Youth vs Stakeholders:
Perception vs Reality in rural sexual health
“You call ‘em up, say can I have an appointment, you go”.
Acknowledgement of Country

My work is conducted in Kwoorabup, on land that borders Minang and Pibulmun Noongar Country

I acknowledge the people as the traditional custodians of the land on which we meet today, and the land on which this work was conducted.

I also wish to acknowledge and pay my respects to past, present and future elders and leaders here today.
What

Participatory Action Research project

Aim: Developing a framework for providing youth sexual health in rural towns

This data: Interviews - key stakeholders working with young people to deliver youth sexual health services and education (n=16), & young people living within the town (n=18, ages 16-24 years old).
Stakeholder themes

Whose role is it anyway?

Interconnected Network

Need to collaborate

Consistent and credible information

Do they know we are here?

Barriers to access
Youth themes

Access to condoms

I didn’t know that (the need to advertise)

Everyone knows Everyone

Early, consistent and real Sex Ed

Collaborate

Realistic about barriers
Unpacking and finding gaps

• Condom access – fishbowls, vending machines and gender accessibility
• Do young people know how to access health care?
• Do young people trust health providers?
• The nuts and bolts of what is taught – is it what they want?
• Cost* and being realistic – “the whole town isn’t going to start thinking about young people and sexual health”
Condom access
Condoms

“Nicky, Nicky can I have some condoms please?”

“The girls only have the tampons and the pads and the boys only have the condoms.”

“We did put condoms out for condom day and a couple of the administrative staff thought it was great, one person didn’t, so it’s about sort of staff attitudes, so it’s a really hard”

“I mean if they start you know, you find used condoms in the toilet and stuff like that, then obviously that’s going to be an issue”

“Stealing them’s easier”
Access and Trust

- Stakeholders:
  - Young people not confident making an appointment
  - Don’t know how to pay
  - Embarrassed talking to a doctor

- Young people:
what is (and isn’t) taught

Stakeholders felt sexual health education at school probably wasn’t up to scratch – young people felt it was ok

Young people felt there were gaps in same-sex sexual health education

Stakeholders wanted to upskill and improve delivery - young people really happy to have outsiders come in and teach (small town stuff)
Barriers?

- Cost?
- Anonymity?
- Knowledge?
- Awareness?
- Parents?
- Society?
- Realistic?
Look to exploit

Trials of the Interconnected network

The desire for collaboration

Want increased access

There is a lack of advertising
So what?

• Get real - connect with young people from your setting

• Exploit your common ground

• Know young people aren’t naïve

• Small towns and interconnected network are a challenge - provide the ways around this

• Young people have faith in confidentiality – don’t let them down
Questions?