

A Nurse-Led Outreach Model for Sexual Health Education, Testing and Treatment Among Pacific Australia Labour Mobility (PALM) Scheme Workers in Rural New South Wales

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Background/Purpose:

A nurse-led sexual health education and testing outreach was implemented to engage thirty PALM scheme workers employed at a rural NSW abattoir. The initiative was informed by recent clinical identification of HIV and syphilis within similar workforce participants and was undertaken as a proof-of-concept model for targeted outreach. Logistical coordination was supported by the NSW Council for Pacific Communities.

Approach:

Content was delivered through a group interactive and conversational approach using plain language to promote engagement. Visual imagery was used to reinforce key concepts on consent, education on common Sexually Transmitted Infections (STIs) and Blood-Borne Viruses (BBVs) and accessing local services. At the conclusion of the session, voluntary STI/BBV testing was offered in a private space.

Outcomes/Impact:

Twenty-one heterosexual males participated in testing with all born in the Solomon Islands with Pijin as preferred language. Of the group three identified as Torres Strait Islander. All were Medicare-ineligible and asymptomatic, with no reported history of BBV testing, injecting drug use, or unsafe tattooing or piercing practices.

Syphilis was identified in 30% (n = 6) of participants, with serology demonstrating reactive treponemal and non-reactive non-treponemal tests, consistent with early or latent infection or possible yaws.

Two active hepatitis B infections were detected. Evidence of past hepatitis B infection with immunity was observed in 60% (n = 12), while 30% (n = 7) were non-immune.

Chlamydia positivity was 15% (n = 3), including two co-infections with syphilis.

All assessment, treatment, contact tracing, and follow-up of these results was nurse-led.

Innovation and Significance:

This outreach identified communication barriers, including restricted interpreter availability, and the absence of Pijin-translated resources to support STI/BBV result delivery and treatment discussions. Despite these constraints, the program successfully engaged a previously underserved workforce, delivered targeted sexual health education, facilitated testing and treatment, and removed financial barriers. Findings informed more equitable, culturally responsive approaches to future outreach and sexual health service delivery.

Disclosure of Interest Statement:

Nil