

# Health Promotion as a tool to engage and empower marginalised populations



Carla Gorton, Kathy Clark, Rhondda Lewis, Faith Bassett and Jacoba Henning

**Cairns Sexual Health Service**

## Acknowledgements



We are glad that you are here

WELCOME

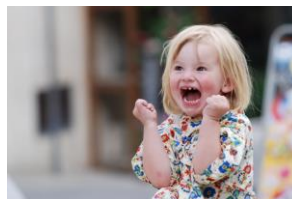
We welcome all people from all over the world regardless of:  
ethnicity, religion,  
refugee & immigration status,  
gender, sexuality



Different campaigns and strategies to reach different sectors – health professionals, people who currently use drugs, people who have been exposed to hep c in the past and the broader community.

## THEMES

- Universal Access
- Transformative
- End the “othering”
- Shame and Stigma: shame evokes the fear of disconnection; to increase our impact – we need ways for people to connect and challenge the stereotypes.



**Shame = Silence = Lack of knowledge**  
**Empathy = Connection = Empowerment**

# COLLECTIVE IMPACT

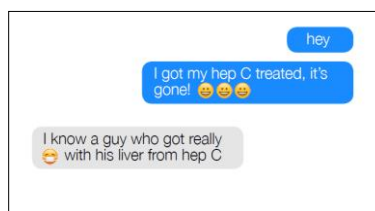
## The 5 Conditions of Collective Impact

- 1 **Common Agenda**
  - **Common understanding** of the problem
  - **Shared vision** for change
- 2 **Shared Measurement**
  - **Collecting data** and **measuring results**
  - Focus on **performance management**
  - **Shared accountability**
- 3 **Mutually Reinforcing Activities**
  - **Differentiated approaches**
  - **Coordination** through joint plan of action
- 4 **Continuous Communication**
  - **Consistent and open communication**
  - Focus on **building trust**
- 5 **Backbone Support**
  - Separate organization(s) with **staff**
  - Resources and skills to **convene** and **coordinate** participating organizations

Kania, J & Kramer, [Stanford Social Innovation Review](#) 2011

# CAPACITY BUILDING

- Focus: Prisoners, NSP's, GP's and other health workers, OST clients, public awareness and media, Aboriginal medical services, pharmacies, QuiHN and other NGO's, rural and remote health practitioners.
- Partnerships: a monthly clinic with Community Re-Entry Services Team providing STI and BBV testing and treatment to people recently released from correctional settings.



**KEEP LOTUS GLEN HEP C FREE**

New effective simple hepatitis C treatments  
With a 95% CURE rate

✓ <b>CONTINUE TESTING ON ENTRY</b>	✓ <b>OFFER TREATMENT</b> to anyone who has Hep C	✓ <b>START TREATMENT URGENTLY</b> to avoid cirrhosis and other complications
✓ <b>ENCOURAGE</b> hepatitis program and staff to identify all at risk of the virus from blood or needle use in the prison	✓ <b>PRESCREEN LONG TERM INMATES</b> who may be at risk of hepatitis C	✓ <b>PROMOTE DRUG TREATMENT</b> as the most effective treatment for hepatitis C
✓ <b>BE POSITIVE AND ENCOURAGING</b> about Hep C treatment	✓ <b>CONTINUE TO EVALUATE</b> what type of treatment	✓ <b>STAFF CAN BE TREATED</b> CONFIDENTIALLY when by their GP at Lotus Glen Health Service

Cure covered by the Federal government as bulk drug, we can treat and cure as many people as possible with no extra medication cost to the taxpayer.

People who currently inject and/or use needles can see a doctor to reduce the public health risk of hepatitis C transmission.

## MEASUREMENT

- Cairns Sexual Health – Clinical Audit – 125 people treated up to March 2017 (more than **750** people treated in Cairns)
- REACH- C data
- Australian NSP fingerprick survey – annual
- National prison entrants Blood-borne virus survey – every 3 yrs
- LiverLife (June 2016 NSP prevalence 23 – 29%)
- Evaluation with clients and stakeholders planned
- Partnership with Kirby – Lotus Glen data





## Hep C free at last



Jaye had a hard time on the old interferon treatment, which she tried 3 times over the years



When the new 'one pill once a day' treatments came out in March this year, Jaye was first in line

The pills were virtually side effect free. Jaye took them for 12 weeks, then waited another 12 weeks to see if they had worked.



She has her energy and life back, congratulations Jaye, hep C free!

## PEERS CAN REACH THE COMMUNITY



- Providing encouragement and support for those reticent to get treatment, and making access to treatment as easy as possible.



**My Role as a Contractor.**  
**Paid to contact, encourage and transport people to the clinic for testing and treatment.**

## PEERS CAN BE TRUSTED AND AREN'T GENERALLY ASSOCIATED WITH THE AUTHORITIES

- Shame and guilt around having contracted hepatitis C can be an obstacle to getting treatment. Also clients with a criminal history have a real fear of health services sharing information with the police .

## COMMUNITY MEMBERS WITH HEP B AND HEP C SPREAD THE WORD ABOUT THE NEW CURE

- **The Cairns Hepatitis Action Team** , under the guidance of Rhonda Lewis, our Health Promotion Officer, generated enthusiasm
- Community events, Media Marathons for World Hepatitis Day . Radio and TV news and information for the public in layman's terms.



## CONCLUSION

- Advocacy
- Visibility
- Real stories
- Peers
- Innovation
- Shared understanding of the problem, clearly outline solutions, how everyone can be involved to bring about the change

