



THE UNIVERSITY OF
MELBOURNE

How things have changed.....

2019 Australasian Sexual Health
Conference, Perth.

Jane Tomnay





In the beginning.....

General Nursing Training at St Vincent's Hospital

Commenced in February 1983

Our group consisted of 60 young women and three young men (most were 18 years old)

We all moved out of home for the first time and into the nurses home (it was compulsory)

I failed 2nd year and had to repeat

Nurses went on strike for 8 weeks during my training and I eventually graduated in 1987



My memory of the cafeteria at St Vincent's: 1983





St Vincent's Hospital today...





1988: Victoria Police

Infectious Diseases Resource Officer (a 12month position that lasted 5 years)

- Set up and delivered the Hepatitis B Vaccination program for 10,500 police members and 2,500 public servants
- Designed a 2 hour training program for police members to protect themselves against infectious diseases and blood borne viruses in response to the emergence of HIV (and the potential for TB)
- Delivered the training program to all Australian Police Forces and the Royal Thai Police.

1988: Victoria Police

Important lessons I learned from my time at Vic Pol

Stigma was rife in the general community for people living with HIV and police members were part of that community. The “Grim Reaper” TV ad aired in 1987.

Candlelight vigil and the AIDS quilt 1989



2019: Victoria Police at Pride March





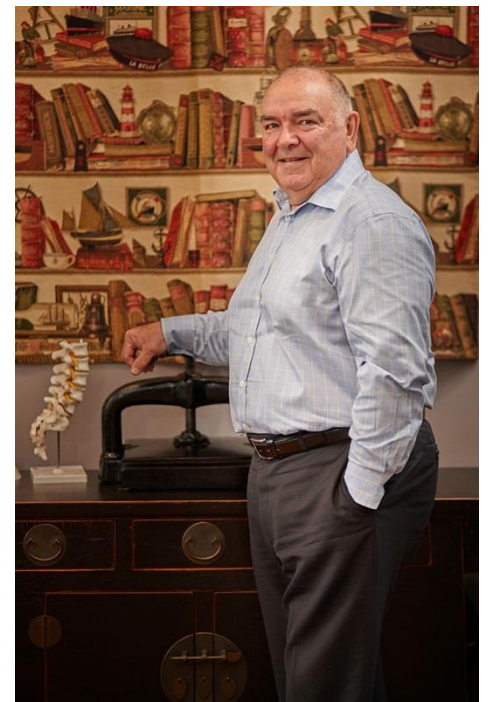
1988: Victoria Police

Important lessons I learned from my time at Vic Pol

Professional mentors, good guidance and professional relationships are key to success

Working hard to ensure the support of senior decision makers as well as engaging those on the ground in an organisation supports effective and efficient program implementation

Driving a police car is dangerous but having an unusual surname is a bonus and parking is a breeze!



Other things I learned at Vic Pol





1993: Victorian Health Department

Partner Notification Officer

Employed as a contact tracer for HIV, Hepatitis B and STIs to:

- Find the partners of patients diagnosed with HIV and STIs and offer them testing and treatment (if required) in the field.
- Offer referral and support to those partners diagnosed with HIV
- Manage patients with HIV who reportedly placed others at risk of infection
- Collect epidemiological information on all notifications of HIV, gonorrhoea, syphilis (27 cases) and chlamydia from notifying clinicians
- Follow up case of newly diagnosed HIV from the Department of Immigration, the Coroner and any other 'unusual' referrals

Some media in the early years

Millions may die of AIDS

Epidemic keeps ahead of scientific advances

By Fran Smith
Mercury News Medical Writer

PARIS — Five million to 10 million people worldwide have been infected by the virus believed to cause AIDS and 3.5 million of them may die in the next five years, the world's AIDS experts have concluded. Although scientists have moved with unprecedented speed to understand the disease's causes and effects, many are pessimistic, believing that the



Rock in last wish

Victims don't know they have disease

AIDS is the modern Black Death. It is spreading like a plague.

TERROR OF THE PLAGUE


Britain threatened by virus plague

I'D SHOOT MY SON IF HE HAD AIDS, SAYS VICAR!



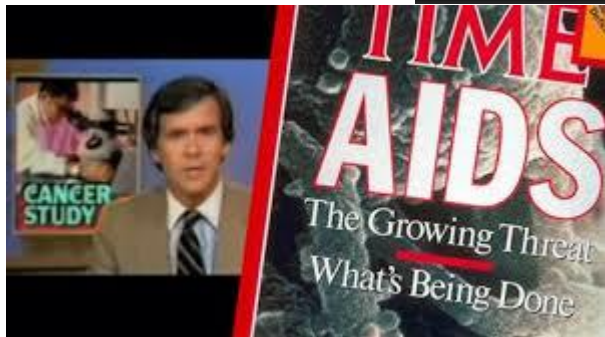
He would pull trigger on rest of family, too

Another red hot **STAN** exclusive

For People With AIDS



A Cure Is Lightyears Away.

CANCER STUDY

TIME AIDS

The Growing Threat

What's Being Done

Wednesday, November 11, 2015 BRITAIN'S BEST-SELLING PAPER 40p thesun.co.uk

HOLLYWOOD HIV PANIC

● A-list actor's virus diagnosis rocks showbiz

● Womanising star has string of ex-lovers

EXCLUSIVE SEE PAGE 5

Cleric Says AIDS Shows God Unhappy With Gays

SAN JOSE, Calif. (AP) — The lethal disease AIDS is an expression of God's displeasure with homosexuals, the head of the nation's largest Protestant denomination said in a report published Friday.

"It is a sinful lifestyle, according to Scripture," the Rev. Charles Stanley, president of the 14.3 million-member Southern Baptist Convention, told the San Francisco Examiner.

Homosexuals, declared Stanley, must be helped to be "delivered from the bondage" of their lifestyle.

Jack Pantaleo, co-director of San Francisco's AIDS Interfaith Network, said he was appalled at Stanley's remarks and called them a device to "condone hatred" of homosexuals.

"I believe that AIDS is God indicating his displeasure and his attitude toward that form of lifestyle, which we in this country are about to accept," said Stanley.

Stanley, 52, a fundamentalist television evangelist and pastor of Atlanta's First Baptist Church, was in San Jose this week to attend a state evangelism meeting.

Acquired immune deficiency syndrome is caused by a virus that destroys the body's ability to fight off disease. It has most often struck male homosexuals, intravenous drug abusers and patients who have received blood transfusions.

In his remarks Stanley expressed dismay at the response to the death of actor Rock Hudson from AIDS.

"It's almost as if he's become more heroic dying of AIDS, with all the publicity he's gotten," he said. "It's like there was nothing bad about it."

Implying that God is taking action against homosexuals, Stanley said it was "interesting . . . what's happening" as homosexuality "has become an acceptable lifestyle in the minds of many people. Why not AIDS 50 years ago, 100 years ago?"

Said Pantaleo, "What's frightening is that people who say AIDS is God's wrath are using it to condone hate and to keep gay men at a distance. AIDS has nothing to do with sexuality, politics or morality; AIDS has everything to do with biology. There's a nasty bug around."

1993: Victorian Health Department



Some methods we used to contact partners before mobile phones and the internet existed in homes were that we:

- ✓ Went to the partners home or workplace - and left a note in a plain envelope if no-one was home
- ✓ Also went to saunas, sex on premises venues, night clubs and beats to find partners
- ✓ Worked flexible hours
- ✓ Took blood in the field and provided results for HIV and treatment if necessary for chlamydia, gonorrhoea and syphilis to marginalized people who were unlikely to attend for treatment



Things I learned from partners I diagnosed with HIV in the early days....

- People are resilient
- People are capable and competent to look after themselves and others
- The majority of people care and are concerned about others
- Even though we couldn't offer any treatment or hope they still wanted to protect the public health
- The key to PN is making what people see as a difficult task as easy as possible by providing supports that help.



Partner Notification in 2019

Contactable partners were quicker and easier to reach due to mobile phone technology

Internet assisted Partner Notification

Patient delivered partner therapy





1993: Managing those that reportedly place others at risk of HIV

The skills I needed (that I knew didn't have):

- Assessment skills for clients with mental health issues
- Excellent communication skills to understand the complexity of the client's issues
- Negotiation skills to ensure clients received optimum care in an often inflexible service system

In 1996 I enrolled in University and four years later completed a Master of Health Science (Advanced Psychiatric Nursing).



1993: Victorian Health Department

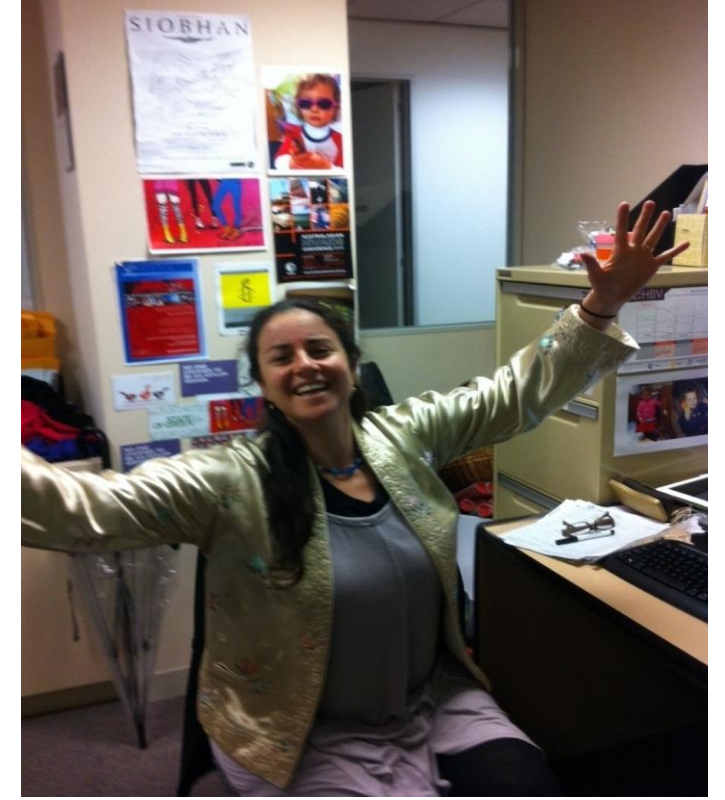
In 2002 – Alfred presentation

How do we know that Partner Notification works in Australia?

This question led to my PhD studies.



PhD Studies and beyond...





Centre for Excellence in Rural Sexual Health

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Projects



Resources



Professional Training



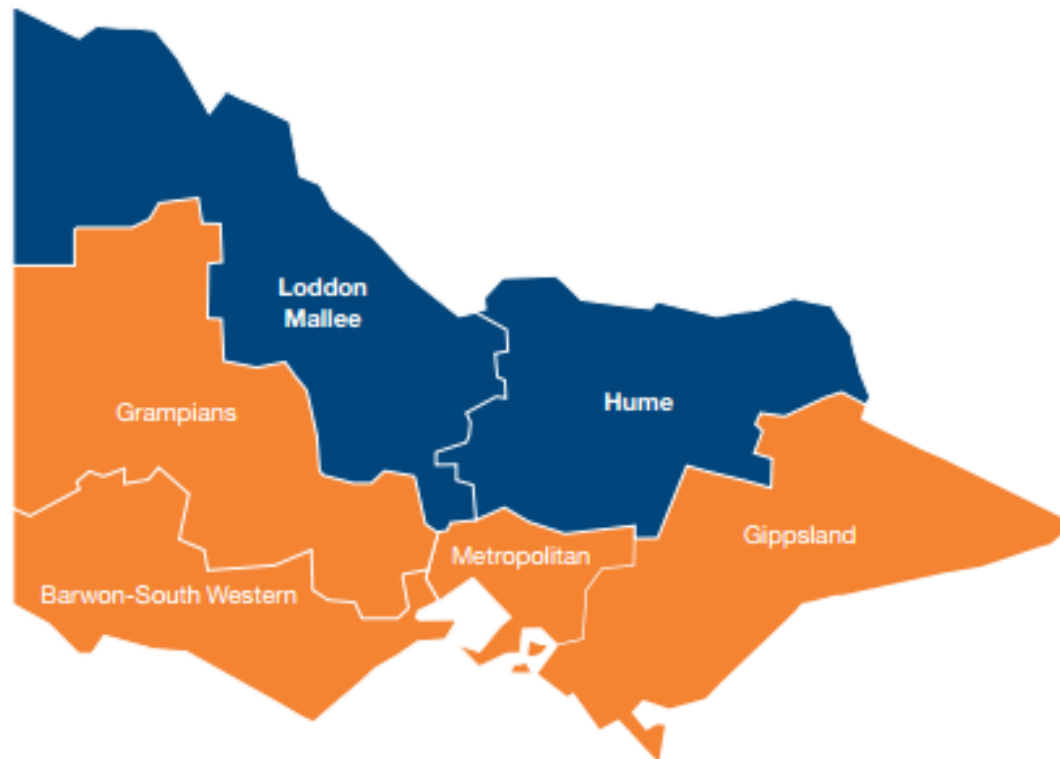
SEXrurality 2015



2009 - Centre for Excellence in Rural Sexual Health (CERSH)

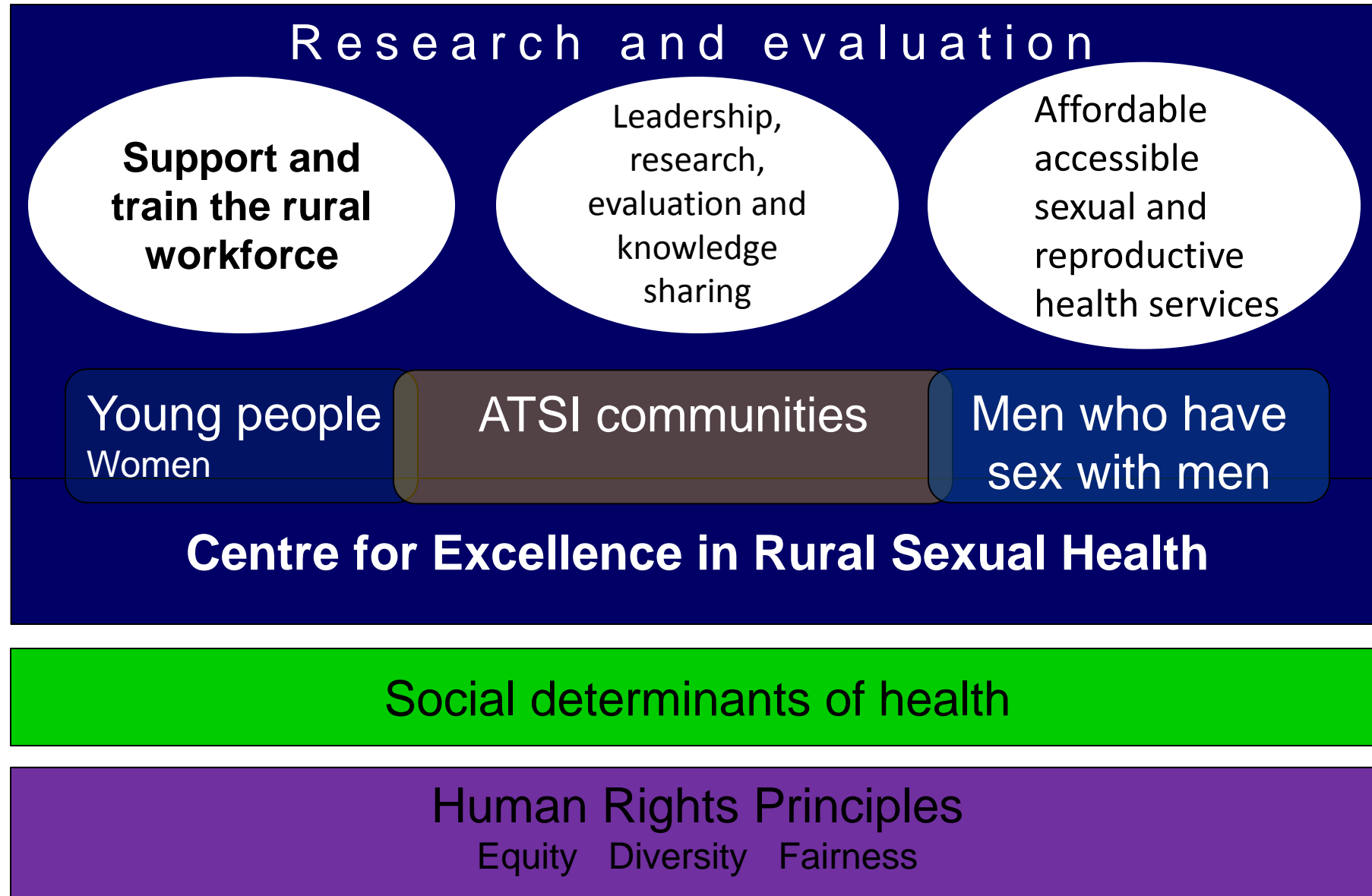
Funded by the Victorian Department of Health and Human Services

Our vision: All rural Victorians have access to quality sexual health care, information and support that is tailored to their individual needs





Our approach at CERSH





How we work

- Community-identified sexual health issues and needs
- Authentic partnerships and collaboration
- Active engagement with communities
- Cross-sectoral engagement
- Focus on systems change



Examples of what we do (in partnership with others)

- Condom Vending Machines and SHOUT (see poster 103)
- Improving medical abortion service system capacity
- Developed a Clinical Community of Practice for Medical Abortion
- We have now produced 12 online sexual health care training modules for GPs, Nurses, Allied Health and other interested professionals.
- We convene the CERSH SEXrurality conference (2013, 15, 17 ,19)
- We have 3 sexual health networks (Swan Hill, Bendigo, Benalla)
- Monthly newsletter, CERSH website (www.cersh.com.au)

All training and resources are free and available to all.



Medical Abortion: Building the evidence

- Three different research approaches:
 - Descriptive study and clinical audit (data source: clinical records)
 - Impact evaluation (data sources: GPs and nurses who had attended PD)
 - Qualitative research study (data sources: women who had accessed medical abortion in rural Vic)

Providing accessible medical abortion services in a Victorian rural community: A description and audit of service delivery and contraception follow up

Jane E. Tomnay^{a,*}, Lauren Coelli^b, Ange Davidson^b, Alana Hulme-Chambers^a, Catherine Orr^b, Jane S. Hocking^c

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Hulme-Chambers et al. *International Journal for Equity in Health* (2018) 17:172
<https://doi.org/10.1186/s12939-018-0888-8>

International Journal for
Equity in Health

RESEARCH

Open Access

Medical termination of pregnancy service delivery in the context of decentralization: social and structural influences



Alana Hulme-Chambers^{1*}, Samantha Clune¹ and Jane Tomnay²

Australian women's experiences of a rural medical termination of pregnancy service: A qualitative study

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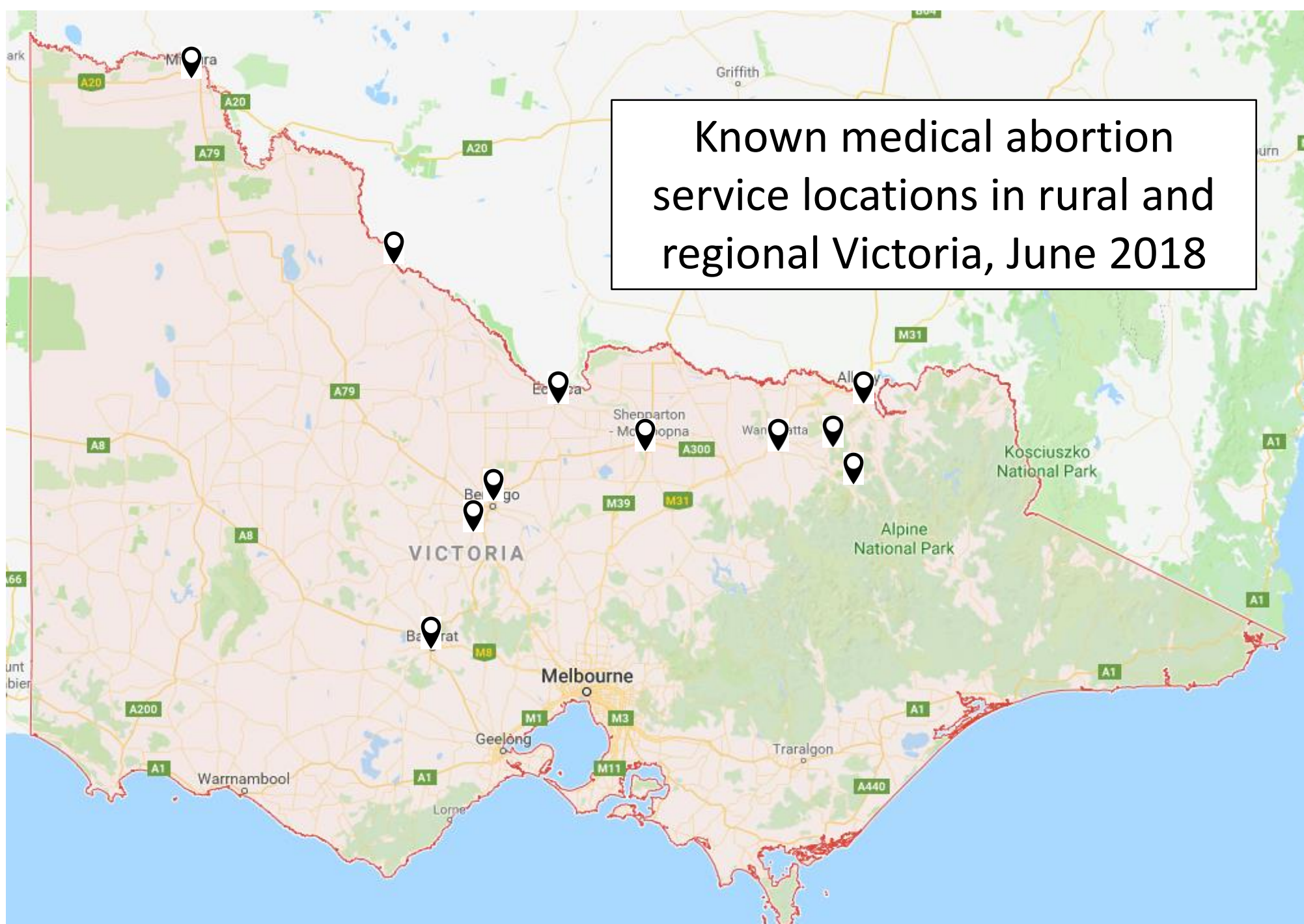
How has this approach improved service equity?

More professional development opportunities for GPs and nurses, including related SRH services (e.g. Implanon insertion)

More and improved collegial support for rural GPs and nurses working in medical abortion service delivery, helping to reduce perceived or enacted stigma

More services now in rural Victoria – more trained GPs and nurses = more options for rural women that are local to them

Greater awareness within the health service system about medical abortion as an option for women <63 days gestation





People are our most valuable resource. CERSH, staff team in 2019



Experts in rural health





PN work for WHO: 2018 & 2019

Online webinar

PN Seminar in Jakarta

2019 HIV testing services
guidelines working group:
Geneva



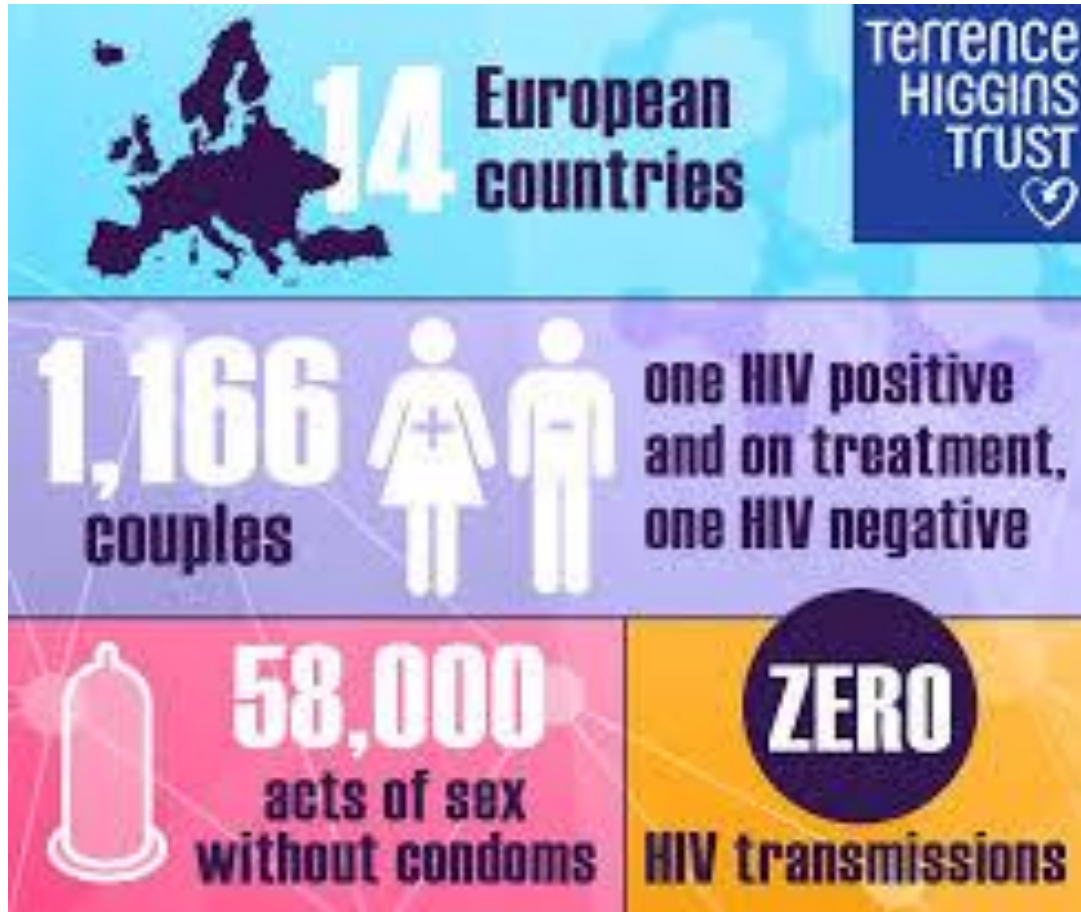


Centre for Excellence in Rural Sexual Health

Summing up.....

- ❑ Creating strong professional relationships with as many varied people as I could has meant that expertise have been shared to achieve common goals
- ❑ Systems change requires the expertise, determination and commitment of decision makers, policy makers, administrators, researchers, front line workers and most importantly; the community that they affect
- ❑ People are the most valuable resource in your professional life

Look at where we are now.....



It's a fact
U=U

Undetectable equals untransmittable

British HIV Association
BHIVA

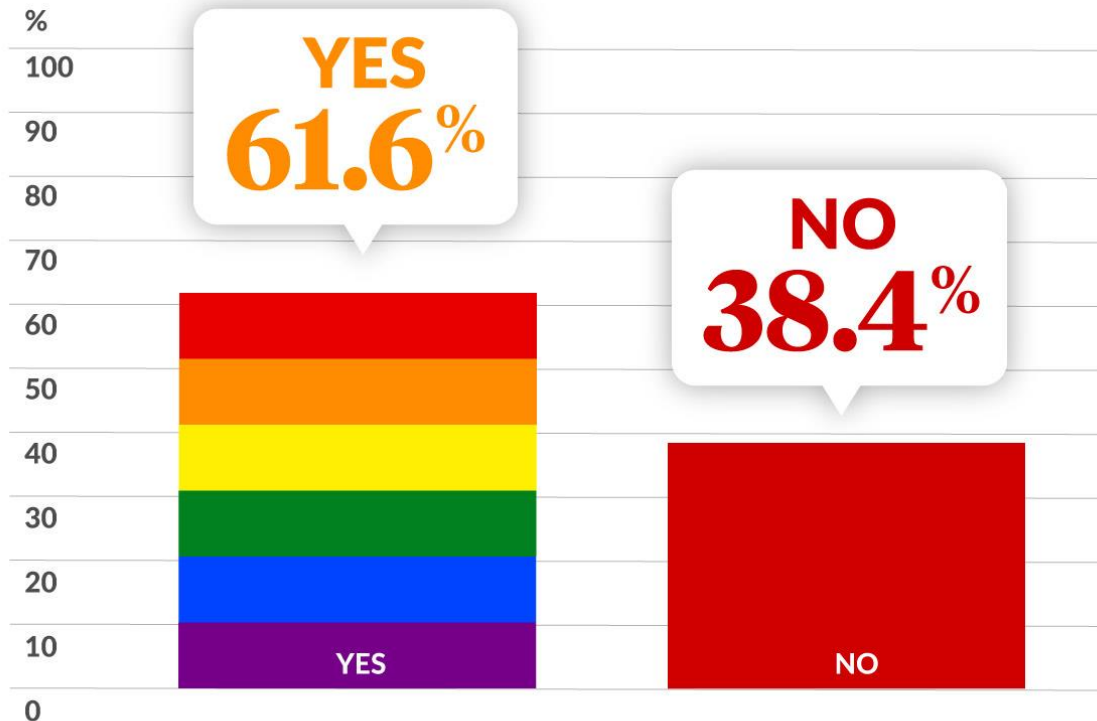
prevention access campaign

The British HIV Association is proud to support the #UequalsU consensus statement of the Prevention Access Campaign

And even some social change...

The postal survey is over and the results are in ...

12,727,920 people voted 79.5% response rate





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MELBOURNE

THESE CHANGES HAVE BEEN ACHIEVED
THOUGH THE CULMINATION OF MANY OF
THOUSANDS OF PEOPLES WORK.

IT HAS BEEN A PRIVILEGE TO WORK IN SUCH
AN INTERESTING SECTOR.

Thank you!