitation in addressing sexual health issues.

SHine SA has adopted pro-active measures to reach out to these communities by identifying their needs, liaising and networking with community health and welfare workers operating within these communities, and conducting culturally appropriate educational programs on sexual health issues.

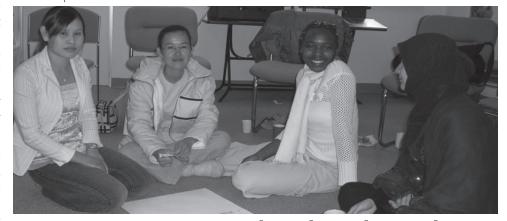
#### Culturally and linguistically diverse portfolio

The **Culturally and linguistically diverse portfolio group** consists of two SHine SA workers with a multicultural focus, a community health nurse from the southern team and representatives from management team and professional

Over the last year the **Culturally and linguistically diverse portfolio portfolio group** has:

- planned and delivered a peer education project with young people from multicultural backgrounds organised SHine SA's participation in community festivals
- coordinated SHine SA's support of multicultural communities participation in **Sexual Health Awareness Week**
- reviewed the appropriateness and availability of SHine SA's resources and information for people from culturally and linguistically diverse backgrounds
- shared information across teams to maximise SHine SA's work with different multicultural communities.

Multicultural peer educators



#### Connecting young multicultural people

The **Multicultural youth connection program** was handle different racist attacks. a successful and popular project jointly facilitated between SHine SA and Shopfront Youth Health Service targeting young multicultural people. There was a total of five sessions between July 2004 to April 2005. A total of 15 young people aged between 14 and 17 years from Parafield Gardens, Valley View, Paralowie and Para Vista High Schools participated in the program. The young people were from Cambodian (4), Filipino (6), Chinese (1), Kurdish (2) Laos/Thai (1) and Italian (1) backgrounds.

On 5 and 6 October 2004, the group took part in a two-day program with activities including a cultural meanings workshop, BINGO (a getting to know you activity), pizza making and a shared lunch. The group also went rock climbing and go-kart

The participants demonstrated an increasing ability to communicate respectfully. The cultural meanings workshop increased young people's skills and abilities to discuss the issues affecting their lives. The young people highlighted that being different can mean that you are unique. On the other hand, they also identified that they do not feel safe due to racism, they sometimes feel like they don't belong, and people make fun of them because of these differences. The group spoke openly about their experiences and some even shared tips on how to

During the Multicultural youth connection program a session on career pathways was included so the young people could find information on studies options. Some had commented that they had little knowledge about the other educaitonal opportunities available apart from university, often due to their family's expectation. All options were discussed during the session and some young people were interested in trade work and wanted to explore this further.

The final session was held during April 2005 school holidays. SHine SA presented information on sexual health and the different types of relationships. It was a very interactive and fun presentation. The young people were able to ask lots of questions and were very open with their discussions. As a celebration, the young people went to Greenhill's Adventure Park.

Positive feedback from the young people indicated that they appreciated the opportunity to develop friendships and some made close bonds. It was wonderful to see the different groups mixing so well and having a genuine interest in each other's cultural heritage. Overall, everyone fed back how much they had enjoyed the program and were talking about future camps and asking when the next program will be.

Miguel



Celebrating during the **Youth Connection** program



## diverse backgrounds

#### Promoting services and creating awareness with international students at the Lakes

For the last two years SHine SA's northern team has been able to establish a working relationship with University of South Australia's Mawson Lakes campus to promote sexual health to students. The Mawson Lakes campus has a diverse community of students, many of whom are from India, Pakistan, Bangladesh, Vietnam, Malaysia, Iran, Thailand, China and Eastern Europe.

The health promotion activities included orientation week in first semester and the great race event during the beginning of second semester. On those occasions SHine SA has had a good opportunity to promote sexual health services for young people who are from culturally and linguistically diverse backgrounds. The feedback indicated that the international students felt having access to sexual health information and services was important, but they were not aware of services such as SHine SA and appreciated information about where to get condoms or assistance if needed. We will continue to work with Mawson Lakes campus to create



#### Young multicultural people re-educate their peers

SHine SA's Culturally and linguistically diverse portfolio group actively and continually focus on ways to increase the organisation's effectiveness with multicultural communities and has identified a lack of appropriate youthfocussed education and materials that target multicultural

The work SHine SA has done with multicultural youth has revealed confusion around what sexual health is and what it means in Australian society. SHine SA has been working with different communities, as their resettlement process did not included basic information on relationships, sexual health issues and all the legal issues and standards in Australia (such as age of consent, coercion and laws related to sexual health issues).

People who arrive in Australia as refugees or migrants often come from countries where there is a very different approach to sexuality and sexual health (in comparison with the predominant views in Australia). Often there is little, if any, publicly available information and education about sexual health. Health systems in many countries can also be very different to what is available in Australia and many people may not have had access to adequate sexual health care. Discussion of sexuality and sexual health can be considered taboo in some communities and this may be a further barrier to gaining information and support.

For young people from diverse backgrounds, there can be intergenerational issues where the expectations of their parents and their communities are different to the values of their peers and what they are taught in schools. This can create conflict and make open discussion of sexual health issues difficult.

Newly arrived young people often have received no education about sexual health in their own countries, particularly if they have spent time in refugee camps. Many young people also arrive with experiences of abuse and this can affect how they have future relationships, as well as imposing on their mental

To address these issues SHine SA has implemented the Multicultural peer education project. The project was promoted to different cultural communities, as well as high schools, TAFE, universities and English language schools. Nine young people were selected to be involved in the project. The young people are from Cambodia, Bosnia, Sudan, Iraq, Iran and Afghanistan.

The two-week training took place during the July school holidays. Some of the topics included:

sexual health within culture

- relationship issues
- safer sex
- contraception
- sexually transmitted infections
- unplanned pregnancies
- age of consent and other legal issues
- values clarification
- power and coercion
- sexual diversity
- health services available to young people
- communication and presentation skills
- group work
- peer education skills
- SHine SA services.

The participants also visited various youth health agencies. Guest speakers were invited to impart their practical knowledge on specific health and sexual health issues. Peer educators from different organisations that work with young people also shared their experiences on how they work within their communities.

The peer educators fed back that they learnt how to:

- pass-on information about sexual health to their respective communities
- make a good presentation
- handle different values and beliefs
- successfully run a group
- utilise SHine SA resources and access different services.

They also reported that they gained new friends, knowledge about different cultures and gender issues, leadership skills and a basic understanding about the laws.

The newly trained peer educators will develop a plan that will support other young people to access information and services relating to sexual health and wellbeing. They will have opportunities to conduct education and awareness programs with other young people in their own cultural communities. They will be supported by SHine SA's multicultural community health workers and be given opportunities for further skill development that will assist them in this work.

We would like to thank all the peer educators, Hong, Susan, Ali, Abraham, Adan, Nat, Hajir, Zainab, Huria, Neari and Rita (social work student) who have made this project vibrant, dynamic and successful. Also we would like to thank all of the organisations that supported this project, with special acknowledgments to SHine SA staff and The Second Story Youth Health Service for their contribution.

**Jacqueline and Miguel** 



Multicultural youth consultants launching their poster

#### **Enjoy healthy relationships**

SHine SA wanted to promote a positive health message relevant

The young people also gave lots of invaluable feedback during together with young multicultural people in a special project to we learnt from the young people as a result of this project: develop a poster that celebrates healthy relationships.

We ran an information session and a week of educational workshops with a diverse group of about 20 young people, who were either first generation Australians or had recently arrived in Australia, representing Somalia, Iraq, Vietnam, Cambodia, Bosnia, Sudan, Liberia, Colombia, Uganda, Eritrea. You can see many of their beautiful, happy faces on the poster.

The young people were given the opportunity to express themselves and their opinions were valued. The issues that came out of the discussions during the workshops were incorporated into the design, content and message of the poster. The group chose the final message that appears on the poster and gave specific instructions to our designer on how they wanted it to look and what images they wanted to include. They also wanted to convey this message in 10 different languages. The following is what the young people thought was important to say to other young multicultural people:

#### **Enjoy healthy relationships** Show respect. Know how to protect.

The poster was launched at Fowlers Live on 7 October 2004 during Refugee Week. As with every aspect of this project, the young people were very heavily involved in the preparation and organisation of the launch with support from SHine SA workers. The young people arranged to bring traditional food from all their countries of origin and put together a display of artefacts to represent their countries. The poster was officially launched by one of the young women from the project who talked about how the poster came to be. The young people involved in the project were presented with certificates, which was followed by a celebration with music and belly dancing.

to young multicultural people, so in 2004 SHine SA joined the project and as part of the evaluation. The following is what

Miguel and Catherine

- They felt that living in a country free from war increases a sense of safety, peace, freedom, security and future
- They wanted to embrace Western values, but also feeling a sense of loss of their own cultural identity in doing this.
- They saw an opportunity to let go of values they didn't like about their country of origin, including arranged marriages and traditional gender roles, but retain the values that they did like, including music, food, social interactions and family
- Australia provides freedom to express themselves and make their own choices, but they can experience isolation and criticism from their own community when they don't follow their families customs or culture.
- Language barriers can limit their ability to express themselves effectively and be understood.
- For some it was difficult to socialise outside of their own cultural group and they experienced discrimination from other young people and the community.
- Being involved in the project was a great opportunity for the young people to meet other people from different backgrounds that share similar values.

This project could not have been successful without the support of many people including the young people who participated, The Second Story Youth Health Service, SHine SA staff, mainstream and mutlicultural agencies who promoted the project to young

A positive outcome of this project has been the continued involvement of some of the young people in other projects offered by SHine SA, like the **Just Chillin'** program and the Multicultural peer education project, and many have formed ongoing friendships.

Kylie



Jacquie at the Multicultural Festival



Women's group at the Overseas Chinese Association

## People with disabilities



#### Meet Jodie and Jeff

Hi there! We thought we would like to introduce ourselves, as not The following day we went off with the northern team to work many people know who we are or where we live.

We are two young people, **Jodie and Jeff**, who are often asked to help others explore issues of relationships and sexual health. We share a room (it's rather small - the size of a suitcase!), but we seem to get on well together despite this. We are sort of an item. We live at Kensington in the Resource Centre.

Over the last year we have had a couple of outings with the northern team. It was great to get out and have a drive up in the country. Last Christmas we drove over to Nuriootpa and had a Christmas lunch with the 'Laugh and learn' group. Afterwards we had a great time sharing our experiences of friendships, relationships, personal boundaries and just helping them recap all of the information that they had learnt in previous sessions. They made us feel very welcome.

That Friday afternoon we were lucky to come home via the Adelaide hills and stayed the weekend at Paracombe. We had a great time and relaxed on the deck and made ourselves at home. The hospitality was great!

We've also been to Port Pirie. This was country we hadn't seen before. Wow! Once we got there we did a bit of sight seeing at the local tourism center. We had a look around and got some useful information about the area. We stayed overnight at the onsite hospital accommodation which we found really good with large bedrooms and shared facilities. We had our own rooms, which was great as we could really stretch out which is a luxury for us!

Jodie and Jeff on the move



Jodie and Jeff relax after a long trip.



at TAFE with a group of young people who are involved in a 'job readiness' program. We had a fun day and were really accepted by the group. We helped them explore issues of dating, what's ok or not ok when starting a relationship, how to behave appropriately, rules about sex and explore some of the issues of sex that are sometimes are a bit hard to talk to some adults about, including homophobia and same-sex relationships. I think we also learnt a bit and they really opened up to us and made us feel good about what we do. We had workers present and they learnt heaps as well. Everyone said they enjoyed the day and they had learnt lots of new things and that they wanted us to visit them again!

On the way back to Adelaide we were fairly tired, but felt pretty good that we had been able to help people explore some of the sticky stuff around sexual health and relationships. It's good to know that we are useful and people enjoy our company. Hopefully others will take us out on a few trips and we can get to meet other groups in the community.

Jodie and Jeff

PS. We are also hopeful of getting a wardrobe change as we have been in these clothes for a long time!

To take Jodie and Jeff to help others understand about sexual health and make new friends contact SHine SA's Resource Centre on (08) 8431 5177.

Jodie and Jeff waiting for a train at Port Pirie



Jodie and Jeff working with a group



#### Educating young people with special needs

Programs over a four-week period were conducted at Sunden Special School and Townsend House in the last year. It was a fantastic opportunity for both SHine SA workers and teachers at these schools to learn from each other.

The program covered information including feelings, private and public places and body awareness. The topics of safer sex practices and the 'What do you reckon?' game provided a lot of stimulated conversations and fun during the session. The two programs were a great opportunity to meet some wonderful young people who had a willingness to learn and gain skills in a range of areas.

12

Southern team members continue to provide education Some of the students already had some education in the past, programs at our local schools for students with special needs. 
which indicated that parents, workers or even friends had provided them with sexual health information. Well done to them. This meant our role was about updating or expanding their knowledge base.

> What we have found over the last few years is that teachers are feeling a lot more confident and excited to present the information learned during SHine SA sessions. This means that they are providing ongoing education programs for their students. Having the ability to reinforce the information provided in SHine SA sessions is the key to the success of this program.

#### **Embracing diverse abilities**

On the 27 and 28 January 2005, the 2<sup>nd</sup> State Conference - Embracing Diverse Abilities was held at Flinders University. The conference was organised by the DisAbility Rehabilitation Professionals' Association (dArpa). SHine SA provided some funding for the conference and its Coordinator of Disability Workers Education was a member of the organising committee. The theme of the conference, embracing diverse abilities, came from the dArpa committee's strong commitment to encouraging people to accept people with a disability regardless of how well they fit into the "norms" of society. The key note speakers were Donna Williams, Associate Professor David Turner and Dr Paul Jewell. The speakers were informative and were well received by their audiences. Participants were entertained in the evenings by Tutti Arts Ensemble and No Strings Attached. Club Slick presented a lively and enthusiastic performance of rock and roll dancing after the conference dinner which had all the participants dancing the night away. We look forward to the next conference!

#### Why we work with this community ...

SHine SA's Strategic directions document identifies 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.

#### Disability portfolio

The **Disability portfolio group** comprises a representative from each primary health care team, management team, the professional education and resources team, and SHine SA council. The group meets at least four times per year and provides the opportunity for staff to be involved in disability planning at the whole of organisation level. An opportunity for members to share information about the work that their team has been doing in the disability sector enables the feedback of information to teams.

During the past year the **Disability portfolio group** has:

- · supported the review of SHine SA disability services
- commented on the revised Disability Action Plan for SHine SA
- updated policy and procedures
- provided input into the statistics collection codes for disability work
- made recommendations about the purchase of new resources and the removal of out of date resources
- had input into the strategic directions in the area of people with disabilities

The main work for the group for the next 12 months includes furthering the recommendations of the review of SHine SA disability services through:

- seeking feedback in relation to SHine SA services and client expectations through a focus group for people with disabilities, their parents and carers and a focus group for workers in the disability field
- developing guidelines and procedures for SHine SA staff working with the disability sector
- updating disability forms used within the organisation
- convening an ongoing disability advisory group
- have input into special projects, including a resource for special education teachers and a resource for parents
- organise further discussion with other stakeholders about SHine SA's work with people who have been sexual
- coordinate disability awareness training for front line staff
- provide a disability expo for SHine staff to showcase new disability resources and show innovative approaches that others have used in working with the disability sector.

#### Sexual health does matter to people with a mental illness

The experience of mental illness impacts negatively on the capacity to develop and maintain relationships, communicate and socialise effectively. It also impacts on the capacity to maintain a reasonable self-esteem and to protect oneself from sexually exploitative behaviour in others. Mental health consumers also report that many psychiatric medications have a negative impact on aspects of their sexual and sensual functioning.

In 2004 SHine SA published a new booklet entitled **My sexual health matters**: information for people with mental illness which was aimed at, and involved significant input from, mental health consumers and a range of professionals. This booklet has now been distributed to all South Australian psychiatrists, GPs and most mental health services across the state thanks to the help of a volunteer Barb Yeomans.

The response from many services has been enthusiastic and at the end of June 2005 SHine SA had run out of the 10,000 copies originally printed. Requests for the resource have been made by mental health services locally, interstate and overseas. An entitled 'Why sexual health matters'. It is hoped that these evaluation of the resource is currently being undertaken.

It is evident from the literature that frank sensitive discussion about sexual matters is needed in mental health service

- In one study of severely mentally ill patients, 41.7% of men and 15.4% of women admitted that they had stopped their medications at some point during their treatment based on a belief that they were experiencing sexual side effects and 50% rarely if ever discussed sexual matters with primary health care providers, women in particular. (1)
- Mental health consumers also report that often their own workers are uncomfortable with matters of sexuality and do not encourage the discussions to be opened. Only one third

of people with a mental illness who experience negative side effects on their sexual functioning raise it with their doctors without being asked first. (2)

To achieve improvement in South Australia, mental health agencies have so far indicated the need for a next step for mental health professionals, which incorporates model procedures for assessing and discussing sexual matters and workforce development in mental health and sexual health co-morbidity. SHine SA has applied for funding to undertake a pilot project and is, at time of article-writing, awaiting a response from the

An initial presentation about the booklet at a national forum took place in September 2004, with a short paper at The Mental Health Services Conference of Australia and New Zealand. This conference will be held again in Adelaide in August/September 2005 and there have been two presentations accepted by the conference organisers. These include a symposium entitled 'Scared to talk about sex?' as well as a pre-conference workshop activities will enthuse the mental health sector to begin to integrate sexual primary health care into its day-to-day work

1. Rosenberg K, Bleiberg K, Koscis J & Gross C 2003 'A survey of sexual side effects among severely mentally ill patients taking psychotropic medications: impact on compliance Cornell University Medical Center'

-I NEED TO

GET HELP ...
TALK TO
SOMEON

Journal of Sex & Marital Therapy 29(4):289-96. Jul-Aug New York.

2. Levine & Stephen 2003 Clinical sexuality for health professionals, Taylor & Francis Inc. LISA

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#### SHine SA attends the DisABILITY Expo

On Friday 3rd December 2004, the DisABILITY Expo was held at the Port Adelaide Football Club at Alberton. The day was planned to show what services are available in the western metropolitan region that support people with a disability. Three members of SHine SA attended the day. We set up a display of books and resources relating to disability as well as television set screening disability related videos. The crowd was entertained by various performers throughout the day. Another expo is scheduled again

Sharon



## Regional rural and remote

#### Why we work with this community ...

SHine SA acknowledges the difficulties for people living in regional, 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 health needs and focus education and training opportunities on the regional, rural and remote work force.

#### Regional rural and remote portfolio

With membership from each of the primary health care teams and professional education and resources team, the **Regional**, **rural and remote portfolio group** continues to focus on increasing access to relationship and sexual health information by workers and the community with information being disseminated to GPs, educational facilities and health services. The development of the *Strategic directions 2005 – 2008* was also an important part of the portfolio's work this year. One of the issues identified during consultations was the gap in information, resources and knowledge for rural workers to work with men around relationships and sexual health issues. The portfolio will focus on building the capacity of workers in this area in the forthcoming year.



Outside the Pika Wiya Outreach Service in the Flinders Ranges

## Promoting our services to young people in the Fleurieu region

Mission Australia workers in the southern Fleurieu region this year identified that young people of high school age still have limited information about services or information that are available to them in the city. To address this, they arranged for a series of all day health expos for high schools and senior students in area schools within the region starting on 25 May 2005. SHine SA's southern team was invited to be involved in having an interactive information stall.

SHine SA regularly visits the region so it was more an opportunity to provide young people with our newly launched youth online stickers than to introduce them to our service. The most common way in which southern Fleurieu young people access our service is via the website, Sexual Healthline or workshops we deliver to specific groups. Some young people do choose to come and visit us at our Noarlunga clinic on occasion if they want to see a doctor in a youth-friendly environment.

We were unable to be present for the expo held in Mt Compass, but the students didn't miss out because local workers were given our full range of information to display for them.

In Victor Harbor approximately 600 young people passed by the SHine SA stall and collected all the information we had available. We ran out of everything! The young people loved the condom basketball game and many came back for second and third tries.

Yankalilla was our last stop. The school is not as big as the others, but the young people were just as keen to gather the information that we had, as well as have a try at the condom basketball game.

Teachers from all schools reported being very happy with the young people's opportunity to access such a wide range of information. The young people are now more aware of the types of services they can access, even if the agencies are city based. Everyone found it to be a useful and valuable day and coordinators are looking at the possibility of making it an annual event.



Frances and Brian from Kumangka at the **Reconciliation Youth Ball** 

#### Over the hills and far away!

The northern team has had another busy year visiting our rural neighbours and spreading the word that sexual health and relationships are a normal part of people's lives!

We have journeyed to Port Pirie a few times in the last year providing workshops for the Stepping Out program which is an independant living skills program for young people who are living out of home or are considering moving out. This program is facilitated by Uniting Care Wesley Port Pirie who run a youth accommodation service and provide outreach support.

We have also been involved with a group of workers from Port Pirie Regional Health Service, SAPOL, CAMHS and DECS, supporting them to provide a travelling workshop to schools in the local community. A trial workshop was held last year at Snowtown and after much tweaking it was again presented at Snowtown with good response. They are hoping to take the show they have named *Sex in the country* on the road to Gladstone and Orroroo schools in the near future.

The Riverland is always a great place to visit and the team has been up there four times in the last year supporting programs and projects involving young people. The Riverland **Talking** 

**Realities** is going from strength to strength and we were asked to provide the sexual health component of the peer education training again. This involved two visits and during our stay we also made time to catch up with other workers from the area.

We were also involved with the Learning Tree, a project run by the Renmark/Paringa Council and the HOPE project. Run by Riverland Regional Health Service, the HOPE project is a mental health peer education project which trains young people to spread the word about positive mental health. The Learning Tree targetted young people from Loxton, Glossop and Remark High Schools.

We have continued to support the *If only I knew* project in Yorke Peninsula and be involved in the Port Broughton Hospital Health and Wellbeing Day. We have also trained nine young people and workers from Port Pirie for SHine SA's **Hear me out** project (for more information on this project see the Young adults section).

As you can see the northern team has been busy over the past year putting k's on the Corollas!

Juliet



#### Youth Week Health Expo in Mt Barker

Southern team members travelled to Mt Barker for our annual **Youth Week Health Expo** for young people attending schools in Mt Barker and surrounding regions on 13 April 2005. This year a sixth year medical student got to experience hundreds of young people accessing our stall and our information. Approximately 300 students passed by making it a worthwhile event to be involved in.

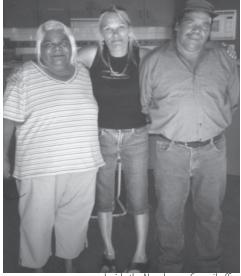
Students were keen to collect everything that we had available such as brochures, booklets, posters, postcards and especially our new youth online stickers. There were not a lot of resources left by the end of the day. Our condom basketball game was a big hit with students, teachers and other stall holders having a shot at getting the sperm in the condom.

Cherice

# Community education @ a glance

There were 25,623 participants in community development programs for 2004/2005. These programs included **Sexual Health Awareness Week**, Big Day Out and Reconciliation Day

There were 231 registered participants in community groups who attended 143 sessions for 2004/2005. These groups included Choice @ Penola, Cross cultural issues, gender power & sex, Hear Me Out, Just Chillin', Laugh & Learn, Talking Realities.



Inside the Nepabunna Council office



Students at Leigh Creek School

## **GLBTQI**

Gay, lesbian, bisexual, transgender, queer intersex people



#### **GLBTQI** Porfolio

#### Consultation with community agencies and individuals on the SHine SA Strategic directions 2005 - 2008

Fifteen people attended this consultation and feedback was gained on issues that are important to gay, lesbian, bisexual, transgender and intersex people. In particular, community members raised issues relating to transgender and bisexual people's experiences of accessing health services. They had found that while there has been some improvement in how services respond to people in same-sex relationships, there continued to be general confusion and even hostility towards people who identify as bisexual or transgender.

#### Collection of gay, lesbian, bisexual, transgender and intersex data

SHine SA is one of the few health agencies who collects data from clients (on a voluntary basis) on sexual and gender diversity. It is interesting that while other demographic information is captured in many health agencies the issue of sexuality is often deemed too sensitive to ask.

However, SHine SA's experience is that 73% of clinic clients answered the question that asked them to identify whether they identified as bisexual, gay, heterosexual, lesbian and/or transgender. In 2004/05 1.75% identified as bisexual, 0.02% as gay, 0.42% as lesbian, 0.2% as transgender and 70.16% as heterosexual.

Clients attending for counselling were also asked this information and 80% provided it. This showed that 4.17% identified as bisexual, 0.6% as gay, 2.3% as lesbian and 72% as heterosexual.

Given the relationship between sexuality/gender diversity and health it is important that this information is available to assist with monitoring service provision to gay, lesbian, bisexual, transgender, intersex and gueer people.

#### Pride march, Feast picnic, and survey

SHine SA staff again took part in the Pride march down King William Rd which marks the beginning of the Feast festival. This march provides visibility for gay, lesbian, bisexual, transgender, intersex and queer people and also illustrates the diversity in the community; from Pink Parents to religious gay and lesbian groups.

SHine SA's main activity for 2004 was to participate in the gay, lesbian, bisexual, transgender, intersex and queer community picnic held as part of Feast. This also enabled SHine SA to assist with the 2004 Health Care Experience of the South Australian (GLBTI) Communities Survey of community members on the issues that most affect their health. This survey was conducted by the Health and Human Diversity Unit in the Department of General Practice at Adelaide University. SHine SA staff recruited 50 people for the survey which was one of the first conducted with gay, lesbian, bisexual, transgender, intersex and queer people from South Australia. Respondents in the survey rated 'discrimination under the law' as the social factor that most impacts on the health of people of sexual and gender diversity which reflects the concern around the current lack of legal status for people in same sex relationships in South Australia.

#### Information for volunteers with Gay and Lesbian Counselling Service

On the 21 April 2005 SHine SA staff again took part in the expo that helps inform new volunteers at Gay and Lesbian Counselling Service about the services of different health and community agencies. This evening provides an excellent networking opportunity and also assists SHine SA in keeping up-to-date with what services are available to gay, lesbian, bisexual, transgender, intersex and queer people.

#### Health in Difference Conference 5, January 2005

The Fifth National Lesbian, Gay, Bisexual, Transgender and Queer Health Conference was held in Melbourne in January 2005. The theme of the conference was separate and together which the organisers said 'recognises both the diversity among those in our varied communities - the need at times for specific attention and action around specific health issues - as well as the enormous benefits of coming together to work on shared concerns and needs'.

One of the highlights of the conference was the opening which featured a multimedia presentation on 'Our health in history'. This mapped the issues for gay, lesbian, bisexual, transgender, intersex and gueer people over the last 50 years and particularly showed the links between social and medical policies and approaches, and the wellbeing of this group of people. One particularly moving piece of TV footage from the past showed a lesbian woman who had been given a leucotomy (a form of brain surgery) to try and 'cure' her lesbianism.

The conference also brought together the following three dynamic keynote speakers. Georgina Beyer was the first transsexual mayor in the world and went on to become a Member of Parliament in New Zealand. Michael Kelly is a writer and educator with a focus on gay spirituality. He was a lay chaplain in Catholic schools and is well know in Australia for his work as spokesperson for the Rainbow Sash movement which publicly challenges the Catholic Church to affirm and dialogue with gay and lesbian people. Margarethe Cammermey was a nurse who served in Vietnam and went on to become Chief Nurse in the US Army and achieve the rank of Colonel. She had been married and had four sons but recognised she was a lesbian in 1989 and advised the military of this. She subsequently was 'separated' from the military but challenged this successfully. The film Serving in Silence was made about her experiences.

All these speakers spoke from personal experiences and were very inspiring. None had sought to be political in the work they were doing but had been forced to take action after being unfairly treated on the grounds of their sexuality/gender.

The conference drew together health professionals, educators and researchers with an interest in gay, lesbian, bisexual, transgender, intersex and queer health. SHine SA was represented by Sally Gibson who presented on the **share** Project and the way that fear about homosexuality was used to try and discredit the program.

The conference was organised by La Trobe University which is part of a consortium who received funding from the Department of Human Services to set up an institute for gay and lesbian health. For more information on Gay and Lesbian Health Victoria go to www.glhv.org.au.

Staff shining with pride during **FEAST** 

**GLBTQI Portfolio Group** 



#### Why we work with this community ...

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

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

#### Exploring service responses for same-sex attracted multicultural people

A one day workshop, **Culture and sexuality** was held in February 2005 as part of **Sexual Health Awareness Week**. This was a collaborative effort between workers from SHine SA, Relationships Australia and the Bfriend Project at organisations about how to best respond. UnitingCare Wesley Adelaide and funded with a grant from SHine SA. This collaboration between workers provided a good mix of knowledge, expertise and commitment to an under explored issue for people from culturally and linguistically

diverse backgrounds.

The aim of the workshop was to provide a forum for people to increase their understanding and awareness about service responses to people who are same-sex attracted and from a multicultural background. While many of the issues faced by people from culturally diverse backgrounds are similar to same-sex attracted people from other backgrounds there are some specific issues that arise due to cultural and religious dynamics. This can lead to either the invisibility of sexuality issues or overt discrimination and lack of acceptance of people who are same-sex attracted.

The workshop came out of previous collaborative work with workers and community members from multicultural backgrounds. Mainstream workers had also expressed a desire to understand the issues better and the workshop offered a unique opportunity to explore and take ideas back to mainstream

Seventeen workers attended the all day workshop. The structure of the day allowed participants to explore their own and agency values about people who are same-sex attracted from culturally diverse backgrounds. An important aim for the workshop facilitators was to raise awareness of the overriding importance of culture for same-sex attracted people. This understanding is vital for mainstream providers to offer an appropriate and

A panel of people who are same-sex attracted from a culturally and linguistically diverse background, generously shared their stories. This personal insight was extremely powerful and was well received by participants.

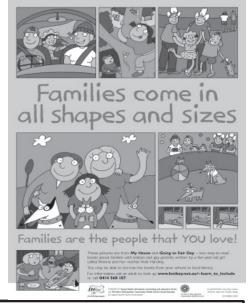
A key part of the day's work was for participants to consider how they might take the ideas from the day back into their organisation and into their own work practices.

Miguel



#### Families come in all shapes and sizes

SHine SA assisted with the reprinting and distribution of this poster in South Australia. It is part of an initiative by Vicki Harding who is the founder and project manager of Learn To Include which produces educational resources for under 8 year olds. Other resources include easy readers that brings same-sex parented families into the homes of young students all over Australia. These readers can be borrowed from the SHine SA library or see www.hotkey.net.au/~learn\_to\_include/



#### Are you working with a same-sex attracted person in a straight relationship?

Would you, or your colleagues, benefit from an information pack containing useful and relevant information to either handout to clients or for your personal use to research issues relating to this client group?

A group of married couples have been meeting over the past year, offering support to people in a similar situation by:

- planning social gatherings
- offering phone support
- developing a resource for workers / the community.

The resource is freely available and contains information about books, websites, agencies etc that have been helpful, as well as tips for workers and personal stories.

For details please phone Jo or Desmond at SHine SA on 84315177.



## HEAR ME OUT ...



Peer educators promoting the **Hear me out** resource

**Hear me out** is a peer education project run by SHine SA. Young people aged 17 to 24 years have been trained as peer educators so they have a clear understanding of their role and responsibilities and can address issues around sexual health, effective communication, negotiation and young people's choices about safer sex, including how to say no.

#### **Background information**

It is understood that young people's sexual health is influenced by many factors, including peer pressure, social and gender expectations, and drug and alcohol use. Recent statistics reveal young people's risk-taking behaviour is still relatively high.

The Secondary Students and Sexual Health 2002 study reported on a survey of year 10 and 12 students in Australia and found 28.1% of young women and 23.3% of young men had experienced unwanted sex. The most common reason given for unwanted sex was being too drunk (16%) or pressure from a sexual partner (13%).

The Australian Study of Sex and Relationships (2003) found the experience of sexual coercion for men and women was associated with other health issues, including higher levels of psychosocial distress, anxiety about sex and having a sexually transmitted infection (STI).

Additionally both studies found that not all Australians are choosing sexual behaviours that protect from STIs. There is also a low level of consistent effective condom use. From the evidence it is clear that young people need assistance to develop effective skills in negotiating for safer sex.

Safer sex means choosing sexual behaviours which protect both partners from:

- sexually transmitted infections
- unplanned pregnancy
- violence, harm and exploitation.

The **Hear me out** project engaged young people to work in partnership with SHine SA to identify solutions that positively influence their peers' sexual behaviours. The project included:

- initial consultations with young people to identify the barriers to negotiating for safer sex, including how to say no and condom use
- developing a resource from the information gathered to be created by young people
- training young people as peer educators to distribute the resource and provide sessions to young people about negotiating safer sex
- HMO peer educators talking with young people at Elizabeth

#### Consultations with young people

From the four focus groups run in northern metropolitan and regional areas, anecdotal evidence supported the reported research. Young women, in particular, did not feel confident in discussing the use of condoms with sexual partners. They often did not raise the topic, therefore increasing risk-taking behaviours in relation to their sexual health (STIs, unwanted

Young men reported that they did not view using condoms positively. They reported that using condoms meant they experienced less feeling or sensation and it implied that they did not trust their partner.

#### **Resource development**

The young people were asked to identify the most effective style and design for a youth resource. The young people chose a plastic wallet over posters, postcards, flyers and stickers. They saw it as a discreet way to store condoms and they wanted to include messages to prompt ways of negotiating safer sex.

Using the consultation information as a starting point, another group of young people were asked to identify six key messages. A competition was run with young student designers at TAFE to develop these messages into graphics. A group of young people selected Amy Shaw and Katie Furnell as the winning designers. Ansell sponsored the project by providing the condoms.

#### **Peer education**

Young people recruited in the north and mid-north areas of Adelaide had two days of training to become peer educators, which covered sexual health, contraception, STIs, communication and negotiation, and the role of peer educators.

The trained peer educators identified groups of young people that would benefit from an information session on sexual health and negotiation. So far both peer education groups have had the opportunity to present mini information sessions to groups of young people and to distribute the resource. As part of National Youth Week 2005, the peer educators also attended Elizabeth TAFE and spoke with young people accessing the

It is hoped peer education training will also be available to young people in the south and east/west regions of Adelaide to disseminate the resource and information.

For more information about the project, resource or the **Hear me out** peer educators contact SHine SA's northern office.

Michelle

#### Why we work with this community ...

Despite increasing independence and life experience, young adults have relatively high rates of sexually transmitted infections and unplanned pregnancies. They also often have less access to appropriate education and services, particularly if they are outside of educational settings.

Young adults

SHine SA believes that young adults need services and information that is relevant to their needs.

#### Young adults portfolio

The **Young adults portfolio** group (18 - 30 years old) has membership from each of the primary health care teams and professional education and resources team. Late 2004 saw the group focus on developing the strategic directions for young adults 18 – 30 years in consultation with young people and key stakeholders. In this age group chlamydia, a sexually transmitted infection, continues to be most prevalent. This year the portfolio group intends to research the most effective way of reducing the incidence of chlamydia in this age group, especially amongst young men. The portfoilio group is also committed to supporting Sexual Health Awareness Week which targets young adults, contributing to the ongoing development of SHine SA's website, and increasing the information available for young adults.

Northern Y@ in the Playford Residents Christmas Pageant



#### Talking about the realities of parenting in the north

At long last we now have a **Talking realities** in the northern suburbs. The project began in 1997 in the western suburbs and since then has trained young parents 19 years and under as peer educators, who have managed to cover requests for the program throughout the metropolitan area.

From the start SHine SA has always had involvement in the project by providing the sexual health component within the training program. SHine SA's northern team has worked in collaboration with Para West Adult Campus and Adelaide Central Community Health Service (Parks) with support from The Second Story and City of Playford to achieve better educational, health and social outcomes for young parents living in the northern area. The project has been set up at Para West Adult Campus within the Faculty of Family Learning. The faculty has a number of educational programs set up to support young parents and their children.

How do we get and keep young parents interested? We decided after some consultation that we needed to establish an informal setting where young parents could come along and get to know each other without the fuss of formal guidelines. Using the experiences of other **Taking realities** groups we set up a Friday group where young parents could come along and get involved with craft activities, chat about their children and partners, get some health information and talk about the world in general. It also became a wonderful source for network exchanging; best buys, best op shops and how to cope with demands from service providers in the area. Food, crèche and transport were provided and soon word got around that we had something to offer.

The concept of the **Talking realities** peer education program was introduced to the group from the north and they were visited by peer educators from the Parks, who demonstrated the presentation they provide in schools. The informal group

setting provided an opportunity for the group to bond and to get to know the workers involved.

During this time we had 14 young mothers involved in the group at different times. We received funding from City of Playford for craft supplies and food and ICAN for the provision of much needed transport. There was funding available for four hours a week for a support worker. The worker had initially been involved as a peer educator at the Parks.

Training started on the 17 June 2005 with 12 young parents. We had nine parents from our 'fun group' and three from Muna Paendi Young Mums group. The four hour training sessions go for 26 weeks and this includes a healthy lunch break provided by the project. Training will be going right through till December.

The initial 13 weeks of training covers communication and presentation skills, values, dealing with conflict and sexual health and relationships. The second part of the training covers the 'banner training' where young parents become equipped to go out on the road and take the presentation into schools, TAFE and other organisations. The training is accredited to six modules of Certificate 3 Community Services Work. The training is 'jam packed' and both the participants and facilitators are learning 'lots' along the way.

We have been very well supported by the staff of the Parks **Talking realities** who have provided advice, training materials and humour. The project had now received funding from Youth SA for a young parent support worker/mentor to the project

It's a new jouney for all of us. We are now having requests from young parents interested in joining the next training in 2006. Word is getting around that northern **Talking realities** is here to stay and it looks like it will expand in the north.

Juliet

#### Big Day Out - 2005

Y@, Renee, worked the afternoon shift from 2 till 6pm.

As always we handed out free condoms to people passing by or visiting our stall to promote that "we are here" and "come access our services" to young people! Also available were stickers, postcards, badges and lanyards. The lanyards and badges were extremely popular as prizes for young people.

We had two activities available to attract young people to us the sperm basketball game and What's in the Box?. Both activities

This year the Big Day Out was held on February 4th, 2005. There were equally popular, and the attraction of the basketball game were two shifts for the Y@'s to work. Myself and another Northern was that it was free and you could win something! After playing that game we'd offer for them to go inside the stall and have a go at What's in the box? There were five items in the box to get them guessing and feeling more comfortable to ask us questions! Although our stall was placed next to a stage, giving us a break during bands, and it got loud at times, the day was a success and I feel we were able to raise awareness about SHine SA and have a bit of fun!

April

Celebrating young people

this report) to SHine SA. This was followed by a barmy night of music, dancing and fabulous food.

On 26 November 2004 celebrate the contribution and achievements of young people working with our organisation in

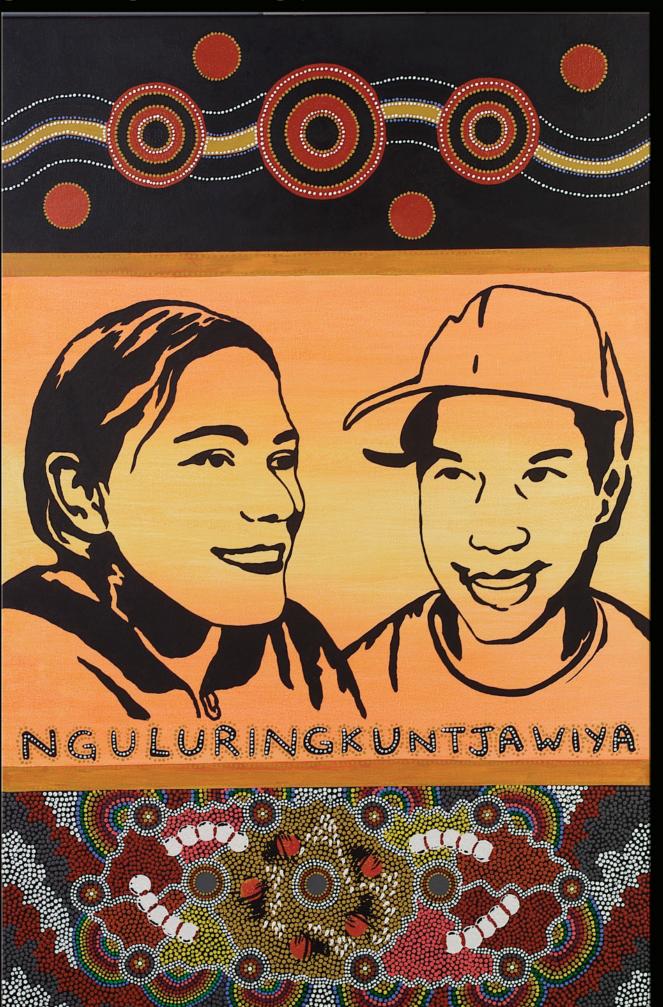
spectacular fashion. The festivities ran from 6 pm to 8 pm SHine SA's Kensington office. The formal proceedings included

young people talking about their involvement in a range of fantastic projects at SHine SA, including the Y@s, Hear me out

and RESPECT. The evening also involved the presentation by Wiltja students of three paintings (printed in the centre fold of

## Don't be afraid

The top section being collaboration by Danny Ramzan and Phillip Lynch which depicts a dreaming story of travelling to and from a gathering or resting place.



The bottom section was completed by Justine Anderson and depicts a dreaming story of gathering traditional bush tucker, honey ants (yurampi) and witchetty grubs.

## Choose for

The top section was constrained and depicts to dreaming story.



The bottom section w Mikisha Anderson and the "honey ant dream

## Centre

The portraits are of Anangu/Wiltja stude The colours represent the land

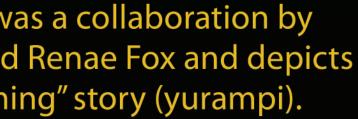
## the future

completed by Danny the "possum

## Keep on learning

The top section was completed by Phillip Lynch, which depicts a dreaming story of the Northern Arrente People.







The bottom section was completed by Justine Anderson which depicts a dreaming story of gathering honey ants (yurampi) and witchetty grubs.

## images

ents placed on warm landscape colours. d the young people belong to.



## Professional education











Volunteers

Members of the Professional education and resources team

#### Teacher education

The demand for professional development by those who work in schools teaching relationships and sexual health has remained high over the last 12 months. Ten general courses of 15 hours have been run since the start of July 2004 for 156 participants, most of whom are teachers. A small number of community health workers, nurses and student counsellors also attended the courses as they support school programs. Courses have been run throughout the state at Coober Pedy, Whyalla, Pt Pirie and Seaford. Four courses were run in the metropolitan area and two courses were run for health teachers at individual schools. Teachers from both primary and secondary schools continue to be committed to offering comprehensive relationships and sexual health education to their students and want to be sure they are offering relevant and appropriate curriculum. Teachers indicated that they attend courses to access the latest information on effective methodology, classroom activities and information about the sexual health of young South Australians. They want to empower young people to make healthy life choices about their relationships and sexual health.

I have continued to be involved in pre-service teacher training at both Flinders University and the University of South Australia (Magill Campus and Mawson Lakes) through short courses, lectures and workshops. I work with students training to be teachers in the early, primary, middle and senior years of schooling.

As a member of the Health Directorate of Australian Council for Health, Physical Education and Recreation (ACHPER) SA I have run workshops in regional conferences in both Penola and Barmera for rural teachers. Teachers in regional, rural and remote areas are particularly appreciative of professional development opportunities being offered to them in their own regions. They are equally as passionate and concerned about their students health and wellbeing as teachers in the metropolitan areas, but generally have to travel long distances to access professional development.

The Child Protection Curriculum, developed by Department of Education & Children's Services (DECS), is undergoing a larger trial in a number of schools during term 3 and 4 of 2005. Based on the trial, feedback from the schools and other interested groups the curriculum materials will be revised and printed for implementation in schools during 2006/7. The curriculum materials have been written by teachers and reviewed by many groups including members of the Interagency Advisory Committee. I have been a member of this committee. A review of the previous protective behaviours program indicated that it was no longer being uniformly taught in schools and that making the materials more comprehensive would increase the effectiveness of teaching young people how to recognise and report abuse. The new materials are exciting in that they are teacher friendly, provide teachers with a range of teaching and learning strategies and have been written in 6 sections to cover young people from when they enter child care centres up until when many leave school at the end of year 12. I believe the Child Protection curriculum will complement comprehensive relationships and sexual health education in working towards

empowering young people to recognise when they are safe and unsafe, make healthy life choices about their relationships and sexual health and seek help when necessary. A critical part of the process will be the support and training offered teachers in schools to become confident to deliver the curriculum in the classroom

There are three initiatives that are continuing to impact on how South Australian schools view student health and wellbeing as a whole school issue – beyondblue, the national depression initiative, the DECS Drug Strategy and **share** (SHine SA's sexual health and relationships education project). Mental health, drug use and sexual health issues for young people are very much inter-related and need to be addressed using a whole school approach. All three of these school projects will move into different phases at the end of 2005, but have had a positive impact on schools ability to cater to student needs. I am a member of the beyondblue reference group and the Health Promoting Schools partnership (supported by the Department of Health) and in the last three years I have seen a significant shift in how schools understand and address the health needs of their students

A further opportunity for teachers to advance their skills and knowledge in the area of relationships and sexual health education is being created by developing a **Sexual health and relationships education forum** for teachers. All teachers who have attended a course are personally being invited to join. The forum is open to anyone and is currently being advertised in the Department of Education & Children's Services teacher's journal. Teachers will be kept up to date with latest statistics, publications and topics of interest, they will also be invited to attend regular professional development sessions.

Jane

#### Sexual health and relationships education forum for teachers

Are you interested in receiving information about relationships and sexual health:

- · resources
- $\cdot \quad \text{professional development opportunities}$
- latest statistics
- relevant journal articles
- forums/updates for teachers on relevant topics
- debates on current issues
- conferencessurvey reports
  - networking opportunties

If so become a member of our Sexual Health and Relationships Education Forum for Teachers by contacting Jane Flentje, Coordinator of Teacher Education Sexual Health information networking & education SA, e-mail jane.flentje@health.sa.gov.au

#### Nurse education

It has been exciting to see an increasing number of hospital-based nurses and midwives, as well as community nurses and midwives attending the **Certificate in sexual health**, sexual health updates and network meetings during the year. This means that sexual health information is becoming part of the health promotion strategies in hospitals.

The **Certificate in sexual health**, which includes the theoretical, counselling and the clinical components, provides nurses and midwives with knowledge and skills enables them to provide sexual health information and, if the counselling and clinical components are completed, clinical services to their clients and patients. The theoretical component was presented twice this year and in each course the participants worked hard to make the most of the learning opportunity, sharing expertise and experiences from their own practice and putting the information provided by the many experts who present the sessions of the course, into the context of their own nursing practice. There were 23 participants who attended the theoretical component this year.

As usual all nurses at SHine SA have been involved in the course this year. Some as session presenters in the theoretical and counselling components of the course and all have been clinical teachers and preceptors. SHine SA nurses are excellent clinical teachers, not only of sexual health knowledge and skills, but they also teach participants to provide respectful, non-judgemnetal, caring and empowering clinical services. One of these clinical teachers, Marg from the northern team, who has been sixteen years at SHine, retired in April this year.

There were nine participants who completed the clinical component in 2004/2005, and there has been much interest from prospective participants who aim to undertake the clinical training over the coming year.

The evaluations from the nurses following the completion of their two week training, indicated that all felt that they had a very good orientation session with the preceptor, most found the session with the Gynaecological Teaching Associate to be a helpful, learning opportunity, although one felt a little uncomfortable with the session. Although some found the overall clinical experience to be stressful, others "loved it" and

confirmed for them that this was the work they wanted to do. They all found their clinical teachers to be "fantastic", "supportive, friendly and knowledgeable" and all found that working with different nurses with different styles useful. There didn't appear to be things that could have been managed differently, and all found the ongoing evaluation to be useful. All participants gave individual feedback to their preceptors.

Following the first **Pap smear providers course** in June 2004 four practice nurses from rural areas have completed the clinical component of the course. In April of this year, following the announcment of the Medicare rebate for practice nurses in rural areas to do Pap smears, a course, which was supported by the SA Divisions of General Practice, was provided in Whyalla by Meredith, a SHine medical practitioner. From this course three practice nurses have completed the clinical component at SHine SA. There were also three **Pap smear theory courses** provided to midwives at the Women's and Children's Hospital by Katrina, the Coordinator of Nurse Education, and Sonia a SHine SA nurse.

The Coordinator of Nurse Education has been involved in the education of community members, nursing, medical and pharmacy students, in a variety of community, including the Cancer Council SA, tertiary and hospital based settings.

A clinical update was held on 22nd September 2004. Topics included gentetic counselling, sexual health clinical practice issues which included: pathology: what swabs for which tests, serology test: false negatives and false positives, discussions of the issues of breast examination and ovarian cancer and pelvic examinations. This day was attended by 32 nurses.

SHine SA nurses have a peer review of their clinical skills every 18 months, and during this year have provided a peer review of clinical skills to three registered nurses from other organisations.

The Coordinator of Nurse Education has been an executive member of the Australaisian Sexual Health Nurses Association Inc. which has exposed SHine SA nurses and nurses from the **Sexual health nurses & midwives network** to national issues for sexual health nurses.

Prue

#### Why we work with this community ...

SHine SA recognises the importance of developing the knowledge, skills and confidence of professional groups around sexual health so they have the capacity to provide good, quality services and programs in their local community.

#### Worker porfolio

As a result of the consultation conducted last year with SHine SA staff in relation to the capacity building of workers, a report was written which will contribute to the *Strategic directions* and our work with workers for the period 2005 - 2008.

Over the past year a new group was established within SHine SA for workers who work with young people at risk. This group will provide a link between the work of the Primary Health Care Teams and the Coordinator of Youth Sector Education. The group will provide a venue for staff to discuss research, issues that arise in their work with young people and their workers and provide a review process for the course content and delivery.



## and Workers

#### Medical education

Medical education, part of the Professional Education and Resources Team at SHine SA, reaches parts of the health care practitioner training that other disciplines don't touch! We now teach contraception to both Flinders and Adelaide medical students and this year have also been placing medical students in clinics for sexual health care experience. This has included much appreciated six week placement of final year medical student, Alex Stevenson. The third year pharmacy students attend SHine SA for a mass tutorial on contraception, stretching our resources of Pill swatches as we try to make sure that the workshop is practical and relevant. It's good to see that increasingly the graduates who emerge reflect our teaching and this is an excellent platform from which to advance the standards of the post graduate teaching.

The main post graduate teaching comprises the **Introductory** course in sexual and reproductive health, a two day course, which is delivered to all of the general practitioners in training during their first term of placement in the community. This year the Certificate in sexual and reproductive health, the extension of the introductory course, had a record 15 participants most of whom were general practitioners in training, but also some experienced general practitioners wanting to brush up on their knowledge.

The certificate course is enlivened by the input of various experts in the field such as Dr Christine Kirby from Repromed, Ms Trish Neumann, physiotherapist, Dr John Bolt, urologist, Dr Jane Wood, gynaecologist, and Dr Priya Selvanagayam, dermatologist. The IT support and extensive resources make this a very interactive hands-on experience for the participants, who can follow up the course with the clinical component to receive the nationally accredited certificate.

The medical education co-ordinator, Katrina, is well supported by the other members of the education team as well as contributions from the clinicians, nurses and doctors, who cover

the various aspects of training health practitioners in the art and science of sexual and reproductive health care.

This year will see further outreach to general practitioners as we have been asked by the local medical indemnity organization, Medical Defense Association of South Australia Ltd (MDASA), to offer re-training in intra-uterine device (IUD) insertion as this procedure has become more accessible to general practitioners. We hope to facilitate the re-introduction of this into the domain of ordinary general practice.

Within SHine SA we have continued to offer the education meetings primarily attracting the clinical staff at SHine SA, but open to other staff and the various other general practitioners and organisations with an interest in sexual and reproductive health. This year's meetings have included a profoundly moving discussion with Mr Alan Jenkins, who works with young men who have been convicted of a sexual offence. It was an illuminating insight into the world of individuals who affect the lives of our patients though are rarely our patients themselves. Dr Ann Olsson was the centre of a broad clinical exploration of the investigation and management of bleeding on progesteroneonly contraception and we are looking forward to a lively sessions on Sexual health and mental health (August 31st) with Ralph Brew and Dr James Hundertmark and in November Dr Leslie Shoorne will take us through the long awaited new cervical screening guidelines. These sessions would not be possible without the generous contributions of the various experts in their field who guide our exploration of these topics.

Medical education continues to strive to 'train the doctors' so that the standards of sexual and reproductive health care in the community are constantly being revised and improved. In this practice we are encouraged and informed by the clinicians, nurses and doctors and counsellors, who offer such excellent care in our clinics and are an important part of our teaching team.

Katrina

#### Youth worker education

education. Jill Reynolds was in the position until March 2005 when she left to join the **share** team in the southern region. Lud Allen then became the new coordinator. He comes to the position after many years in community services working with at risk young people, people with a disability and impoverished communities in Indonesia.

The six day accrediated **SE&X course** has been delivered in the regional areas this year to improve access for workers to the course and also to strengthen the links between youth sector workers locally and SHine SA's primary health care teams.

Whilst there have been some changes to the course, the content still addresses the needs of workers working with young people defined as 'at risk'. We identify those young people as:

- unable to access information regarding relationships, sexual health and wellbeing
- unable to access resources and/or support to implement their relationship, sexual health and wellbeing strategies
- at a higher risk of sexual assault than the general youth
- at a higher risk of unplanned pregnancy than the general youth community
- having insuffient relationship, communication or interpersonal skills to manage their relationships, sexual health and wellbeing
- having insuffient decision-making skills to manage their relationships, sexual health and wellbeing.

Since moving the course to the regions, Jill ran the first two days of the northern region course in March '05 with Juliet Watts and then handed over to Lud and Juliet who ran the last four days in April and May '05. There were 10 participants who came from a variety of youth sector organisations including community work. accomodation, disability and SHine's Y@s. A number of workers education. have and/or intend to do a project for their assessment in order

This year there have been two coordinators of youth sector to gain accreditation. The course will also run in the southern region in August-September '05.

> Y outh sector sexual health update numbers continued to grow reaching workers across metropolitan and rural areas. A new pdf format for the SE&X network newsletter has been developed and had its first "mail out" in June

> We continue to develop workshops in partnership with other youth sector organisations to build the capacity of youth workers to deliver sexual health and relationships work with young people.

> Jill enjoyed her time as coordinator and recogised there is some great work happening across the State.

> Since Lud started as the coordinator early March many things have been happening. SHine SA has been approached by workers in the south east of the State to run a customised **SE&X course** specifically for their needs. This will occur later in the year and be run in Mt Gambier.

> The course as it existed needed some modifications to meet the needs of the youth sector industry. Apart from updating statistical and empirical information, the course has been re written based on participant feeback.

> As part of a LearnScope project (LearnScope has been part of a national strategy to increase the capacity of vocational education and training (VET) professionals to use flexible learning approaches and new technologies in the delivery of training), the **SE&X course** is being developed into a format that can be accessed online either as a pure Internet experience or preferably as a blended learning opportunity.

> With the changes that are occuring the SE&X course has aims to become the benchmark for youth sector sexual health

> > Jill and Lud

#### Disability worker education

It has been a busy year for training and development in sexual recent years in working with people with a disability, is now health in the disability sector. John McKiernan, who was the Coordinator of Disability Worker Education, delivered accredited training and assessment in 2004 to one intake of students as well as numerous tailored training programs to many parts of the disability sector. These included a range of workers in the Riverland, Adelaide based accommodation services, and volunteers at Holiday Explorers. Provision of training sessions at Technical and Further Education community services courses continued and there is an ongoing commitment to presenting at Flinders University in their disability studies program.

A six day accredited training course was planned to start early 2005, but low enrolment prevented this going ahead. However, at the time of printing, this course will be in progress with ten participants.

With John's leaving in late February, a significant advocate for people with a disability and contributor to training and development was lost to SHine SA and a gap occurred in disability sector training provision until the appointment of a new coordinator.

Ralph Brew, who has worked as an educator and community worker in sexual health for many years with a strong focus in

in the position.

Ralph has a keen interest in the sexual health issues in the mental health sector and helped arrange a symposium Scared to Talk about Sex? and a fullday workshop Why Sexual Health Matters with Maxie Ashton and Paul Nestor at the national mental health services conference in August 2005.

As well as an ongoing commitment to be responsive to the needs of the disability sector, potential areas for work over next twelve months include training provision to staff in special schools, accommodation services, brain injury services and the mental health sector. There is also a need for parents and foster parents to get some development in sexual health issues and specific supports to be put in place to assist their attendance. Training is usually conducted in partnership, so managers and workers in service agencies can expect a consultative process which expects one or more staff to take a central role in supporting this training

Please feel free to contact Ralph to discuss any particular training needs by emailing ralph.brew@health.sa.gov.au or phoning

#### Indigenous education

SHine SA offers accredited courses in the area of **women's** sexual health care and men's sexual health care for Aboriginal and Torres Strait Islander workers.

In 2004 the men's course was run from the 11 to 18 August and had seven participants. As with all the Indigenous courses, people came from a variety of locations including rural, remote and urban areas. The men's course was coordinated by Warren Miller, the men's worker from Ceduna Koonibba Health Service who kindly released Warren to do this work to cover a vacant men's position at SHine SA. This course was very successful and Warren also completed follow up with participants to assess how they used the knowledge and skills back in their communities.

The working relationship with Warren will continue as he has recently been employed by SHine SA as the Coordinator of Aboriginal Men's Education and in this role will be offering accredited and non-accredited training, as well as community education and support to improve Indigenous men's sexual

The Indigenous women's course was facilitated by Ros Pierce and had eight participants. Three of these participants came from Aboriginal Health Services in other states. The women in this course appreciated the opportunity to improve their knowledge of sexual health topics, but also to share experiences of working with communities on sensitive, and at times difficult, issues such as violence and abuse. The assessment process for this course is still continuing.

Another outcome of the Indigenous women's course is the development of culturally appropriate educational materials that are used in the course. These should be completed by the end of 2005 and include a story telling approach to explaining body changes in females and issues such as contraception and pregnancy.

Sally

#### Nurses put men's sexual health on the agenda

On the 18th November 2004 the **Sexual health nurses** Despite all this, men attend health practitioners 40% less than **network** had a very interesting and enjoyable meeting at SHine SA on the topic of men's sexual health. The main presenter of the evening was Stephen Carroll, who I had heard speak at the ASHNA conference in Sydney in October 2003. I spoke with Stephen following his presentation at the conference and asked him if he ever came to South Australia to contact me as I thought the nurses from South Australia would enjoy hearing him speak. Luckily Stephen came to Adelaide for the Ring Cycle and was kind Following Stephen's presentation we had a panel of speakers enough to speak at our network meeting.

Stephen is an interesting and highly entertaining speaker and many of the 30 nurses who attended wrote in their evaluations that they could have listened to him speak for longer. Stephen spoke of the issues for men, for example men:

- are over represented in severe mental health services
- die up to 10 years younger than a female counterpart
- make up 80% of victims of crime
- are the largest consumers of alcohol and other drug
- make up over 92% of prison inmates
- and have higher rates of sexually transmitted infections than women.

Stephen discussed psycho-sexual problems of rapid ejaculation, delayed ejaculation, erectile dysfunction, polymorphodysphobia and disorder of desire and the possible treatments of erectile disorders. He also discussed depression and sexual dysfunction, the 'Male Deficit Model' and much more.

that included a doctor from a youth health service in Adelaide who works with young men, a young PhD student who is doing research into men's health, a young man from the community and of course Stephen. The panel spoke of some of the ways in which they work well with young men and there were ideas discussed that could improve the practice of sexual health nurses. There were a few male nurses in the audience who contributed well to the discussion.

This meeting provided an excellent end to a series of professional development evenings for sexual health nurses held in South Australia during 2004.

Prue

#### Nurses network welcomes midwives

changed its name with the members agreement, to reflect the nationally recognised difference between registered nurses and midwives. The network is now the **South Australian sexual** health nurses and midwives network. The aim of the network is to facilitate cooperation, networking and partnerships amongst South Australian nurses and midwives by providing a forum for professional development, discussion and action to improve the sexual health of the community.

Members have access to four meetings a year plus a variety of online journals through an email distribution list sent out by SHine SA's librarian. We are grateful to Sharon for her support and interest in the network and its members.

The South Australian sexual health nurses and midwives network organising committee, which is facilitated by the Coordinator of Nurse Education, includes nurses and midwives from a variety of organisations who are passionate about being involved in the network, many in their own time. Each member of the committee assists with the meetings which contiued to maintain interest and they were well attended with an average of 25 nurses and midwives to each session. We are grateful to the many presenters and thank them for sharing their expertise with us.

The topics this year have included:

- In February 2005 the **Sexual health nurses network** . Treating menopause symptoms with out HRT and polycystic ovary syndrome: current assessment and management which was an interesting and informative evening with implications for nurses clinical practice
  - Men's sexual health, where a Sydney psychologist gave a very interesting and enjoyable presentation which was followed by a panel of different men's health workers
  - a visit to Repromed and a discussion of the issues for subfertile and infertile people which provided some good resources for nurses and midwives
  - the nurse practitioner process, where two of the first nurse practitioners in South Australia (one who is a member of the network) shared their experience of the nurse practitioner application process.

From the evaluation at the end of 2004 it was seen that Wednesday was a good night to hold the meetings. All had enjoyed the meetings and thought they were well organised. Some of the comments include:

- 'I have really enjoyed the SHNN, and I find the networking and food prior is a great opportunity.'
- 'This is a great opportunity to hear a broader perspective on topics that are relevant but which may not directly impact (or only infrequently) on practice. I have enjoyed the meetings and found them worthwhile.'

Prue

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## Primary health care teams



## North



#### Team manager's report

SHine SA's northern team has now been located in Davoren Park for two years. The centre is well established in the community and is involved in many local initiatives.

A partnership between Swallowcliffe Schools, Playford Community Health Centre, Northern Area Community and Youth Services, SHine SA and more recently Para West Adult Campus has been developing for the past two years. Known as the Swallowcliffe Community Campus Partnership, all the services bar Para West Adult Campus are within a 50 metre radius of each other. The partnership has developed a memorandum of understanding and supporting procedures to faciliate ease of access for community members to services in the area. The group is advocating for increased services in some areas as identified by the community and is currently negotiating with the University of South Australia to provide counselling for

The team is also an active member of the Northern Regional Youth Services Planning Group and resulting working parties. Together with agencies who provide services to young people in the north, SHine SA works to improve access to and coordination of services to young people.

Through the Northern Adelaide Health and Wellbeing Project, the University of South Australia have developed a partnership with services in the Davoren Park area with the aim of providing quality palcements and experiences for UniSA students. It is anticipated that the placement of students in the north will encourage students to work in the area when they enter the workforce and also model the opportunities available for education for the community. The northern team is part of this partnerhip and is committed to providing palcements for undergraduate students.

The past year has seen a significant amount of staff changes. We said farewell to Marg Barter who worked as a community health nurse in the northern team. Marg had been with SHine The northern team has also been involved in a number of SHine SA for 15 years and was a nurse with the highest level of skills and knowledge. Priscilla Dunk, a sexual health counsellor, has moved into a different field of work. Miriam Rosenzweig has taken 12 months leave as the north's administrative support worker. Rob Gerrie, who had been employed in the northern team for over three years on contract work, successfully gained a position in SHine SA's east/west team. These workers are missed by the community and team alike.

Although the team said farewell to some, they also said hello to

northern team counsellor Priscilla. Priscilla left this position to

take up another exciting opportunity at Flinders University and

we wish her well. The team was lucky to have Anita as a part

time counsellor who worked with the team a few years ago.

More recently, we have also been extremely lucky to re-employ

Tracey. It is fantastic that she was happy to return to our small

counselling team, and continued with providing a service in

All counsellors at SHine SA receive supervision externally. Over

the past year, the team has also implemented a new 'peer

review' procedure whereby counsellors annually present on their

work to other members of the counselling team. This ensures that

counsellors are regularly engaged in discussion and analysis of

the northern office.



new staff. Joining us this year are Tracey Greaves, who replaces Priscilla as the team's sexual health counsellor, Gerri Connell who is the HYPE project worker, Mina Barling, as both a student and HYPE project assistant, Dawn Brown employed as clinic receptionist and Derek Forbes, an Aboriginal trainee in youth work. The team has also had on placement during the last 12 months, Catherine Earl and Sarah Martin from Flinders University, Mina from Adelaide Uni and Leisha Olliver from UniSA. The involvement of students in the work of the team brings both new energy and a new perspective to our work and I believe is a mutually rewarding experiance.

SA inititated projects, including **HYPE**, **RESPECT** and the Wiltja nroject. Other local projects in partnership with other agencies in the north include, **Talking realities**, **Caclew Arts Project** and **Keeping it together**. Reports on these projects can be found elsewhere in this Annual report.

The past year has been busy and rewarding and sees SHine SA firmly entrenched in the local community.

Counselling changes in the north During this past year we have been sad to say goodbye to our their practice, dilemmas that arise and new ways of working.

During the past year, the counselling team also arranged for an 'inservice' training session which explored a basic understanding of energy principles. The workshop also covered education and experiential learning of specific techniques such as breathwork, bioenergetics and visualisation. The workshop provided an opporunity to educate SHine SA counsellors on the interrelationship between mind and body issues. This kind of work can assist clients who wish to become more connected to, or to improve their relationship with, their bodies. Training has continued to be exciting for us to be involved in, such as the 'Cultural competence and working with HIV' workshop, run by Relationships Australia this year.

Jo

#### Steady as she goes for northern clincs

region has remained steady. The northern team offers seven clinics held over every day except Wednesdays. Four of those a clinic on Monday afternoons in the Modbury area.

Clients at Davoren Park routinely have a two week wait to attend the clinic, staffed by a doctor and community health nurse for all services except for Thursday afternoons, which is a two-nurse clinic. We're happy to say that there is an increase in attendance by clients from the local area. Clients are presenting with increasingly complex issues and many with multiple issues.

Self-referrals to clinics is the most common, but there are also many referrals from local doctors for Pap smears and contraceptive advice (usually about intrauterine devices or Implanon). Overall there is an increase in women attending for contraceptive advise and postnatal checks, quite often referred In addition, fifth year medical students undertaking Obstetric and from the Lyell Mc Ewin Health Service.

Two female doctors staff the youth clinic at Shopfront Youth Health Service at Salisbury. This clinic has remained popular with young people and the appointment wait is usually only one week. The clinic at Modbury situated in the Tea Tree Gully Health Service has a longer appointment waiting time of four

Clients from culturally and linguistic diverse backgrounds

The number of clients attending clinical services in the northern frequently access clinics with the assistance of the interpreter service. Clients have attended from Iran, Africa, Vietnam, Cambodia, Russia, Turkey and Spanish-speaking countries. clinics are at Davoren Park, with a youth clinic held at Shopfront Clients with a range of disabilities also access clinical services, Youth Health Service at Salisbury on Thursday afternoons, and some present with their workers or carers. Davoren Park is the only SHine SA site in the north that has an electronic disability bed for safe access and transfers.

> An ongoing role of clinical services is professional education and training. This year there have been a number of participants completing the clinical placement with the northern team to attain the Clinical component of the Certificate in **sexual health** for registered nurses and midwives. They have come from Adelaide metropolitan area and as far as Leigh Creek and Port Pirie. Nurses involved in the new Pap smear provider course who are from Kimba, Whyalla and Bullaroo Centre have also been supported and trained.

> Gynaecology with the Lyell McEwin Health Service and Modbury Hospital have attended a one day workshop on contraception and unplanned pregnancy with a community health nurse and doctor. Students are able to observe a clinic session in the north after completing the workshop. GPs who are completing the **Certificate in sexual and reproductive health** are also supported with sessions made available for their facilitation and training in the northern clinics.

> > Annette

#### Northfield Women's Prison clinic

This is the second year that SHine SA has provided a clinical service on a weekly basis at Northfield Women's Prison. The clinic is funded by Prison Services and is staffed each Friday morning by a SHine SA doctor and community health nurse with support from the prison health staff.

The clinic is well supported by clients, with attendance averaging eight to ten women a session. Through discussion with prison staff, all new admissions are seen for a women's health assessment. This has provided an opportunity to disseminate sexual health information to new inmates and educate them on their options for ongoing treatment, screening, follow-up appointments in prison and after discharge.

Issues covered in clinics are varied. Many women find this time in prison as an opportunity to attend to their health matters as many have neglected that aspect of their life. There are plans to introduce some open education and information sessions to inmates on issues around women's sexual health when space within the prison becomes available.

Annette

#### Disability training and workshops

The northern team supported the Coordinator of Disability Education to provide two days of training for workers working in a variety of settings within the disability sector. This training held in the Riverland was accredited to Certificate 4 Community services - disability. This was the second time the training had been run in this format and was going to be used as the basis for further training within TAFE SA.

We also provided a one day program for students at Salisbury TAFE who were completing their Certificate 3 Home and community care. Many had expressed an interest in working in the disability sector and the workshop provided them with some of the challenges of working in the area of sexuality and

A morning training and development workshop was provided for workers working in vacational care and after school hours care. Workers had requested some training so they had the necessary skills to address some of the challenging behaviours that young people were presenting with within the two care situations. The workshop was arranged through Inclusion SA.

This year we have been providing support to UNCWPA to develop guidelines for workers in respectfully addressing issues of sexuality with their clients.

We also participated in another successful couples group at Salisbury. This is a joint collaborative project with IDSC, Relationships Australia, SHine SA and of course the couples attending. It is hopeful a manual will be available soon.

We found ourselves back in the country again providing workshops for young people who are participating in job readiness programs which will enable them to enter the workforce. We provided programs at Port Pirie and Port Augusta. which provide an opportunity for the participants to gain much needed knowledge on sexuality and relationships.

We headed up to the Laugh and Learn group in the Barossa for five weeks and had a great time discussing friendships and relationships, feelings and emotions, communication, expectations of being a woman/man, sexual responsibility

We were also invited to spend time with a group of female students from Golden Grove High School who were wanting some information on sexuality and relationships within a singlesex setting. This went well and both students and teachers were more informed by the end of the sessions.

As well as this we have continued to provide one-to-one information and education sessions to a number of clients throughout the year. We have also supported workers and teachers across the region to provide sexuality and relationship information to their clients and students.

Juliet

#### Introducing Tracey

Hi, my name is Tracey and I am working as the sexual health counsellor in the northern team. I am employed currently on a contract basis working two days a week until November. I hold a substantive position with the Northern Metropolitan Community Health Service where I have taken leave to undertake an Honours thesis as part of the Bachelor of Social Work.

I have been working in 'the field' for approximately 16 years and have worked in youth, women's health, women and children's advocacy, sexual health and research sectors.

This is my second time around at SHine SA. I was seconded to SHine SA for six months in 1999 as a counsellor. The northern team has certainly grown since I was here last, with at least double the staff. The northern team is a hub of activity and it has taken me a while to get my head around the numerous projects currently on the go.

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## Primary health care teams

## South



Members of the Southern team

#### Team manager's report

which is home to community health workers, community health nurses, a sexual health counsellor, a **share** project coordinator, an administrative support worker and a team leader. The area covered by the team covers the southern metropolitan area, the hills mallee district and the south east, so in essence we cover from Greenhill Road south to Mount Gambier!

The sexual health counsellor sees clients at the community centre, however the clinical services are not offered from the Woodcroft site, but are delivered from Noarlunga Health Village and Flinders Medical Centre. All southern clinic appointments are made through the Woodcroft office. We have experienced some difficulties in providing our full quota of clinic services this year as there is a severe shortage of doctors who are willing to work in the south. Increasingly we are seeing clients in our clinics with more complex issues, multiple disabilites and mental health issues which require more worker time and clinics are heavily booked.

Young people continue to be a big focus for the southern team and our geographic area has some of the highest rates of young people per capita. As well as working with the **share** coordinator to support schools, the team has been very busy offering community development programs to young people at risk. We are lucky to have a community health worker whose job it is to work with young men, and a program has been developed (**Choice**) specifically aimed at young men at risk. There are plans to develop networks and a program for young fathers.

Some highlights of the year have been working with young people at Big Day Out, Schoolies Week, Youth Week and Sexual Health Awareness Week health promotions. Like all SHine SA primary health care teams, we are lucky to have a

The southern team is based at Woodcroft Community Centre very committed and enthusiastic Youth Advisory Team, with members attending meetings during the year as well as getting very involved in attending health promotion events and talking with other young people.

> We have formed close links with other southern agencies who work with our communities of interest and staff members are also involved in a range of forums and networks specific to our communities of interest including:

- involvement in the Southern Reconciliation Day celebrations, Nunga lunches, young people's programs and working with SWCHC to organise a Pap smear and pampering day have been highlights of the team's work with Indigenous
- involvement in delivering anti-homophobia workshops to a range of young people and working with schools to ensure that homophobia is addressed
- two team members worked with young people from culturally and linguistically diverse backgrounds and delivered a **Just chillin'** program which the young people were very happy with
- programs, consultations and support have been given to community and workers in rural areas
- work with people with disabilities, parents and workers in the disability sector and at times the demand has been more than a small team of people can cope with and we continue to work closely with parents and workers to support them to also do some of this much needed work.

This has been a very brief overview of the southern team's work. The team is very dynamic, enterprising and creative, supportive of each other and passionate about the work that they do.

#### Supporting disability clients

rewarding part of the services offered by SHine SA's southern team. Since the review of disability services there has been an increased profile within the disability section, this has also provided us with more requests to work with people with

Requests for one-to-one education and group work continue to very much part of our work load. A range of services has been offered to individuals, carers and parents and their willingness to learn and gain skills has been exciting to witness.

Parents are a great resource in providing information about sexual health. Email and phone conversations with parents have been a way that the southern team can support parents to speak confidently to the person in their care.

Early this year a program was facilitated for IDSC options coordination in Murray Bridge. The four-week program covered self-esteem, safer sex, healthy relationships and protective

Meeting the needs of disability clients is a challenging but behaviours. The group of young women, aged between 13 and 19, attended an information day with a parent or carer prior to the course.

> Another disability course was held at the Mitchell Park Neighborhood Centre. This program was for a group of young men and women attending the lifestyles workshop. The participants, aged between 25 and 45, learnt about safer sex and boundaries within relationships. Other topics covered were self-esteem and reproduction. The fourth week proved to be lots of fun, with group members participating in a quiz game called Who wants to be a sexpert.

> As a team we have also continued to consult with workers in the disability field to provide them with resources and support to assist them to work with their clients. This has also provided fantastic network opportunities.

> Our work continues to be exciting and enjoyable in the area of disability programs we provide.



#### Clinical services in the south

The southern team provides a clinical service to clients at the Noarlunga and Flinders Medical Centre clinics. Demand for doctor appointments has increased this year, particularly for procedures such as Implanon (the contraceptive implant) and insertions of intra-uterine devices such as the Mirena. The increased demand for procedures has proved to be quite a challenge, as recruiting new doctors has been difficult. We have adjusted our consulting times, but waiting times have increased.

The purchase of an electronic Gynaeflex examination couch at the Noarlunga clinic has benefited clients undergoing procedures. It also provides more accessibility and comfort for clients presenting with a physical disability.

The two nurse clinics in Noarlunga continue to be well attended and give the nurses an opportunity to extend their practice. Client feedback about our nurse clinics has been very positive.

Clients come to the clinics with a range of sexual health and

social issues. Clinic staff continue to build networks with other agencies to ensure clients are given appropriate local referrals. Small groups of school students and young people at risk, coming from as far away as the southern Fleurieu region, have visited the Noarlunga clinic on non-clinic days to find out about our services. This provided them with a fantastic opportunity to be introduced to youth-friendly services that they can access in the city.

Young men continue to regularly drop into our clinic to access condoms. This provides them with the option to find out about our other services and the information available to them.

Clinic staff have provided training to several visiting doctors, nurses and medical students this year enabling them to gain experience in dealing with a range of sexual health issues. A couple of the nurses have come from remote areas, one being from as far away as Alice Springs.

#### More men are accessing counselling in the south

Counselling in the southern team continues to be busy with only extend our skill levels, but enable us to work with specific that our waiting time is shorter in the south than with the other counsellor in the northern region has also been great. SHine SA teams. There has been an increase in young men requesting counselling. It's been fantastic that more men are using our service for their sexual health needs.

Some of the main issues presented were vaginismus, unplanned pregnancy and low sexual self-esteem. As many of our referrals come from our Sexual Healthline and clinic services, clients have already had an assessment, which streamlines the appointments and ensures that clients have had an appropriate the referral, assisting us in our intake system.

As a number of clients are either at work or doing some education, we have continued to find that email provides some support or flexibility for them to receive services. Email also is quick and easy when changing appointments. If clients are not able to attend they can also access support or assistance where necessary via e-mail or telephone.

The role of the counsellors always includes other aspects as well as counselling like health promotion. Events such as Youth Week are always a winner! It is great to do a range of activities that not

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requests for sexual health counselling. We have been fortunate communities. Being a part of the interviewing process for a

Lyn

#### Therapeutic counselling across all teams @ a glance

There were 168 therapeutic counselling clients who received 499 services for the 2004/2005 period. 77% of clients were women and 21% were men

Top three reasons for attendance were:

- vaginismus (13%)
- sexuality issue (11%)
- sexual relationship (9%)

Clients identified with the following community of interest:

- young adults 20 29 (32%)
- disability (17%)
- young people 13 19 (10.7%)
- gay lesbian bisexual transgender (7.2%)
- Aboriginal & Torres Strait Islander (1.7 %)

# Y@s learning more about STI's

#### Keeping the community informed

Throughout 2004-2005 SHine SA has continued to produce quality sexual health information for the South Australian community. SHine SA resources, including leaflets, are now also available from the website. The information is regularly reviewed and updated by SHine SA staff and consultants. The resources most commonly ordered this year were:

SHine SA bookmarks ....... SHine SA youth card ..... ....8820 Sexual health awareness week postcard (2005) .......6648 Clinic locations (leaflet) ..... Sexual health awareness week condom pack (2005) 6143

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 Male condom (leaflet) • Sexually transmitted infections (leaflet) .... • Tell it like it is (booklet) ....... Safer sex (leaflet) .....

The total number of resources distributed in 2004/2005 was Choices in contraception (leaflet) ......5517

## Primary health care teams



## East/west



Members of SHine SA's east/west team

#### Team manager's report

The east/west team continues to provide a broad range of services across the eastern, central and western suburbs to a range of people. The clinical services provided by the team continue to be in high demand with clinics being offered from Kensington, Port Adelaide, Gilles Plains and the city. Our partner organisation for the clinics at Gilles Plains and Port Adelaide is Central Northern Adelaide Health Service. The clinic at Gilles Plains, which only commenced approximately six months ago, has become well established in the local community thanks to the hard work of SHine SA staff, Central Northern Adelaide Health Service staff and in particular local women who have helped to spread the word. The youth clinic at Port Adelaide provides a valuable service to young people in that particular community and our sexual health counsellor also provides a youth counselling service on the same day which enables young people in the western suburbs to access a counsellor.

The Second Story Youth Health Service is where the city clinic is held and again this partnership is one we highly value. In fact our partnerships with a wide range of agencies and workers ensures an effective approach to offering sexual health services to many people.

The East/west Youth Advisory Team (Y@) has been involved in a number of activities over the past year. Their passion and commitment makes a big difference in our services to young people in particular and this past year they were involved in running a stall at the Big Day Out, **Sexual Health Awareness Week** activities and they ran an art competition as a health promotion activity in Rundle Mall - just to name a few. We have also had a member of the east/west Y@t on interview panels for new workers.

There have been a few significant staff changes since the last Annual report. Sally Gibson, who was team leader of the east west team for many years moved to being team leader of the professional education and resource team at SHine SA towards the end of 2004. Hot on Sally's heels Ralph Brew, who had

been a community health worker with east/west moved to the professional education and resource team to take on the position of Coordinator of Disability Worker Education. Both Ralph and Sally made a huge contribution in their respective roles and whilst they are missed it's great that they have only moved down the corridor! Desmond Ford took up the position of Team Leader and Rob Gerrie moved form the northern team to take up the Community Health Worker position. This position has a youth focus and Rob brings with him a lot of enthusiasm and experience in working with young people.

Elsewhere in this report a number of the activities have been reported on, but it is worth mentioning some of these again. The peer education project which Jacqueline and Miguel have worked on has seen a group of young people from culturally and linguistically diverse communities involved in a two week training to prepare them to go and speak within their own communities. Helen, who is the east/west **share** coordinator, has been working with a number of local schools as well as various health promotion activities across the region. Helen also takes the east/west team to regional areas including Port Lincoln and Peterborough. Members of the east/west team were involved in the development of My sexual health matters a resource for people with a mental illness. This resource is currently being evaluated and is in its second print run. The Sexual Healthline has been promoted to rural general practitioners as an important service for workers as well as community members. There are also a number of requests that come to the team on an ongoing basis to do community development work, oneto-one work with people who have a disability, run groups, health promotion activities, problem solving, speaking to school students and much more.

This is only really a brief snap shot of some of the work done by the team. The east/west team continues to be innovative, enthusiastic and creative in providing a unique range of primary health care services.

#### The team's work with people with a disability

The east/west team's work with clients with a disability has they watched a video especially designed for women with a continued over the past year. There have been six clients (all with an intellectual disability) requiring education sessions, with each client having from two to seven sessions depending on their needs. There are always a number of workers, carers and parents of people with a disability who phone for advice or assistance a support for each other. with resources. Some have received a one off session to get to know resources or assistance to develop their own course.

There was a delightful session with a small group of menopausal women with an intellectual disability living in semi-independent housing. They were expressing to their worker extreme mood swings, tearfulness, hot flushes and not understanding why they were feeling this way. After one session at SHine SA, where

disability and had the chance to talk about ways of coping with these changes, I heard back from the worker that these women were talking to all the women they knew of similar age that lived nearby about what they had learnt. They were now being

A lot of interest for the planned **Parent and carers education program** for this year proved once again to be small on numbers at the time of delivery. Although the course was of great value to the participants (two parents and two workers), it is felt that we need to consider how we might offer this differently so that it is more accessible to parents.

#### Counselling client feedback

Coming (here) has really opened up my eyes. I have learnt a LOT from books, videos and counselling. I can talk more freely about sex and decide what I can and can't do with my body. Sex is definitely taboo but I realise it is OK to do things like masturbate.. things you enjoy. Cos, quite honestly, I'd never in my wildest dreams think that before! I thought sex was bad or 'yuck'. My friends thought I was weird.

[Anonymous]

#### Clinical services

East/west clinic appointments continue to be much in demand and the majority of sessions are well attended. Unfortunately clinic appointments are often made four to six weeks in advance, which may account for clients failing to keep appointments and resources not always being completely utilised. Reminder phone calls to clients one to two days prior to their appointment do not seem to reduce the number of clients who do not attend.

East/west clinic staff provide a "drop-in" service for pregnancy testing between 9am and 5pm Monday to Friday. The emergency contraception is available on weekdays at Kensington, but clients must ring to arrange a time.

Demand for Implanon (progestogen contraceptive implant) has remained steady and Mirena (progestogen releasing intrauterine device) continues to be popular. The fact that these two methods provide highly effective contraception and are available for the usual price of a prescription makes them of interest to many women. Both methods require a clinic assessment visit and a doctor's prescription prior to insertion. Specific appointments for intra-uterine device insertion are available at Kensington on Monday evening or Thursday morning and at Port Adelaide on Wednesday afternoon.

The youth clinics offered by east/west are generally well utilised. Young people frequently come to clinics with complex issues which need longer consultations. An attempt is made to allow for this at the two clinics which are held each week. Young people with urgent issues are also usually accommodated. One clinic session is held at Second Story in the city on Tuesday afternoons. The other clinic is at Port Adelaide Community Health Centre on Wednesday afternoons.

The east/west Nunga clinic, formerly located at Port Adelaide Community Health Centre, has been relocated to Gilles Plains

Community Health Outreach and now has broader client access. It is held on Thursday afternoons 1 to 4.30pm. Indigenous women are the priority client group, but all women may access this clinic for sexual health issues.

People from culturally and linguistically diverse backgrounds are able to access interpreter services free of charge when they make appointments at any of the clinic sessions which are held on Monday evening or Thursday morning at Kensington, Thursday afternoon at Gilles Plains or Friday morning and afternoon at Port Adelaide Primary Health Care Centre. In recent months increasing numbers of women have been utilising the interpreter service at both the Port Adelaide clinics on Fridays and the Gilles Plains clinic.

The two nurse clinics which are held on Wednesday afternoons at Kensington continue to be popular with clients requiring health checks and time to discuss contraceptive and other sexual health issues. SHine SA nurses are working to broaden their scope of practice and thereby increase the services that can be offered to clients at this clinic. These sessions, apart from being used for clinical nurse training, are also being used to help skill the women who are doing the Pap smear providers course.

Professional education and training has a high profile in east/ west clinics which are utilised by visiting doctors, nurses, medical and postgraduate nursing students for gaining experience in working with sexual health issues. East/west clinical staff work with the clinical staff from the northern and southern teams of SHine SA to contribute their knowledge and expertise to clinical education. Staff work together to provide a high standard of client care and a client centred approach to service delivery in relation to clinic clients and clinical education participants.

#### Counselling services

On Wednesday afternoons, sexual health counselling `outreach' The counsellors continue to be involved in training and has successfully continued in Port Adelaide. This is offered at the Port Adelaide primary health care service to under 25 years olds and runs alongside a medical clinic offered to young people for sexual and reproductive health issues.

This counselling and medical clinic has continued to be an important service offered by SHine SA in the western suburbs. Young people are seen on issues ranging from coercion and sexual harassment, sexual and gender identity issues, sexual abuse/trauma, unplanned pregnancy and termination, to sexually transmitted infections and other specific sexual concerns (for example, pain with intercourse or erectile difficulties). People can come along with family or friends and services are free when clients are unable to pay.

Kensington clients were also lucky this year to have seen a familiar face in the counselling room. One of our most

respected past-employees, Wendy (who is well known in the field) returned for a three month counselling contract. It was fantastic having her in the workplace for this period of time and we hope she does not lose touch with SHine SA.

Work with young people has also included working with the Y@ and developing a flyer for the website on sex and the law (rights information for under 19 year olds). This flyer has been in the making for guite some time and it will be great to see it reach its conclusion to be available to the community.

presented in the **SE&X course** (for youth workers), registered nurses (theoretical) course, the doctor's courses and also at the University of South Australia social work course as well as other services.

The east/west team counsellor has been involved in training programs in relation to menopause which was a great opportunity for all workers who have attended. Other information sessions run in 2005 include one during Sexual **Health Awareness Week** for a support group at Eating Disorders Association of SA (EDASA).

The counselling team was also involved in a men's group which occurs once a year with men and partners who are dealing with issues around prostate cancer. This information evening is always full of stimulating conversations and shared stories.

Jo



#### A new clinic at Gilles Plains

This year SHine SA relocated one of their four clinics from Port Adelaide to the Gilles Plains campus in response to community need and requests. SHine SA's involvement in health education and community development at Gilles Plains has been increasing over the last three years, mainly with Aboriginal women's programs. A two-nurse clinic has been provided during 2004, but it soon became apparent that clients needed a more comprehensive health care including medical and referral services. The new clinic has been very well attended in 2005, and aims to meet the needs of many women in the area including Aboriginal, African, and Muslim women.

SHine SA clinic staff are working closely with the newly developing Gilles Plains Community Health Service and the other services situated within the Gilles Plains Campus. There is currently a review of the Gilles Plains Campus model evaluating how this model enables clients and workers to connect more easily between health, education and welfare services. It is exciting for Shine SA staff to be involved and welcomed at the Gilles Plains site, and join in the commitment toward meeting local and changing community needs.

Janet



## Organisational

#### Advisory committees

#### **Community health workers**

The Community health worker advisory committee meets up to four times per year to discuss standards of practice, training and development and quality assurance issues for community health workers in SHine SA.

Last year there were only two meetings due to sickness, country trips and workload committments.

During the year it was involved in:

- · finalising a peer review process which will be undertaken by each community health worker at least once every 18
- discussing and reviewing the community health worker
- the development of pre/post session debrief guidelines, provide a framework for workers who co-facilitate groups to debrief and give constructive feedback to each other.

Community health worker advisory committee also took the opportunity during the year to coordinate a resources "expo" for staff members. New resources from SHine SA's Resource Centre were discussed and out of date resources

#### Sexual health counsellors

The Sexual health counsellor advisory committee continues to meet quarterly to discuss issues around standards of practice, training and development, and quality assurance.

The past year has seen:

- · the sexual health counsellor manual revised and updated
- a peer review process developed by the counselling team
- participation in the development of guidelines and codes for statistical collection that reflect the scope of work for sexual health counsellors
- a review of written information for clients, used by the sexual health counsellors.

The sexual health counsellors continue to have eternal supervision sessions for debriefing, self-care, review of case load and stress management.

Also last year the counsellors participated in a three hour "body workshop" aimed at helping them understand the impact a person's body has on the cognitive view of sexuality. This provided the counsellors with the opportunity of learning to link mind and body together within the counselling role.

#### Medical

The **Medical advisory committee** (MAC) is made up of a doctor from each team and a management team representative. We review issues relating to clinical practice, professional education of doctors, research and SHine SA public information such as leaflets. Different members of the team take on various tasks as they emerge and each of us report back to our team as decisions are made. The committee meets on a quarterly basis and gains much from the experience of each member

The main activities undertaken this year have been:

- The completion of a peer review and education process for SHine SA doctors that complies with the continuing professional education requirements of the Royal Australian College of General Practitioners. As we were successful we are embarking on another such process for the next educational triennium.
- Overview of the training needs of the medical community and support of the appropriate response to these needs by SHine SA. In particular the development of a complete

training for the insertion of intra-uterine devices (IUDs).

- Partnership with the nursing and administrative staff for the revision of the clinic procedure manual which is now in a more accessible electronic form.
- Reflection on the impact on the organisation of any critical incidents which have occurred in the SHine SA clinics.
- Maintaining the clinical and teaching standards expected of SHine SA in the area of sexual and reproductive health.
- The development of tailored clinical education for several procedural country general practitioners to increase their skills in IUD insertion so that they can now offer this service to their patients.

Having an overarching committee to consider organisational standards and day-to-day practice ensures best practice and good communication within SHine SA.

Katrina

#### Nursing

The Nursing advisory committee (NAC) provides leadership in the area of sexual health nursing practice for SHine SA nurses. NAC has four key areas of work and each nurse on the committee takes responsibility for one area of work. These are:

- standards of practice
- training and development
- quality assurance.

The achievements of NAC during this year can be looked at under these four key areas.

#### Standards of practice

The SHine SA clinic procedure manual has been re-written over the last year and an electronic version developed. This huge task is now at the final stage of completion.

#### **Training and development**

In conjunction with Medical Advisory Committee (MAC), NAC has worked to extend the scope of nursing practice in the SHine SA clinics, with new Standing Drug Orders (SDO's) being

The annual cervix screening and sexual health update day was again very well attended with nurses and midwives enjoying the educational content and the networking opportunities. Topics this year included endometriosis, chronic thrush, starting contraception and issues for intersex people.

Quality improvement strategies for nurses at SHine SA include participating in a peer review every 18 months. Most nurses are up-to-date with this or will complete before the end of 2005. A clinical teaching self-evaluation is completed following the clinical teaching or preceptorship of nurses who participate in the clinical component of the **Certificate in sexual health course** for registered nurses and midwives. These activities are based on adult learning principles and provide good learning and clinical practice discussion.

#### Research

Areas currently being undertaken include research of clinic client appointment scheduling, waiting lists DNA's (did not attend) as well as the development of a resource for post-partum women. Nurses have also been involved with the IMAP study which is an Australia-wide study which is researching the psychological impact for women of an abnormal Pap smears result.

#### **Quality assurance**

An audit of the clinic client records was completed in mid 2005 and the clinic client survey was implemented.



Some of the community health nurses who work at SHine SA

#### Occupational health and safety

SHine SA's **Occupational health and safety committee** consisting of a representative from each team and a management representative, meets bi-monthly. Facilities audits are carried out annually and regular maintenance of plant and equipment is undertaken. As issues are identified the committee investigates and developes strategies to eradicate or minimise risk and monitors any actual or potential incidents.

A number of the committee have undertaken occupational health and safety representative training during the past 12 months and further training for management and representatives is planned for later in 2005.

Some of the outcomes this year have been:

the review of the policy and procedure manual

development of additional procedures where gaps were identified

presentations at whole of organisation staff meetings

production of a quarterly newsletter

organising fire evacuation and fire warden training.

Sue - OH&S Committee

#### Sexual rights and moral panic

Moral panics are alive and well in South Australia. Evidence Cohen attributed such reactions from prominent black leaders to of this can be seen in the paid advertisement taken out in *The* Advertiser on July 2nd 2005, by two Christian conservative groups which was headed "Hands off marriage Mr Rann". How can such they come from?

The International Association of Sexuality, Culture and Society recently held a conference at San Francisco State University which had the theme of sexual rights and moral panic. It was a timely conference to be held in the United States given the Bush administration's current preoccupation with resisting calls for gay marriage, funding "abstinence until marriage" education and restricting aid funding to those organisations who comply with the gag rule on discussion of abortion. I attended this conference to present on the campaign against sex education in South Australia in 2003 and in this article I will share my impressions of this conference and discuss how some of the issues raised relate in a South Australian context.

The concept of moral panic underpinned the discussions at the conference. This term was first used by Stanley Cohen in 1975 to describe reactions to youth delinquency but has been expanded in recent years to apply to reactions to sexuality based issues that can also be described as "sexual panics". Gil Herdt, one of the organisers of the conference, pointed out that paradoxically, the more a panic erupts and disrupts, the more it feeds attention to the very thing it despises, ultimately changing society. Conference participants drew on examples of panics created around abortion, adolescent sexuality, gay marriage, HIV/AIDS and trafficking of women to explore the social contexts and drivers of such panics.

Sonia Correa, a key note speaker from Brazil, commented that it is important to ask the question of what underlies moral panics. While on the surface it can often seem to be an expression of values held by those with particular religious views or an opportunity for media sensationalism there are usually other discourses that frame these panics. She pointed to the long lasting panic created by eugenics which is usually present in any discussion of reproductive rights. Who is fit to have children and who decides this?

This was a point also picked up by Cathy Cohen a Professor of Politics at Chicago University. In her key note speech on HIV/AIDS in African American communities in the United States Cohen analysed how black sexuality has been constructed as being unable to be self-regulated and therefore something to be feared and controlled. This is seen in popular stereotypes of the "welfare queen" and the "absent father". More recently there has been extensive media coverage of married black men who have sex with other men and then go home to the wives; a phenomenon known as being on the "down low".

Cohen was critical of the construction of the "down low" as something that only existed in black communities and something intrinsic to black men's sexuality. She argued that such rhetoric of blame shuts down the open communication that is needed if relationships are to be conducted in a spirit of "truth, discussion and support". She also expressed dismay that media fuelled panic can be created around such activity but not around the ever increasing HIV epidemic now taking hold in the black community in the United States.

In an interesting further commentary on the complex dynamics of racism in the United States, Cohen analysed a speech by Bill Cosby in May 2004 where he attacked black youth and their poor parents for failing to complete education and stay out of prison.

be a reflection of the way social mobility and respectability has become a site of resistance to racism. She drew a link between this desire for distance from negative black representations to deliberate attempts to create fear be understood and where do a failure of black middle class leaders to openly challenge the current complacent response to HIV.

> One important area where panic is easily created is around adolescent sexuality. One of the leading writers on sex education debates in the United States is Janice Irvine who argued that while the scripts of sex panics appear spontaneous they are in fact highly predictable and draw on strategic use of rhetoric to produce certain emotions. An example of this is the use of the term "child abuse" to describe comprehensive sex education thereby tapping into pre existing strong emotional reactions

> There are many parallels in the strategies adopted by the groups that opposed the sexual health and relationships education (**share**) project conducted by SHine SA in 2003 and those that support the abstinence movement in the United States. Irvine calls these "oppositional strategies" and they include describing education materials as pornography, constructing depravity narratives and targeting educators as being amoral and objects of blame.

> l argued in my paper that while comprehensive education is well embedded in State education systems in Australia, groups such as the Festival of Light have created a more visible conservative discourse that has the potential to limit the parameters in which that education takes place. The fact that some of those who were most outspoken against the **share** project eventually stood as Family First candidates in the 2004 Federal Election also signals the political opportunities that are perceived to be available by creating panics around issues such as sex education for those who want to impose conservative religious values on

These issues were further explored in a discussion forum I attended at the conference on sexuality education and abstinence. Those in this forum were primarily educators and researchers in the United States college system where sex education takes place to meet the needs of young people (aged over 18) who are leaving home for the first time. I heard numerous stories of how the students they are teaching arrive at college with very poor knowledge of basic sexual health issues due to the restrictions on education about contraception, condom use and sexual diversity that is currently in place in many United States schools. I also heard how some of these educators fear that they will become the target of a campaign by fundamentalist students or their parents if they talk positively of same-sex relationships or don't condemn sex before marriage.

As an outsider listening to these conversations, I felt extremely fortunate to be working in an environment where young people do have a right to access accurate information and where research evidence, rather than interest groups, underpins approaches to sexual health education in schools.

The conference in San Francisco drew people from all over the world who are interested in supporting social change that supports those people who are often the most marginal and disadvantaged in the community. If there was one main message to emerge from the conference it was that moral panics need to be understood in their full social and political context and resisted if human rights and dignity are to be available to everyone in

Sally

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## Information services



#### Library services

The library has had another busy year. The Kensington, Woodcroft and Davoren Park libraries all have free membership and the public are welcome to come in and browse and borrow. The Kensington library has an after hours chute to return books.

The library section of our website has been updated recently and hopefully it will be much easier to find what you are looking for. In the library section our searchable library catalogue can be accessed as well as our new books list, and details on how to join the library.

The Kensington library has a range of journals including Sex Education, Sexual and Relationship Therapy, Sexual Health, Contraceptive Technology Update as well as other specialist journals. There is a searchable database of indexed journal articles in the Kensington Library. Articles are not for loan but may be photocopied.

There has been an increase in the number of people using the library this financial year with over 264 new library borrowers registered. We have added 341 new items to the library collection and processed over 1,670 loans. Over 230 journal articles requested and processed.

Our library volunteers Robyn, Ann, and Noel have worked tirelessly on a variety of tasks and greatly assisted in the smooth functioning of the library and resource centre. Well done!

Opening hours are 9.00 am to 5 pm Mondays to Fridays. For more information please contact the Library and Resource Centre, Coordinator, telephone (08) 8364 5537 or email SHineSALibrary@health.sa.gov.au.

Sharon

Our library at Kensington



#### Resource centre

The Resource Centre has a large selection of videos and teaching resources which are available for loan to organisations and individuals in South Australia who have paid an annual membership fee.

The Resource Centre has its own section on our website. There is a searchable database, downloadable video and teaching resource catalogues, new membership and booking forms. This section also includes a list of the latest resources added to the catalogue.

Some of the new resources added to the collection this year include

- The anti-bullying game
- Building bridges: young men, sex and relationships education
- Cervical cancer: prevention and treatment
- Design and deliver: developing training programs in sexuality, sexual health and intellectual disability
- Family and friends
- Female reproductive system (jigsaw)
- Fired up: managing anger and strong feelings
- I have the right to be safe: flip chart
- "Red ribbon aware": HIV and AIDS education
- Sex safe and fun: reader's guide: a guide for supporting the *learning of positive safer sex messages*

- Stories of us: bullying (episode 1)

There has been over 2,292 loans processed this year and there are over 194 current subscribers. Members include 145 metropolitan based and 60 rural based organisations. The membership categories include:

- 10 Aboriginal health agencies
- 18 community health aervices
- 35 disability agencies
- 40 high schools
- 11 primary and r-12 schools
- 13 independent schools
- 9 women's health agencies
- 18 youth health agencies.

The remainder are private organisations, universities, government and non-government agencies.

Please contact the Library & Resource Coordinator on (08) 8364 5537 or email SHineSAResources@health.sa.gov.au for more information.

Sharon



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The new-look Youth Online @ www.shinea.org.au/youth

#### Our website gets a face lift

To coincide with Youth Week, SHine SA launched the new website on 12 April 2005 to highlight the new Youth Online site at www.shinesa.org.au/youth. The site was redesigned after consultation with SHine SA's Youth Advisory Teams. The vibrant and dynamic site is now a one-stop shop for all sexual health and relationships information for young people.

While most of the changes to the website were cosmetic, other new features of the redesign were developed to make information is easier to find, including:

- more information on special projects, with loads more photos and images
- a publications page a one stop shop for users to download any of SHine SA's resources and publications
- a courses and workshops section for workers to easily find the education information they need

pages that highlight the special work we do with our communities of interest

We would love to know what you think of our the site, so get online and have a browse at www.shinesa.org.au and then send your feedback to info@shinesa.org.au.

#### Statistics - from Feburary to June 2005

- 104,707 pages were viewed.
- Most popular searches were abortion (19.09%), contraception (15.11%) and Implanon (12.33%).
- Most popular publications downloaded were Information on abortion in South Australia (13.57%), Choices in contraception (12.86%) and Pregnancy options (8.57%)
- Most popular countries that accessed the site was Australia (44.84%), United States (44.09%) and United Kingdom

#### SHine SA's healthline protects confidentiality and anonymity

A telephone service for the purpose of sexual health enables the If you have a sexual health query you can also email it to caller to ask questions about an area of their life that they may have been too embarrassed to ask anyone before. In the private world of sexual relationships, the only gauge we get of 'normal' is from the media, which often leads to unreal expectations. A diagnosis of 'herpes' can seem devastating when first diagnosed, but talking to one of the sexual health nurses can put it into perspective and assist to cope with this news.

The Sexual Healthline operates between 9 am to 1 pm Monday to Friday excluding public holidays. Country callers are able to use the toll free line and the hearing impaired community can use the TTY. We will connect with the Telephone Interpreter Service if callers can tell us their phone number and their preferred language.

sexualhealthhotline@health.sa.gov.au. You question is also responded to during this daily session. Many of these queries come from people accessing SHine SA's website at www. shinesa.org.au.

The nurses who operate this service have a vast knowledge in sexual health and contraception, with a back-up of the SHine SA library, doctors and counsellors, if further information is needed. The wide variety of issues include contraception, sexually transmitted infections, pregnancy (planned and unplanned), sexual difficulties, puberty and menopause.

Sonia

#### Social work student

Hi everyone, I'm a social work student from Flinders University on placement at SHine SA in the north. For the past few months I've been working with Miguel and Jacqueline on the Greet, meet and date multicultural CD project. I was also involved in helping to organise the northern youth forum with the rest of the northern team and I'm about to start work on collating some of the Y@ information into a manual.

My time here has been really great so far. Everyone I have worked with has been friendly and helpful and they really seem to value my contributions. I just want to say a big thanks to everyone (especially those I've worked closely with, you know who you are) for making my placement an enjoyable learning experience!

Catherine

#### Glossary of terms

#### Lesbian

A lesbian is a woman who has attractions to/sexual relations with other women and identifies herself as lesbian.

with other men and identifies himself as gay. Gay is also used by some women instead of, or as well as, lesbian. Some women prefer to name themselves as gay while others prefer lesbian.

#### **Bisexual person**

people both of the same gender and other gender/s, and who identifies themselves as bisexual.

#### **Heterosexual person**

A man or a woman who has attractions to/sexual relations with people of the other gender and who define themselves

#### **Homosexual person**

A gay man is a man who has attractions to/sexual relations A man or a woman who has attractions to/sexual relations with someone of their same gender. While this term is sometimes used instead of gay or lesbian, the terms gay and lesbian are preferred by many.

A man or a woman who has attractions to/sexual relations with Intersex people possess either sex chromosomes and/or physiological sexual characteristics which combine both male and female attributes.

#### Transgender person

A person who lives, or wishes to live, as a different gender from the gender they were raised as, and who identifies themselves as transgender. Transgender may also encompass people who identify their gender as neither male nor female.

#### **Heterosexual dominance**

Attitudes and practices that reinforce heterosexuality as the 'right' or the 'only' identity or way of life.

#### Homophobia

This term could be literally explained as 'fear of same-sex sexuality'.

#### Queer

An umbrella term that includes a range of alternate sexual and gender identities, including gay, lesbian, bisexual and



## Sexual Health Awareness Week

#### Celebrating safety, pleasure and respect

**Sexual Health Awareness Week** is in its fourth year. It's also really positive to see that the number of organisations is While SHine SA coordinates this event, which runs from 14 to 21 February, its continued success is due to community support, participation and involvement. In 2005, Sexual Health **Awareness Week** reached over 5,000 people across South Australia who were involved in events that promoted sexual

This year's campaign had a strong focus on the prevention of sexual assault in an attempt to curtail increasing incidents of sexual assault among 18 to 30 year olds, a group most at risk.

The campaign committee, which included external agencies who work in the area of sexual assault, were invited to assist SHine SA to identify appropriate media messages, resources and achievable campaign strategies relating to sexual assault

The committee decided to focus on a positive message targeting young people that explored the issue of consent and increase people's understanding of safety, pleasure and respect in relationships. The messages were road-tested with SHine SA's Youth Advisory Teams and voted in the final slogan that appeared on all the promotional resources:

Safety + pleasure + respect, make sure it all adds up.

The young people also contributed to the development of the characters' dialogue and thoughts. Community grant participant, Yarrow Place, 'liked the fact they were sending important and basic messages in a clear way. [The resources] will be useful all year round, not only for promotion of SHAW."

Danuta Bezuch, a talented TAFE student, developed the artwork for the final resources, including condom packs, posters, t-shirts, fold-out postcards, balloons, lanyards and badges, which were distributed at SHine events all over the state.

This year we handed out 15,000 condom packs, thanks again to Glyde's wonderful sponsorship of **Sexual Health Awareness Week**. From the comments we've received they were extremely popular with young people. Many community grant participants reported that they gave away all their packs, as well as other resources, and would like to be able to order even more next year.

Over 100 different organisations ordered resources this year and we received very positive feedback. Bfriend 'loved the posters' and thought they were 'vibrant and fun as well as thoughtful.' Southern Youth X-Change thought the resources were 'very funky. . . really youth friendly and eye catching. We had lots of positive comments.' And according to Gawler Youth Advisory Committee 'the resources get better each year'.

Sexual Health Awareness Week also aimed to increase awareness of agencies who can provide sexual health information and services, so we distributed the Resources pack to agencies and community members, which included resource order forms from SHine SA's and other agencies, and information on sexual health-related services that are available.

Of course all of this information was available from SHine SA's website and to members of the Sexual Health Awareness Week email network.

#### Organisations' support helps to reach communities in need

The backbone of Sexual Health Awareness Week is the community groups and agencies who apply for the \$200 grants to run activities that promote awareness of sexual health issues. Without their support SHine SA would not be able to meaningfully reach so many people, particularly young people who are vulnerable and at risk or marginalised by services either socially, culturally, economically or physically.

As participant, Migrant Health Service said'it's a straight forward process that potentially connects community members to a week of innovative and informative activities related to sexual health'. And this year, for the first time, the event could occur any time in the month of February (in response to previous participants requesting more flexibility around timing).

The program allows community groups to focus on building the capacity of young people to respond responsibly to their sexual health, relationships and general wellbeing. The number of successful grants applicants increased to 64 this year. Nearly all reported that their event was a success and the events involved over 3,500 people throughout South Australia.

As a worker from the Kangaroo Island Health Service fed back about attending the KI Field Day to promote sexual health, 'I had a great response and a lot of interest from all ages and

gradually increasing and all participants would like to continue to be involved in Sexual Health Awareness Week. A worker from the Overseas Chinese Association stated 'I love to include this event as part of my yearly planning' and 70% of the organisations are now doing the same.

It was encouraging to see the diversity of the groups participating in the community events program again this year. The willingness of agencies to be involved enabled **Sexual Health Awareness Week** to extend its reach throughout South Australia, with over a third of events taking place in regional areas. Thanks to the support from SHine SA's Coordinator of Investing in Aboriginal and Torres Strait Islander Youth, for the first year we had a significant increase in participation from agencies working with young Aboriginal and Torres Strait Islander people which was great to see.

A breakdown of agencies running events that targeted SHine SA's communities of interest is as follows:

Community of interest Young people (general) Regional, rural and remote communities Aboriginal and Torres Strait Islanders Culturally and linquistically diverse communities People with disabilities Lesbian, gay, bisexual and transgender communities

SHine SA workers supported a number of agencies with their activities by helping plan and/or deliver education sessions or appear as quest speakers.

#### **Launching Sexual Health Awareness Week** with a forum on sexual assault prevention

This year **Sexual Health Awareness Week** was launched by Y@ members, Dave and April, who talked about some of the sexual health issues facing young people.

This was followed by a special forum on Preventing sexual assault, presented by SHine SA and the Statewide Sexual Assault Reference Group. The keynote speakers for the forum were Associate Professor Moira Carmody and Melanie Heenan.

Moira Carmody, the head of the Criminology Programme at the University of Western Sydney, explored how community education has been used to prevent sexual violence and provided a critical overview of past approaches in New South Wales. She argued that we need to rethink our current approaches to prevention to develop more positive ways of achieving intimacy,

Melanie Heenan is the co-ordinator of the Australian Centre for the Study of Sexual Assault situated at the Australian Institute of Family Studies. Her past work has been in examining criminal justice responses to sexual assault, and on monitoring legislative and procedural reforms designed to improve the law's treatment of victims. She outlined and critiqued current policy frameworks and approaches that are aimed at preventing sexual assault.

A panel of workers from South Australia, including Vanessa Swan, Director of Yarrow Place Rape and Sexual Assault Service, Detective Superintendent Grant Stevens, the officer in charge of SAPOL's new Sexual Crime Investigation Branch, Rob Gerrie, SHine SA's **RESPECT** project worker and Jane Fletje, SHine SA's Coordinator of Teacher Education then responded to the issue raised by the speakers.

After the panel, discussion was open to the audience to direct questions to any of the invited quests. With over 200 people in attendance, the forum generated a lot of critical discussion about the future direction of sexual assault prevention.

SHine SA would like to acknowledge and thank:

- Glyde Condoms for provision of 15,000 condoms
- Danuta Bezuch for her designs
- Fresh FM for radio sponsorship through advertising and their coverage during the week
- agencies and community groups who participated in the Community Grants Program
- all other organisations and agencies who supported **Sexual Health Awareness Week**
- Kerrynne Liddle, Media Advisor
- the Youth Advisory Teams for organising events
- all SHine staff who worked on activities during the

Finally, SHine SA would like to thank the South Australian community for getting behind this initiative. Through the hard work, support and participation of community organisations Sexual Health Awareness Week 2005 was a success yet again.



anel members at the Sexual assualt forum held during **Sexual Health Awareness Week** 2005

#### Village Tavern at Golden Grove

I found that this year was better than last year because myself and the other Y@ members had more experience, which helped us to engage better with the young people around sexual health issues. I found the crowd better at engaging with us compared with last year. I think that as Y@ members we should go to the Village again next year. It is a great place to hand out the **Sexual Health Awareness Week** resources to young people. Also they really appreciate what we are doing for the young people of the north. I find that this is a worthwhile thing to be doing in our community.

#### Pub planning

I rang the Southern Hotel in Gawler to ask if they were interested in being involved in **Sexual Health Awareness Week** this year. The manager was happy to do so, so we set up a time to show the manager the resources and arrange times to start and finish on the night to get the best use of the resource out to the public. This was a great chance to work with pubs around Sexual Health Awareness Week to get the message across to young people and also staff which work at the pubs. It was great to arrange an event and then be part of it too and see it work well. It creates ownership for us as Y@ members in the north to plan and then do.... and it all works...well

Count the condoms competition with northern Y@ members



#### Pub crawl

For part of Sexual health awareness week (SHAW), community health workers and Y@'s from the southern team decided to go on a pub crawl. We decided on where the hot spots were frequented by young people and we visited them, handing out condoms and lube, in our trendy little packets designed especially for SHAW.

When deciding on which pubs to visits, we looked at which ones were targeted last year and the popularity of each. As a group, we selected the Seaford Tavern, The Pier (Ramada Plaza, Glenelg) and The Victoria Hotel. These three places are very popular with young people on Friday nights and also covered a wide area of the south. Throughout the night, we managed to hand out over a thousand packs.

The majority of people were very taken by a free condom and happy to accept them. People thought it was a great idea and had a few laughs. All in all, the night I believe was a huge success. We got out there, promoted safe sex and SHAW and we all had a ball in doing so. Some people remember me when I'm out with friends but it's not a bad thing, because at least by seeing me it reminds them about safe sex!!

Playing the Basketball condom game



#### Involvement in Sexual Health Awarness Week

I was involved in three things for **Sexual Health Awareness** Week. the launch, Elizabeth Technical and Further Education, and The Southern.

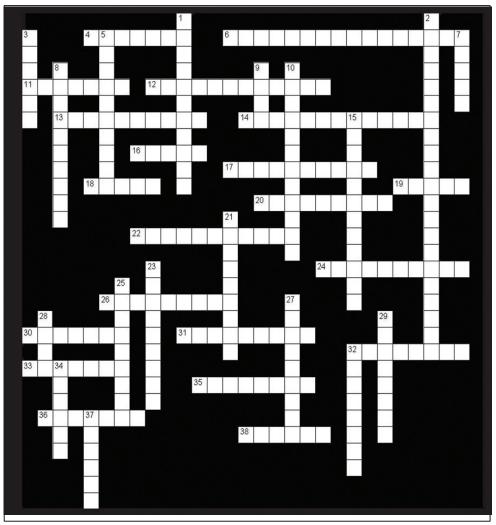
The launch, more so than the other two, was a really nerve racking experience. Myself and another northern Y@ member, Dave, had to give the opening speech at the launch of SHAW. It was scary but a positive one, it was the second launch I had done, and so the second time I had to speak in front of about 200 people only this time it was more formal, so I couldn't mess up! But without SHine SA I wouldn't have had the opportunity as a young person to get up there and do it!

I also went to the Elizabeth Technical and Further Education, with another Northern Y@ member, Luke. The TAFE went really well, and again I chose to go outside my comfort zone and walk outside of the stall area to get people's attention through the "Guess how many condoms are in the jar?" game. I then directed them to the stall area where we had the Sperm basketball game, which was really popular. Also available were pamphlets, condoms (of course!), stickers, postcards and lanyards. The students were really interested in the fact that the resources were designed by a graphics student at their TAFE!

The last event I was involved in during this week was The Southern pub run. This was a really successful and fun night for, I think everyone! Luke and I handed out condoms in our own condom side bags and asked people to guess how many condoms were in the jar! Everyone had a lot of fun, asking for our t-shirts, the badges we were wearing, lanyards and we gave them chupa-chups. Everyone was really appreciative, and before we left there was only probably three condom packs on the floor! We were stoked and want to go back next year!

## Entertainment





#### You can find the answers to most of the clues listed below in this year's annual report.

Acı	ross	36.	What road is SHine SA's northern team's centre on
4.	Just is a young women's group.	38.	The hormonal intra-uterine device (IUD) is called <u>.</u>
6.	The name of South Australian young mum's peer		·
	education project.	Do	wn
11.	In 1961 what became available in South	1.	What does the I stand for in SHine SA?
	Australia?	2.	We work with Culturally and
12.	Female became illegal		people. <i>Two words</i>
12	in South Australia in 1997.	3.	The name of the Adelaide Indigenous residential
13.	Many babies have been conceived using the		program for young people from the Lands.
1 /	contraceptive method.	5.	8364 0444 is the telephone number for the Sexual
14.	SHine SA book entitled My Sexual		
16.	Who shares a rather small room with Jeff?	7.	What gets thrown when playing the Condom
17.	SHine SA's safety in schools program works towards		basket ball game?
17.	addressing	8.	What does the N stand for in SHine SA?
18.	SHine SA attends the festival which	9.	Up to how many days can you take the emergency
10.	celebrates the gay community.	10	contraceptive pill to help prevent pregnancy.
19.	The name of the project piloted in South Australia	10.	Where is the new east/west team clinic held? <i>Two</i>
	schools over the past three years.	15.	What does the O stand for in VOs
20.	The name of the peer education project conducted	21.	What does the @ stand for in Y@s.
	in the north around negotiating safer sex.	۷۱.	Having sex standing up will not prevent
22.	Madam writes	23.	 Sexaul Health Week.
	Relationships by the stars.	25.	First name of SHine SA's President of Council.
24.	SHine SA presented the	27.	The location of SHine SA's new primary health care
	Sexual Assault forum at Sexual Health Awareness	27.	centre.
	Week 2005.	28.	Important to use with condoms (abbrev).
26.	The most common notifiable sexually transmitted	29.	The name of the contraceptive implant?
	infection in South Australia?	32.	Theme of Sexual Health Awareness Week: My want
30.	The Anangu word for honey ants.		for
31.	What does the E stand for in SHine SA?	34.	Theme of Sexual Health Awareness week: My need
32.	The name of the screening test for cervical		for
22	Cancer.  Thomas of Coveral Health Awareness week: My right	37.	The only form of contraception that reduces the
33.	Theme of Sexual Health Awareness week: My right to		risk of transmitting a STI?

#### Answer on page 31

www.shinesa.org.au

#### Comments and feedback

the name of one form of oral sex.

The band Machine Gun  $\_\_\_\_$  is also

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

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SHine SA 17 Phillips Street Kensington 5068

Tel: (08) 8364 5539 Fax: (08) 8364 2389

#### Pledge of Privacy

At SHine SA we are committed to ensuring the privacy of personal information provided to us. We believe that respect for your privacy is paramount in earning and maintaining your trust. SHine SA is bound by the 10 National Privacy Principles that form part of the *Privacy Amendment (Private Sector) Act 2000*. We have a *Confidentiality policy* which is available from SHine SA.

Email: kaisu.vartto@health.sa.gov.au

#### How your personal information is managed by SHine SA.

Contact information such as telephone number, address and email details you provide is held in order for us to manage our relationship with you as a client of SHine SA. We may use this information to send you details of initiatives being undertaken by the organisation or other ways in which you can participate in SHine SA activities. We never sell or disclose any personal information to a third party for their marketing purposes. If you wish to be excluded from receiving information from SHine SA please write with details to:

The Privacy Officer: SHine SA 17 Phillips Street Kensington or email: info@shinesa.org.au.

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Find the listed words below, including the headings, in the grid above and put a line through them. They can go in any direction, up, down, diagonally or backward but are always in a straight line.

Safety	Pleasure	Respect
Boundaries	Adore	Acceptance
Celibacy	Arouse	Compassion
Choice	Confidence	Diversity
Communication	Erotic	Empathy
Confidential	Explore	Honesty
Education	Intimacy	Sexuality
Emotional	Mutual	Think
Information	Passion	Understanding
Precaution	Scent	Value
Protection	Seduction	
Sanity	Sensuous	
Security	Skin	Δnsv

#### The Smear Test (revisited)

Stimulation

by Louise Nicholas

Answer on page 31

To all those due to present themselves For the dreaded biennial smear Here are some rules of conduct To which you should adhere.

Skills

First, by all means wash yourself Hygiene should not be an issue But don't do what a friend did once And dry yourself off with a tissue.

The doctor gave her a mirror you see Because of a firm belief That women should know and love themselves Even when viewed from beneath.

But what she saw when at last she looked (She needed a bit of a push) Wasn't the promised 'exotic bloom' But 'a snow storm in a bush'.

It's true, in a public convenience There's little at your disposal But the hand-drier hanging there on the wall Might not be a silly proposal.

Course standing like that (picture it please) Leg cocked, one foot in the basin The world's your gynacologist So it might be wise to hasten

Just settle for a simple blow dry Now's not the time to preen And dispense with the heart-shaped cut and trim No matter how cute it might seem

Most doctors are meticulous people So check all your crannies and nooks But forget the ribbons, glitter and such Cos you don't pass a smear test on looks.

And then there's that vexing problem A source of countless bickers Whether full-brief or crotchless or cotton or lace What should one do with one's knickers?

Well if, like me, for thirty years You've left them on the floor Here is a list of alternatives You might just like to explore:

Pop them in your handbag Stuff them in your shoe Hide them under the pillow (Don't forget them whatever you do.)

Slip them in a pocket (Your own, if it's close at hand) Don't flick them from the end of your foot You never know where they'll land.

Poke them down your cleavage (Yes i know that seems a bit odd But think how warm and toasty they'll be When it's time to put them on)

And if you're in a hurry And you don't want to risk a tangle Just slip out one of your feet And they'll happily swing from your ankle.

But talking to lots of women Both here and down in town If y ou'd rather leave them on the floor Be sure they're crotch-side down.

Which brings us to conversation-Please choose your topics with care Best not mention Aunt Fanny right now And when you're done with the weather, beware.

Freudian slips are quite common (Forgive me, i'll have to be blunt) Please don't mention Superman And that his real name's Clark...Kent. So there you go ladies (and others) There really is nothing to fear As long as you keep that appointment And may all your smears be clear.

Permission received from author to print this.

SHine SA Annual Report 2004/2005



## Entertainment

# Relationships by the Stars

#### **Aries**

21 March - 20 April

#### **Traits**

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



Aries lovers can be spontaneous and impulsive so they should always have a stash of condoms and dams by their bed as well as in their bathroom cupboard, kitchen draw, glove box, jeans pocket, wallet or handbag. Sexually they are energetic, adventurous and will courageously explore new territory. A little ego massaging and praise for performance will get anyone a long way with the confident and enthusiastic Aries lover.

#### Cancer

22 June – 22 July

#### **Traits**

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



Cancerians are nurturing, loving and deeply sensitive, although this is often hidden beneath their protective shell. They desire emotional security, but can become frustrated without a creative outlet. Intimacy is important in their relationships, but their imaginative side could catch you by surprise when it comes to sex. Cautious by nature, Cancerians are more likely to bury themselves in the sand rather than make the first move, so it's up to you.

#### Libra

#### 24 September – 23 October

#### **Traits**

Diplomatic, romantic, charming, easygoing, sociable, idealistic, peaceful, indecisive, changeable, flirtatious.

Librans love to be admired and are more than a little

exhibitionistic. Sometimes devious in the pursuit can kill the spontaneity if they lose sight of life's of their desires, Librans will insist on both partners shopping together to buy sex toys that are mutually pleasing and seek other shoppers help in the quest their goal. If the goal is commitment, they will given half the chance. They love to explore the be loyal and faithful. Buy a Capricorn something pleasures of love with their partner (though, if single, there's always their own sure touch). Romance and appreciation is the key to capturing a Libran's heart.

#### Capricorn

22 December - 20 January

#### **Traits**

from Madame Justfor Phun

Practical, ambitious, disciplined, patient, careful, humorous, pessimistic, rigid.

Capricorns are responsible,

stable and exhibit such determination that they mysteries. As frustrating as this can be, they are able to keep pushing until they finally achieve practical — they'll love it. Luminous condoms with cutely painted little faces, hearts or flowers are a useful gift that will appeal to their sense of humour.

#### **Taurus**

21 April - 21 May

#### **Traits**

Patient, reliable, warmhearted, loving, persistent, determined, jealous, possessive.



Taureans love beauty and comfort, preferring a cosy night in with a movie, fine wine and good company. Inspired by touch and taste, they'll usually have a smorgasbord of flavoured lube - chocolate, strawberry, banana whipped cream - to tantalise those taste buds. They're a desirable partner for those looking for a solid, secure and long-lasting relationship. Be gentle with your Taurean lover, as they can be sensitive and have a jealous streak.

#### Leo

#### 23 July - 22 August

Generous, warm-hearted, creative, enthusiastic, broadminded, faithful, loving, patronising, intolerant.



Leos are creative, resourceful

and impulsive, so when the mood takes them they may not always be prepared. But never fear, Pollywaffle wrappers, sandwich bags and rubber gloves will be tested (without safety!!) by this adventurous spirit. Leos enjoy being the centre of attention, and the bedroom is no different. So to keep your Leo purring, explore new territories with enthusiasm, then tell them how incredibly talented they are.

#### Scorpio

#### 24 October – 22 November

#### **Traits**

Determined, emotional, intuitive, powerful, passionate, exciting, jealous, compulsive, secretive.



Scorpios are emotionally

intense with an insatiable curiosity for physical pleasure. They mix their primal urges with a profound need to uncover the mysteries of life, death and bedroom activities. Well versed in safe and stimulating sex practices, they will have a secret stash of condoms, dams, lube, toys, books, videos, scented candles and chilled Champagne on stand-by. Looking for a powerful, passionate partner? Find a Scorpio. The sex will never be boring.

#### **Aquarius**

#### 21 January – 19 February

#### **Traits**

Friendly, humanitarian, honest, loyal, independent, perverse, unpredictable.



Aquarians seek constant

stimulation and are very interested in talking about sex, playing foreplay games and experimenting in unorthodox or unusual sexual encounters. They can be overly careful, insisting that all partners participating in the physical festivities wear a full body condom. While much fun is to be had with an Aquarian lover, admirers should be aware that from time to time they will need to retreat to recharge their Eveready's.

#### Gemini

22 May - 21 June

#### **Traits**

intellectual, youthful, lively, nervous, tense

entertaining and can be



as lively as two people put together. When it comes to the bedroom they bring with them this energy and versatility, so sex can be an exciting roller coaster. With an inquisitive mind they'll try anything once. To seduce a Gemini, you should know a lot about something and they will hang out with you until they learn it. To keep them interested you must have a flashing wit, quick

mind and the stamina to keep up.

#### Virgo

23 August – 23 September

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



Virgos are perfectionists, and

let's face it, sometimes it's difficult to live up to their standards. And sex is no different. They maintain the highest safe sex statistics, having learnt to say NO to unplanned sexual encounters. Virgos prefer stable, secure relationships with no unwanted surprises. However, beneath that cool-as-a-cucumber exterior smoulders a very sexy, deeply passionate person just waiting to be unleashed.

#### Sagittarius

23 November – 21 December

#### **Traits**

Optimistic, loving, goodhumoured, honest, straightforward, intellectual, careless, tactless, restless.



Sagittarians are ambitious, honest and have been known to suffer from foot-in-mouth. Not that this is a problem. The odd foot, or at least toe, can be a turn-on. Their generosity needs to be curbed, as they are likely to give away all their condoms or dams to friends. Minutes later, their uninhibited spirit can then leave them unprepared for impulsive love-making. Be ready for excitement in exotic locations or lots of fun in the great outdoors with a appeal to their empathetic nature and show you Sagittarian lover.

#### **Pisces**

20 February - 20 March

Imaginative, sensitive, compassionate, kind, selfless, sympathetic, idealistic, secretive, easily

Pisceans are sensitive,

intuitive, compassionate and respond strongly to the influences around them. Their desire to please others makes them a thoughtful and sensitive lover. Fuelled by the security of the right emotional environment, their fantasydriven sexuality can be dynamite, exposing an adventurous spirit that is willing to experiment with new experiences. To seduce a Piscean, understand them.

### Advertisements



## Clinical services

#### **Clinical services**

Doctors and nurses provide confidential sexual health services for both women and men. A fee of \$20 is payable each year. Concessions are available.

#### Northern clinics

Telephone (08) 8252 7955 for details on days/times and appointments

Davoren Park • Salisbury Shopfront [Appt 8281 1775] • Modbury [Tea Tree Gully Community Health Service]

#### **Southern clinics**

Telephone **(08) 8325 8164** for details on days/times and appointments
Bedford Park [Flinders Medical Centre] • Noarlunga [Noarlunga Health Village]

#### **East/west clinics**

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

Kensington • Gilles Plains Women's Health Clinic [appt 8334 8402] • Adelaide [Second Story Youth Clinic appt 8232 0233] • Port Adelaide [Port Adelaide Community Health Centre]

#### Youth clinics

#### Salisbury Shopfront Thursday pm

Shop 4 72 John Street Salisbury Appointment recommended: 8252 7599

#### Second Story Youth Health Service (City)

Tuesday pm

57 Hyde Street Adelaide Appointment necessary: 8232 0233 Port Adelaide Community Health Centre Wednesday pm Dale/Church Street Port Adela

Dale/Church Street Port Adelaide 8364 5033 or drop in



#### Sexual health counselling

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

• Sexual difficulties • Sexual 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 teams:

North 8252 7955 • South 8325 8164 • East/West 8364 5033



#### ...think about protection and get tested for infection.

Be prepared. Sexually transmitted infections (STIs) are more common than you might think.

Take chlamydia – the most common notifiable sexually transmitted infection in South Australia. The number of people infected is increasing and people under 30 years most at risk.

Why? Well, often there aren't any symptoms, so how do you know if you have it? You might be infecting your partners without knowing. Or they could be infecting you. Chlamydia is something

Left untreated chlamydia can lead to testicular infection, pelvic inflammatory disease, and can even lead to infertility.

So protect yourself – if you are sexually active, always practice safer sex and roll on a condom.



Condoms reduce the risk of STIs and pregnancy as long as they are used correctly. They won't protect against STIs if the infection is on other parts of the body and skin to skin contact occurs.

Testing's simple. Often all you need is a urine test. And most STIs, like chlamydia, are easily treated.

So there's no excuse – if you're sexually active, look after your health by having regular STI checks – see your GP or a doctor at:

#### SHine SA clinics

East/West (08) 8431 5177 North (08) 8252 7955 South (08) 8325 8164

Second Story Youth Health Services
Central (08) 8232 0233

North (08) 8255 3477 South (08) 8326 6053 Youth Healthline

Clinic 275 (08) 8226 6025

1300 13 17 19

For more info on STIs go to www.shinesa.org.au or contact:

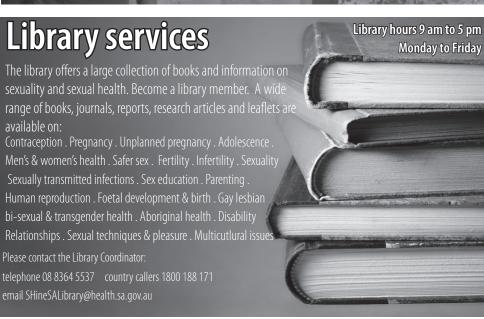
SHine SA's Sexual Healthline 9am – 1pm Monday to Friday Telephone (08) 8364 0444 Toll free 1800 188 171



## Information services







#### Resource centre

A selection of video tapes, DVDs and teaching resources are available for hire by organisations and individuals. Catalogues of video holdings and teaching resources describe each available item and the suggested target audience. Material is available on topics including:

Aboriginal health. Reproduction . Gay lesbian bisexual and transgender issues . Contraception . Foetal development . Birth . Infertility . Relationships . Sexually transmitted infections . Sexual concerns . Adolescent health . Disability and sexuality. Men's health . Mulitcultural issues Safer sex . Women's health

telephone 08 8364 5537 country callers 1800 188 171 TTY 08 8431 5177 email SHineSAResources@health.sa.gov.au

To search the online resource catalogue go to http://db.dircsa.org.au/dbw/shineresqbe.htm



## Advertisements

## Professional education courses



#### Sexual health for nurses and midwives

#### Course

- Certificate in sexual health
- Pap smear provider courses

#### Workshops/information session

- Updates for nurses and midwives
- Sexual health nurses and midwives network

For further information please contact the Course support worker on telephone 08 8431 5177, SA country callers 1800 188 171, fax 08 8364 2389; email SHineSACourses@health.sa.qov.au or go to the website http://www.shinesa.org.au/go/nurses-and-midwives

#### Women's sexual health course for Aboriginal and Torres Strait Islander health workers

#### An accredited course for Aboriginal and Torres Strait Islander health workers

SHine SA provides a Women's Sexual Health Care Course for Aboriginal and Torres Strait Islander workers who are working or planning to work in the area of women's health. There will be a maximum of sixteen participants. The course is coordinated by an Indigenous female course coordinator. The aim of the course is to provide Aboriginal and Torres Strait Islander women with the knowledge, skills and confidence to improve sexual 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 health care practice • The structure of the  $reproductive systems \bullet The function of the reproductive systems \bullet Menstruation \bullet Menopause \bullet Methods of contraception \bullet Unplanned$ pregnancy and abortion counselling • Safer sex practices • HIV/AIDS • Sexually transmitted infections • Infertility • Rape and sexual assault • Prevention of cancer of the cervix • Prevention of breast cancer • Common conditions of the female reproductive system

For further information please contact the Course support worker on telephone 08 8431 5177, SA country callers 1800 188 171 fax 08 8364 2389; email SHineSACourses@health.sa.gov.au or go to the website http://www.shinesa.org.au/go/communityworkers/aboriginal-workers

#### Supporting young people's sexuality exploration and xpression

SHine SA presents a nationally accredited course improving the sexual health of young people 'at risk'

#### A six day accredited course

SHine SA is providing a nationally accredited course for workers who provide services to at risk young people. The course aims to improve the competence of workers to deliver appropriate support in the area of sexuality and sexual health.

#### **Course content**

• Rape and sexual assault • Understanding the sexual health of young people • Protective behaviours • Communication • Pregnancy, termination • Safe sex and sexual responsibilities • Sexuality • Managing diversity • How oppression operates • Values clarification • Legal issues in relation to sexual health • Contraception • Sexually transmitted infections and blood borne viruses

#### **Course contact details**

For further information or how to enrol please contact the Course Support Worker on:

> tel (08) 8431 5177 fax (08) 8364 2389 email SHineSACourses@health.sa.gov.au Website

http://www.shinesa.org.au/go/ community-workers/youth-workers

#### Disability workers professional education course

This 6-day program provides a process for disability workers to attain two units of competency towards Certificate IV in Community Services (Disability) that are focused on sexuality and sexual health issues. Attainment will require an assessment

There is an emphasis on information provision, reassessment of personal values about sexuality and disability (and their impact on work practice) and skill building. There will be a balance of practical and reflective exercises. Participants can expect an interactive program, which includes the following subject areas:

- Understanding the sexual health of people with a disability
- Sexual behaviours that challenge
- Sexual responsibility
- Protective behaviours
- Rape and sexual assault
- Oppression, discrimination and advocacy
- Contraception Options
- Sexually transmitted infections and blood-borne viruses
- Safer sex and condoms

Planning, delivery and evaluation of a sexual health education program

For information about units of competency, course dates, costs and venue please contact the Course support worker on telephone (08) 8431 5177; SA country callers 1800 188 171, fax (08) 8364 2389; email SHineSACourses@health.sa.gov.au or go to website @ http://www.shinesa.org.au/go/community-workers/disability-workers

#### Men's sexual health care: an accredited course for Aborginal and Torres Strait Islander health workers

SHine SA conducts a Men's Sexual Health Care Course for Aboriginal and Torres Strait Islander workers. The aim of the course is to provide Aboriginal and Torres Strait Islander workers with the knowledge, skills and confidence to improve sexual health within their own communities. The course is coordinated by an Indigenous male course coordinator.

#### **Course content**

The following topics are covered in the course:

• Sexuality • Values clarification • Legal aspects of sexual health care practice • The structure and function of the reproductive systems • Safer sex practices • HIV/AIDS/Hepatitis Infections • Sexually transmitted infections • Infertility • Rape and sexual assault • Common conditions of the male reproductive system

For further information please contact the Course support worker on telephone 08 8431 5177, SA country callers 1800 188 171, fax 08 8364 2389; email SHineSACourses@health.sa.gov.au or go to on the website http://www.shinesa.org.au/go/ community-workers/aboriginal-workers

#### Continuing education for doctors in sexual health and reproductive health

SHine SA offers a post-graduate course for doctors in sexual and reproductive health.

The course is designed for doctors working in general practice or primary health care who have had at least 6 months experience in community health care. The course will provide an opportunity for participants to further develop their professional skills, knowledge and awareness in sexual and reproductive health.

The course consists of both theory and a clinical component and attracts Cert 1 CPD points.

For further information please contact the Course support worker on telephone 08 8431 5177, SA country callers 1800 188 171, fax 08 8364 2389; email SHineSACourses@health.sa.gov.au or go to the website http://www.shinesa.org.au/go/doctors

#### Relationships and sexual health education course for teachers

This course provides information, resources and classroom strategies for teachers. What makes an effective program for your students will also be explored. Participants will get copies of the latest relationships and sexual health resource for young people *Tell it like it is* and a copy of the teacher resource *Teach it like it is*. A certificate of achievement and recognition for 15 hours training and development will be provided at the end of the course.

For further information please contact the Course support worker on telephone 08 8431 5177, SA country callers 1800 188 171, fax 08 8364 2389; email SHineSACourses@health.sa.gov.au or go on the website http://www.shinesa.org.au/go/teachers

#### **Drop-in pregnancy testing**

A pregnancy testing service is available from all of the Primary Health Care Team bases, Monday to Friday 9 am to 4 pm. There is a cost involved, which can be reduced or waived if necessary. Please bring an early morning urine sample.

• North 8252 7955 • South 8325 8164 • East/West 8364 5033

#### Pap smear reminder ....

Have you ever had sex? Is it more than two years since you had a Pap smear? If you answered YES to these questions it's time you had a Pap smear. Contact your local General Practitioner or SHine SA Clinic.

## Council



2004/2005



Dr Christine Putland President - Council

In Australia, as in other parts of the world, the question of how to understand and respond to deepening health inequities remains one of our greatest challenges. For SHine SA, the key agency for sexual health in South Australia, this challenge has continued to underpin its work during the past year. The growing recognition that the main determinants of health and wellbeing are the "upstream" factors — the conditions that shape the social, political, economic, and cultural environments in which ordinary people live – clearly has profound implications for designing and implementing public health policies, as well as the strategies adopted by agencies to address health issues. It suggests that initiatives that focus on the health of populations as opposed to solely individuals will have greatest effect.

The reforms introduced by the South Australian Government since 2003 (*Health Reform SA*) aim to reorient the health system towards an approach based on primary health care principles. At a time when the HRSA is taking stock of the progress made at a State level, it is timely to reflect on some of the highlights of SHine SA's contribution to the development of effective ways of working that support population health strategies within a primary health care framework.

A central pillar of the primary health care approach is equity, and as such a concern with accessibility and equitable distribution of resources informs all SHine SA activities, from the comprehensive review of services delivered by SHine SA to people with disabilities, their carers and workers in the disability sector that was conducted over the past year, to the workshop for staff at Wirreanda High School in March 2005, focusing on the safety of the school environment for all students, including same-sex attracted young people and teachers. It is particularly evident in work with the young Indigenous people attending the Wiltja Residential Program from remote communities in South Australia and the Northern Territory. This project has run throughout 2005, using culturally sensitive models of information sharing to develop leadership skills in order to enable young people to build safe and healthy relationships, thereby reducing the incidence of interpersonal violence, sexually transmitted infections and early teenage pregnancies. SHine SA has continued to demonstrate its priority focus on vulnerable population groups in greatest need of services and resources.

These projects are just a few examples of SHine SA's commitment to another cornerstone of a primary health care approach: multi-sectoral activity. SHine SA has long recognised that sectors outside of the health system, such as education, have considerable impact on the health and wellbeing of individuals and communities, and therefore represent considerable opportunities for collaboration to promote and protect sexual health. It has continued to work cooperatively across health and sectors to maximise opportunities for networking and building stronger capacity. **Sexual Health Awareness Week**, is another example of statewide, multi-sectoral effort which engages communities and agencies in promoting sexual health "safety, pleasure and respect".

SHine SA has once again offered its highly regarded professional education activities attracting practitioners from a range of backgrounds. In 2004/5 there were significant increases in attendance at both programs and groups over the previous year despite working within the same budget.

One of the hallmarks of SHine SA's work is the extent and quality of the evidence on which its programs are based. Once again it has taken its responsibility for drawing on sound evidence for interventions and involvement in undertaking rigorous research very seriously. This is apparent in the Sexual Health and Relationships Education (**share**) project where SHine SA has continued to work collaboratively with Latrobe University

on the evaluation of this extensive school-based program. The **Healthy Young Parents in Education** project (HYPE) conducted in 2004-05 for pregnant and parenting teenagers is another example of how appraisal of existing research findings as well as undertaking new research is used to develop an understanding of current issues in the field. Data gathered from pregnant and parenting students provided insights into their 'first hand' experiences that will inform the future development of appropriate interventions.

A critical element in such research is the voice of community members, reflecting SHine SA's steadfast commitment to participatory approaches, yet another key primary health care principle. This is a commitment that goes beyond community consultation to inform the decision-making structures of the organisation. For example, the evaluation of the operation of the Youth Advisory Teams, established in 2002, was completed early in 2005 by the South Australian Community Health Research Unit. The report noted that 'the Y@ program has achieved success in creating an environment where young people can participate in a number of ways. As an organisation, SHine SA has achieved a reputation for being at the forefront of youth participation and staff have gained skills and experience in working with young people outside the therapeutic context.'

There is considerable debate about how the principles of primary health care should be put into practice. Faced with the demands of individual service provision it is tempting for organisations to focus on the more immediate rewards of downstream work. In isolation, however, these strategies do not necessarily contribute to the overall health of the population. SHine SA, by contrast, has shown a determination not to back away from asking the hard questions, striving to integrate clinical practice with the search for new and more effective ways to protect and promote sexual health at the level of communities and populations. It continues to make an outstanding contribution to the broad public health agenda through its willingness to tackle the complex upstream factors affecting the sexual health of individuals and communities.

I know that I speak for all members of Council when I say that in the past year I have been immensely proud to be associated with the work of SHine SA. Its staff and communities actively lead the way in developing strategies for reducing health inequities in South Australia. I commend them all for the tireless work that is represented in the accounts of specific projects and programs contained in the pages of this report and I look forward to another fruitful year ahead.

#### Christine Putland President Council SHine SA.

#### East/west team members showing how to play the condom basketball game.



# Informal client contacts

9,762 informal client contacts were provided for 2004/2005. 30.34% of informal clients were women, 2.87% of informal clients were men with the remaining clients unknown. 7% of informal clients were from professional people.

The top four reasons for the informal client contact were:

- sexual health 49.2%
- contraception 20.1%
- pregnancy issue 5.1%
- sexuality issue 2.5 %

#### **Council members**

#### Council member

- Anna Kennett
- Dr Christine Putland (President)
- Allison Willis
- Prof. Gus Dekker
- Tanya Hosch (Ministerial nominee)
- David Kuhne (Vice president)
- Mary Wilkinson
- Lis Burtnick
- Annette Brown (Staff nominee)
- Dr Ben Wadham

#### Portfolio area

Staff nominee

Young adults 20 to 30 years

Young people 19 years and under
Workers
Disability
Culturally & linguistically diverse
Aboriginal & Torres Strait Islander
Organisational
Regional rural remote
Gay lesbian bisexual transgender

#### SHine SA says thanks!

Council, management and staff of SHine SA would like to thank:

- The Hon Ms Lea Stevens, Minister for Health
- The Hon Stephanie Key, Minister for Families & Communities
- Mr Jim Birch, Chief Executive, Department of Health
- **Dr Tom Stubbs**, Executive Director and staff of the Department of Health
- Ms Iolanda Principe, Director, Strategy and Integration, Department of Health
- Management and staff of the Department of Health and Ageing
- The many state and federal politicians who support SHine SA
- The many organisations and individuals with whom we work in partnership to improve the sexual health of the South Australian community.
- The **South Australian community.**



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

#### At 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 feedback 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: kaisu.vartto@health.sa.gov.au
- contact a member of our Council.

#### 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.
- We will continue to provide you with a high quality service.

#### SHine SA Council (Board of Directors)

Contact them via Executive & Information Technology Support Officer at SHine SA on 8431 5177 or 1800 188 171 (toll free) (TTY 8431 5177) or email info@shinesa.org.au





#### Risk management

Risks are those things that may threaten the achievement of SHine SA's Strategic Directions.

At SHine SA risk management is about sound management to avoid adverse effects while taking advantage of development opportunities. Risks are inherent in everything we do and, in order to reduce the likelihood of adverse effects, risks need to be managed continuously and systematically.

Risk management is based on the generic Australian/New Zealand Standards for Risk Management (AS/NZS 4360:1999) and assessed against these standards

SHine SA has five Advisory Committees that evaluate and monitor specific areas of operations including clinics, therapeutic counselling, community and professional capacity building. The Occupational Health and Safety Committee has responsibilities for planning a safe environment for clients, the community, staff and volunteers. The Council plays an active role with the Management Team to monitor the organisation's financial, legal and political risks.

#### Outcomes for 2004/05

- There were no Workcover claims.
- There were no property damage claims.
- There were no public liability claims.
- There were no medical negligence claims.
- A balanced end of year financial position was achieved.

**Kaisu Vartto Chief Executive Officer** 

#### Clinic services activity @ a glance

Clinical services are an important part of the core work of SHine SA and contributes to early intervention and prevention and the improvement of the sexual health of the community. Clinics are located in areas to improve access by SHine SA's communities of interest including young people, young adults, Aboriginal and Torres Strait Islanders and people from culturally and linguistically

#### diverse backgrounds. **During 2004/2005**

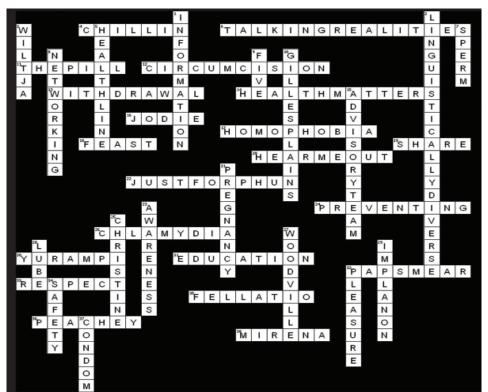
19,629 clinical services were provided to 11,139 clinic visits to • 22.8 % – Screening and assessment including cervical 4,804 unique clinic clients. Of these:

- 97% of clients were women, 2% were men
- 14.9 % were under 19 years of age
- 27.8 % were 20 to 29 years of age
- 4 % identified as Aboriginal
- 7 % identified themselves as having a disability
- 8 % identified as culturally diverse
- 2.2 % identified as being gay, lesbian, bisexual or transgender.

#### Top 5 services provided

- smears, breast checks, STI screening, HIV screening, pregnancy tests
- 53.9 % Care and treatment including provision of contraception (oral contraception, ECP, diaphragms, condoms, IUD, implant & injectable contraception
- 11.3 % Other services provided
- 9 % Education and information including provision of contraceptive choices, prevention of STIs, safer sex
- 2.5 % Clinic training including doctors and nurses.

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Kaisu with Department of Health representatives at the **Youth Celebration** 



#### SHine SA staff presentations @ conferences

Sexual health and relationships education in South Australia: Achivements and challenges of the share **project.** Paper presented at the Sex Matters Conference, Wellington 29<sup>th</sup> to 31<sup>st</sup> October 2004 coordinated by Family Planning New Zealand

Sally Gibson, Team Leader and Helen Rawnsley, East/West **share** co-ordinator , SHine SA

Relationships and sexual health education for young people: how health and education must **work together.** Paper for the 10<sup>th</sup> National cCnference of the Association for the Welfare of Child Health.  $28^{th}$  and  $29^{th}$ April 2005, Sydney

Jane Flentje - Coordinator - Teacher education, SHine SA Young peoples' relationship and sexual health: a model of health promotion that advocates, enables **and mediates.** Paper for the 20/20 vision, 15<sup>th</sup> National Conference, Australian Health Promotion Association. 13<sup>th</sup> to stop sexual assault & domestic violence — a national challenge 16<sup>th</sup> March 2005, Canberra

Jane Flentje - Coordinator - Teacher education, SHine SA

Saying what needs to be said - sexuality mental **and medications.** Paper for the Mental Services Conference of Australia and New Zealand, 1st, 2nd & 3<sup>rd</sup> September 2004, Gold Coast Conference Centre, Surfers Paradise

Ralph Brew - Coordinator - Disability education, SHine SA

The role of schools in supporting the sexual health of young people in rural areas. Bringing the Pieces Together, Creating a Picture of Health. Health Promotion Conference. 11th and 12th November 2004 Mt Gambier

Cheryl Peat, Southern **share** co-ordinator, SHine SA

Tackling the hard stuff – Relationships and Sexual **Health Education**. Workshop at the ACHPER 2005 State Health and Physical Education Conference, Westminster School 28th and 29th April 2005.

Helen Rawnsley, East/west **share** co-ordinator and Susie Hank, Northern **share** co-ordinator, SHine SA

Tackling the hard stuff – Relationships and Sexual **Health Education**. Workshop at the SA Science Teachers Association Conference at the Maths and Science school at Flinders University, 11th July 2005.

Helen Rawnsley, East/west **share** co-ordinator and Susie Hank, Northern **share** co-ordinator, SHine SA Fried Green Bananas & Simmering Passions - Same Sex Attraction & its Relationship to Culture". Paper

presented at the Living and Loving in Diversity conference held from 15<sup>th</sup> October to 17<sup>th</sup> October 2004 at St Kilda Town Hall, Melbourne, Australia.

Miguel Quintero, Community health worker — Multicultural focus, SHine SA

RESPECT Getting it together... A Gender, Power & Sexual Entitlement Project - A peer education project aimed at reducing the incidence of sexual based violence by engaging young men to work alongside their peers; adopting a position where young men are encouraged to take a lead role in accepting and assuming responsibility for the prevention of rape and sexual assault and other forms of sexual violence. Presented at the HOMETRUTHS conference on 15th to 17th September 2004 at the Sheraton Towers, Southgate Melbourne.

> Rob Gerrie, Proiect Officer — **RESPECT Getting it** together, SHine SA

Working together to improve sexual health services for Aboriginal young women in urban areas - Culture nothing without language. Paper presented at the Asia Pacific Academic Consortium for Public Health (APACPH) Conference held in December 2004 in Brisbane.

Janet Kelly - Community health nurse, SHine SA

Aboriginal Women's Sexual Health Business in **the City.** Paper presented at the National Women's Health Conference from 20th -22nd April 2005 in Melbourne. Janet Kelly - Community health nurse, SHine SA

'Making a Difference' Thinking outside the city square. How can a city based agency make a difference for young people living in rural communities?

Paper presented the South Australian Rural Health promotion Conference 2004 from 11th to 12th November 2004 in Mount

Juliet Watts, Community Health Worker Northern Team

## PREVENTING SEXUAL ASSAULT

Lessons learnt and strategies for the future

Questions and discussion Panel Keynote speakers Launch









9am-1pm, Monday to Friday (08) 8364 0444 or toll free 1800 188 171 (Country only) sexualhealthhotline@health.sa.gov.au



A safe night out is a great night out. so choose behaviours that are safe and less risky.

Alcohol and drugs can affect your judgement. Too much can land you in situations that can lead to violence, sexual assault, unsafe sex, or cause physical and emotional harm.

For more information and confidential advice about alcohol and drugs contact: Alcohol and Drug Information Service Tel 1300 131 340 www.dasc.sa.gov.au

Healthy relationships can be lots of pleasure... so it's important to look after your sexual health and practise safer sex. SHine SA provides a range of sexual health services, including clinics, counselling, information and resources.

SHine SA clinics East/West (08) 8431 \$177 North (08) 8252 7955 South (08) 8325 8164 Sexual Healthline

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

Toll free 1800 188 171 (country callers) SexualHealthHotline@health.sa.gov.au www.shinesa.org.au

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SHine make sure it all adds up Listen to each other. Share your needs. Agree together about what happens next.

It's not on without consent.

and you have a right to live free from fear, shame and violation.

There are never any excuses for

Yagrow Place have a range of counselling and medical services available for people 16 years and over who have experienced rape or sexual assault. They also offer

support to their partners, family and friends. For more information contact: Yarrow Place Tel (08) 8226 8777 Toll free 1800 817 421 (country callers Tel (08) 8226 8787 (after hours)

www.yarrowplace.sa.gov.au

And remember if it's not adding up. there's always help out there.

The Second Story is a health service for young people aged 12 to 25 years. The service is free, confidential and provides counselling and medical clinics for sexual health information,

checks and treatment.

Or if you want to talk to someone about your health, relationships, sexuality and identity or any other issues in your life that are causing you stress then contact: Youth Healthline Open 24-hours, 7-days ■ Tel 1300 13 17 19 Mobile callers (08) 8303 1691