

# Prioritising sexual and reproductive health: What can local governments do?

*This resource has been prepared by the Grampians Public Health Unit*

## Key Messages

- Sexual health refers to “a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences” (World Health Organization, 2024).
- Sexual and reproductive health is central to a population’s broader health and wellbeing, is a fundamental human right and has been linked to the social and economic development of communities and countries.
- There is a significant need for improved sexual and reproductive health outcomes in the Grampians region.
- Efforts to support the population’s sexual and reproductive health can also contribute to other strategic priorities including actions to address intimate partner violence, gender equity, youth health and environmental sustainability.
- There are many actions that local councils can take to improve the sexual and reproductive health of their communities.
- The Grampians Public Health Unit is available to support local councils design, implement and measure the effectiveness of programs or activities related to improving sexual and reproductive health outcomes.

## What is sexual health and reproductive health?

The World Health Organization defines sexual health as “a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences” (World Health Organization, 2024). It is dependent upon having:

- Access to comprehensive, good quality information about sex and sexuality
- Knowledge about the risks a person may face and their vulnerability to adverse consequences of unprotected sexual activity
- An ability to access sexual health care
- Living in an environment that affirms and promotes sexual health (World Health Organization, 2024).

Local Governments have a role to play across all of these four essential elements to promote the sexual health and wellbeing of their communities. Sexual health is applicable to people of all ages, genders, sexualities and ethnic backgrounds.

## Why has the Grampians Public Health Unit prioritised sexual and reproductive health in the Grampians Region Population Health Plan 2023-2029?

The Grampians Region Population Health Plan 2023-2029: Stronger and Healthier Together, identified nine priority streams of work through a series of broad and targeted meetings, workshops and iterative processes with over 200 stakeholders. This process, combined with a critical examination of epidemiological and sociodemographic data led to sexual and reproductive health and viral hepatitis being recognised as an area of significant need and opportunity in the Grampians region.

As outlined in our project report *Sexual and reproductive health and viral hepatitis in the Grampians region* there are many strengths and assets to build upon within the Grampians region to improve sexual and reproductive health outcomes (Grampians Public Health Unit, 2023). Some of these community strengths include:

- A growing number of clinical facilities offering sexual and reproductive health services
- A growing network of health, education and social care providers taking an active interest in improving sexual and reproductive health outcomes in our region as evidenced by the membership list of the health promotion community of practice, *Sexual Health in the West*
- A higher level of social connectedness among rural communities compared to the state average.

Despite these strengths, data pertaining to sexual and reproductive health outcomes in the Grampians region paints a confronting picture of inequality and access barriers which are unjust and preventable.

### **Rates of adolescent birth**

Adolescent birth rates in Australia have declined over the past several decades, attributable to improvements in access to effective contraception and sexual health education (Victorian Women's Health Atlas, 2024). However, rates in the Grampians region continue to be among the highest in the state. Yarriambiack Local Government Area (LGA) and Northern Grampians LGA were ranked first and second, respectively in terms of adolescent birth rate in Victoria over the period 2019-2020 (Yarriambiack: 25.97 live births per 1000 women aged 13-19, Northern Grampians: 25.46 live births per 1000 women aged 13-19) (Victorian Women's Health Atlas, 2024). Ararat, Horsham, Central Goldfields, West Wimmera, Ballarat, Hindmarsh and Pyrenees LGAs also demonstrated adolescent birth rates above the state average (Victorian state average: 8.2 live births per 1000 women aged 13-19).

### **Access to the most effective contraception**

The most effective contraception methods are long-acting reversible contraceptives such as contraceptive implants and intra-uterine devices (Family Planning Alliance Australia, 2020). Medicare Benefits Schedule (MBS) data indicate that in 2022, claim rates for contraceptive implant insertion were below state average in 6/11 LGAs in the Grampians region (Victorian Women's Health Atlas, 2024).

MBS claim rates for IUD insertion were below state average in 7/11 LGAs when based on the patient location, and below state average in 9/11 LGAs when based on provider location (demonstrating minimal local service provision outside of Horsham and Ballarat LGAs) (Victorian Women's Health Atlas, 2024). This suggests that people are needing to either travel long distances to access best practice contraception, or are going without.

### Access to abortion

Access to medication abortion as measured by the number of Pharmaceutical Benefits Scheme (PBS) prescriptions for mifepristone and misoprostol, demonstrate Hindmarsh LGA had the lowest provision rate based on patient location in the state (2.45 prescriptions per 1000 females aged 12-54 years) (Victorian Women's Health Atlas, 2024). Based on the prescriber location, 9/11 LGAs had below-state average medication abortion provision, including five LGAs with zero local service provision in 2022 (Pyrenees, Northern Grampians, Yarriambiack, Hindmarsh and West Wimmera LGAs). These findings suggest that people are needing to access medication abortion from outside of their LGA, which is likely to be challenging for many.

It has been noted that the registration of at least one visible medication abortion provider or dispenser with 1800myoptions increases abortion access in a local area. (Sarder et al, 2024).

### Sexually transmitted infections and blood borne viruses

Rates of sexually transmitted infections (STIs) and blood borne viruses tend to be lower across the Grampians region compared with the state average, however it is uncertain whether this is indicative of lower incidence or merely a lack of access to testing. Overall, STI rates have increased across the region over the past several years and notifications for infectious and late syphilis have particularly increased, in keeping with state and national trends. The most commonly notified STI is chlamydia.

These confronting statistics are embedded within a regional context of:

- an increasingly ethnically diverse population
- a disproportionately high number of people living with disability in our region
- a disproportionately high rate of people experiencing intimate partner violence and sexual violence in our region
- variable implementation of relationships and sexuality education in schools
- a significant volume of misinformation regarding sexual and reproductive health on social media and other online sources.

Further information on the current state of Sexual and Reproductive Health in our region, including results of stakeholder interviews can be accessed via our project report [\*Sexual and reproductive health and viral hepatitis in the Grampians region\*](#) (Grampians Public Health Unit, 2023).

### How is the Grampians Public Health Unit working with others to improve sexual and reproductive health outcomes in our region?

Over the past year, the sexual and reproductive health landscape has changed in the Grampians region, with a concerted, whole-of-region approach resulting in:

- The announcement of additional sexual and reproductive health hubs in the region.
- Several capacity building opportunities conducted alongside partners for teachers, youth and community workers and health professionals covering topics such as contraception, viral hepatitis and sexual health for young people.
- The formation of *Sexual Health in the West*, a community of practice for people working with priority populations and with an interest in improving sexual health outcomes in our region.

- The promotion of the 1800myoptions service to key health and social care providers throughout the region.
- The formation of the Grampians region viral hepatitis network, investigating systems approaches to improving the diagnosis and treatment of viral hepatitis in our region.

We are available to support local councils in our region to design, implement and measure the effectiveness of programs or activities related to improving sexual and reproductive health outcomes.

## What actions might local governments take to support and improve health outcomes relating to sexual and reproductive health?

The Ottawa Charter for Health Promotion states that “health is created and lived by people within the settings of their everyday life; where they learn, work, play and love” (World Health Organization, 1986). Local governments have a vital role to play in supporting the health and wellbeing of their communities. For sexual and reproductive health, this is particularly so, with a broad range of interventions possible for local governments to consider. The Ottawa Charter is foundational to the practice of health promotion, and outlines five action areas which have been set out below in Table 1, with relevant suggestions for local governments to consider for improving sexual and reproductive health outcomes. The options presented are not intended as an exhaustive list of interventions, but rather a source of inspiration for further consideration and development based on the local context.

*Table 1: Examples of sexual and reproductive health promotion activities that could be considered by local governments.*

Ottawa Charter action area	Possible actions for local councils
1. Create healthy public policy	<ul style="list-style-type: none"> <li>• Prioritise sexual and reproductive health on municipal public health and wellbeing plans.</li> <li>• Ensure a “health in all policies” approach by considering the ramifications of policies on sexual and reproductive health outcomes.</li> <li>• Ensure key sexual health priority populations are represented on advisory groups and steering committees (e.g. First Nations people, young people, people who identify as LGBTQIA+, people with other relevant lived experience).</li> </ul>
2. Strengthen community action	<ul style="list-style-type: none"> <li>• Support the development and ongoing work of local sexual-health and wellbeing aligned community groups such as local LGBTQIA+ support groups.</li> <li>• Enable activism. Research with trans and gender-diverse people has found that engagement in activism has a positive impact on health and social outcomes (Fisher et al, 2019). Examples may include support for “Wear it Purple Day”, IDAHOBIT, etc.</li> <li>• Join the Grampians Public Health Unit’s <i>Sexual Health in the West</i> community of practice for people working with priority populations that have an interest in improving sexual health outcomes.</li> </ul>

3. Create supportive environments	<ul style="list-style-type: none"> <li>• Increase discrete access to condoms e.g. via condom vending machines or free condom dispensers in key public locations.</li> <li>• Ensure people working with priority populations (e.g. youth and disability sectors, sporting clubs) have appropriate skills and training to act as a first point of contact and have knowledge of local referral options (e.g. 1800myoptions).</li> <li>• Ensure local council-run services (such as sport and recreational facilities, playgroups, libraries, etc) are inclusive for people of all genders and sexualities.</li> <li>• Actively promote how and where people can access sexual and reproductive healthcare in the region.</li> </ul>
4. Re-orient health services towards a preventative approach	<ul style="list-style-type: none"> <li>• Ensure maternal child health nurses are up to date with best practice training on contraception and know where to refer people who need to access sexual and reproductive health services.</li> <li>• Consider expanding local vaccination programs to include mpox and hepatitis B.</li> <li>• Partner with local health services to deliver sexual health outreach in non-clinical settings (e.g. sporting clubs, youth clubs)</li> </ul>
5. Build personal skills	<ul style="list-style-type: none"> <li>• Include age-appropriate relationships and sexuality education in council-run kindergartens and playgroups, ensuring early conversations about diversity, inclusion, body autonomy, safety and help seeking in developmentally appropriate ways for children and parents.</li> <li>• Support relationships and sexuality education in sporting clubs and other settings.</li> <li>• Promote the 1800myoptions service through display of posters and flyers at key sites.</li> </ul>

## Where can councils go for further ideas and information?

Should you wish to discuss opportunities for collaboration with the Grampians Public Health Unit, please contact Dr Juliana Betts, Stream Lead for Sexual and Reproductive Health at [Juliana.betts@gh.org.au](mailto:Juliana.betts@gh.org.au).

A list of other useful resources is provided below:

- GPUH sexual and reproductive health and viral hepatitis stream, including links to sign up to *Sexual health in the West*: <https://my.gh.org.au/sexualandreproductivehealth>
- The Impact of Condom Vending Machines – resource for councils: [https://medicine.unimelb.edu.au/\\_data/assets/pdf\\_file/0010/3897964/CVM-resource-for-councils.pdf](https://medicine.unimelb.edu.au/_data/assets/pdf_file/0010/3897964/CVM-resource-for-councils.pdf)
- Rainbow Resource for Victorian Councils: <https://www.vlga.org.au/sites/default/files/200311%20VIGA%20Rainbow%20Resource%20for%20Victorian%20Councils.pdf>
- Developing a Framework for Community-Based Sexual health Interventions for youth in the Rural Setting (Carl Heslop PhD thesis, 2019): <https://espace.curtin.edu.au/handle/20.500.11937/78311>
- 1800 My Options Promotional Materials: <https://www.1800myoptions.org.au/for-professionals/promotional-materials/>
- Women's Health Grampians' *Tell Your Story*, a report capturing the lived experiences of people accessing contraception and abortion services in the Grampians region: <https://whg.org.au/wp-content/uploads/2024/06/Tell-Your-Story-Report.pdf>
- Information on the Victorian mpox vaccination program: <https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.health.vic.gov.au%2Fsites%2Fdefault%2Ffiles%2F2024-10%2Fvictorian-mpox-monkeypox-vaccination-program-guidelines-version-19.docx&wdOrigin=BROWSELINK>

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