New Minister for Health

The appointment in November of Dr Kay Patterson, Senator for Victoria, as federal Minister for Health in charge of the newly titled, Department of Health and Ageing, should serve community health well. As a gerontologist and lecturer in health sciences prior to her election to federal parliament in 1987, she is well qualified to develop policies for healthy ageing. During her successful, but largely publicly unacknowledged, parliamentary career, she has strengthened her links with primary health care. As Parliamentary Secretary to the Minister for Foreign Affairs, she has been engaged with numerous Australian aid projects, for example in Papua New Guinea, and Cambodia. In Papua New Guinea recently, she visited projects ranging from building construction, to immunisation, to a women’s development agency providing workshops and counselling on domestic violence and alcohol abuse. She also has experience in senior administrative positions in academia and her consensus style of management will assist her to take people with her. Although seeking consensus, she is a lateral and imaginative thinker, who also “does things” and will not be afraid to place her own stamp on the health portfolio.

In This Issue

This issue of the Australian Journal of Primary Health contains articles focusing on health throughout the life cycle, and ranges geographically across Australia and to Sweden and Thailand. From an article using qualitative data on the knowledge of and attitudes towards prostate cancer among Italo-Australian men, we move to one about the Asthma Linking Project as a joint project of the Royal Children’s Hospital and the North Richmond Community Health Centre, in Melbourne. The primary aim of this project was to evaluate the effectiveness of community based asthma education and support to culturally and linguistically diverse families. The project, from 1996 to 2000, evaluated a range of health and quality of life outcomes for 50 children and their families, incorporating quantitative and qualitative research methods.

A novel approach to nursing education was used in Sweden in a large study (N=436) of student nurses in three universities, that introduced paintings, reproductions of works of art, alongside textbooks in student nurses’ education. The aim was to study non-verbal language. In written interpretations the students combined experiences and theoretical knowledge of non-verbal language with new impressions from the people depicted in the paintings. It should help to encourage appropriate responses to the body language of patients.

There are some health problems that although they have huge effects on people’s ability to enjoy life and to pursue chosen lifestyles, they are neglected. Attempting to overcome this neglect of one such condition, urinary incontinence, researchers investigated health service provision and practices of a range of health professionals prior to implementing reforms. The health practitioners were asked about services provided, policies, clinical pathways, referrals, and their views on what services they would like to see offered in the region. Results showed that while there were some existing continence-specific services in the region, they were inadequate to provide for the numbers of people in need. Many generalist health practitioners demonstrated a lack of interest in and knowledge of the plight of those suffering from incontinence. Links between services were found to be ad hoc, with inconsistent referral patterns between health professionals.

The next paper also focuses on community use of health services for effective service delivery. In an inquiry into general health needs, and experiences with health service utilisation by Chinese living in Melbourne, focus group discussions explored health-seeking behaviour. Themes that emerged from the discussions included common pathways to care seeking, barriers to the use of health care services, general health concerns, and perceived validity of health information sources. The use of Traditional Chinese Medicine Practitioners (TCMP) is common, while continuing to see Orthodox Western Medicine practitioners. Participants gained health information from a wide range of sources and placed trust in material disseminated by Chinese Radio Programs and a community organisation run by voluntary health professionals.

We try to publish studies in the coordinated care trials, and we are pleased to have in this issue, a case study using the ‘problems and goals approach’ in a coordinated care trial. The problems and goals approach is a therapeutic assessment and intervention used in the psychotherapy field. It is a patient-centred technique in which the patient and health professional determine the patient’s problems and formulate realistic goals based...
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on measurable outcomes. The approach was used in the SA HealthPlus first round Coordinated Care Trial in South Australia with intervention patients who had chronic medical conditions.

Becoming a new parent sometimes presents difficulties for women, and for their partners. Motherhood can be exhausting and lonely as women cope with the demands of a new baby. When infants do not sleep many parents seek professional intervention with persistent infant sleep problems. The findings from focus group interviews are reported in a study which attempts to understand the experiences of women and families in how they coped with babies with sleep problems during residential stay in an Early Parenting Centre in Victoria.

In a paper that also attempts to address a need in the community, this time about who should get personal alarms, we report on the development of instruments for the assessment of that need in older or disabled people. Personal alarms or Personal Response Systems (PRSs) are designed to enable frail older people and people with disabilities living at home to summon help in an emergency. Instruments to aid assessment and for determining relative priority for receiving a PRS were developed for the Victorian Department of Human Services.

The Community Health Live section has no less than five excellent articles on practical interventions in a number of different types of communities. Drug and alcohol problems are becoming less and less likely to be viewed as individual medical disorders, but rather recognise the significant role of environmental and community factors. The Partysafe project, being implemented in the remote Northwest town of Carnarvon in Western Australia (WA), uses a community mobilisation approach to reducing harm associated with alcohol consumption in private residences. The paper discusses the community mobilisation methodology, gives a practical insight into the specific interventions and evaluation techniques developed for the Partysafe project.

An evaluation of the Health Resource Line (HRL), a telephone information service for use by general practitioners and Area Health employees in Northern and Central Sydney Area Health Services, was conducted following an eight month pilot. The evaluation found that no more than half of the target population were aware of the service, and that fewer than a third of these had trialed the service. The experience of health care providers using the service was generally positive, but despite this, overall levels of use were low and declined after an initial peak. The low level of use brings into question the cost effectiveness of such a service.

The importance of community control if programs are to be successful in improving health outcomes is the focus of a paper about Aboriginal community controlled comprehensive primary health care, a case study of the Central Australian Aboriginal Congress. Aboriginal community controlled Primary Health Care services have led the way in Australia in developing a model of service that is able to address social issues and the underlying determinants of health alongside medical care. The case study illustrates increasing utilisation of such services by Aboriginal people, and the capacity of community controlled organisations to respond to changes in health patterns in their client populations.

HIV/AIDS transmission is a major threat to married women in developing areas such as rural northern Thailand. Married women routinely have unprotected sex with their husbands and have limited ability to change this behaviour to protect themselves from possible infection as heterosexual transmission is the dominant route for acquiring HIV/AIDS. Specific intervention is needed to enable married women to take action to protect themselves from HIV/AIDS. The study aims to develop, conduct and evaluate the effectiveness of an HIV/AIDS prevention and intervention program in rural northern Thailand. It used a community development model to enable married women to improve their self-efficacy, and self-esteem to increase their behavioural skills for negotiation of safe sex practices with their husbands.

The school is the basis for intervention in the final paper. The Respect, Protect, Connect Program is an injury-prevention focused workshop project based in secondary schools in the South East Region of Melbourne. Peer education principles are used in single-sex workshops with year 7-10 students. The aims of the workshops are the development of harm reduction and violence prevention strategies by young people. It is hoped that students will develop an understanding of the way violence impacts upon their lives and those of others. Through discussion, roleplays and interactive group work, young people are encouraged to take more control of their life circumstances.

Heather Gardner, Editor