

Taking to the Streets

A healthy sexuality risk reduction nursing outreach initiative

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Sudbury & District

Health Unit

Service de
santé publique



At a glance...

- **The Health Sexuality Risk Reduction Outreach Initiative – *Brief overview***
- **The Evaluation Strategy**
Quantitative and qualitative approaches
- **Evaluation Recommendations**
A few examples
- **The Nurses in Outreach**
Implications for nursing practice



SDHU Catchment

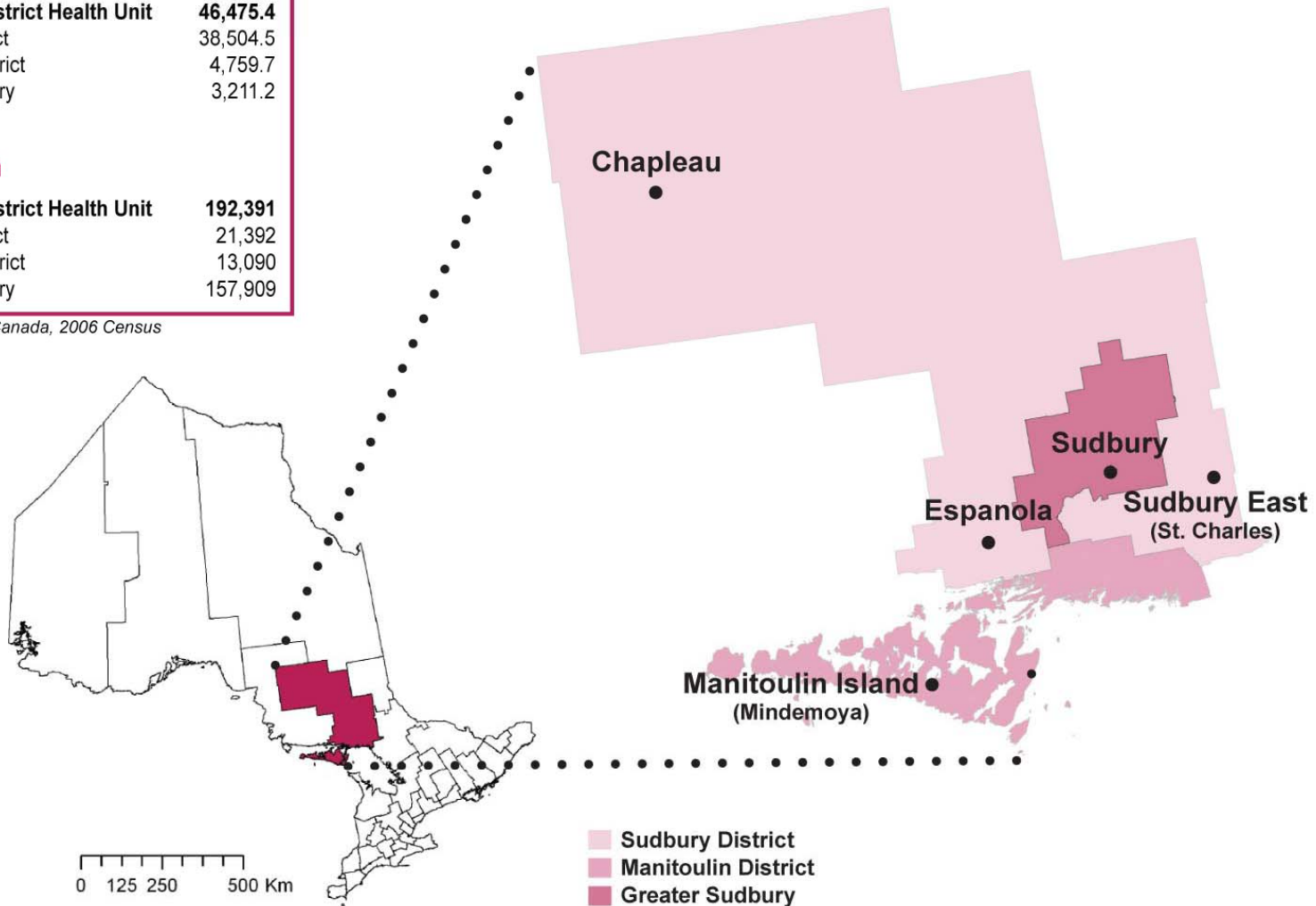
Land Area (km²)

Sudbury & District Health Unit	46,475.4
Sudbury District	38,504.5
Manitoulin District	4,759.7
Greater Sudbury	3,211.2

Population

Sudbury & District Health Unit	192,391
Sudbury District	21,392
Manitoulin District	13,090
Greater Sudbury	157,909

Source: Statistics Canada, 2006 Census



Greater Sudbury vs. Southern Ontario Cities

Land Area & Population Comparison

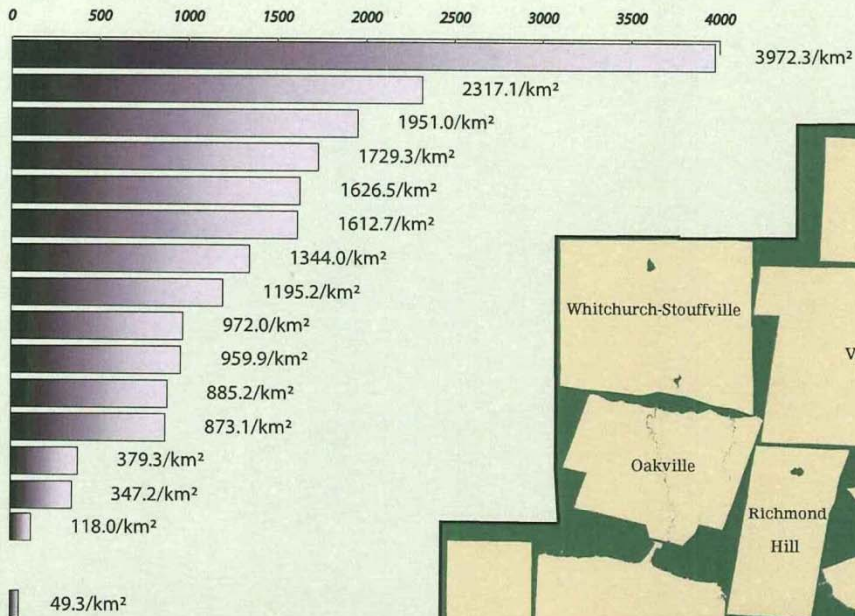
	Sq. Km	Pop. (2006)
Toronto	630.2	2,503,281
Mississauga	288.5	668,549
Newmarket	38.1	74,295
Orangeville	15.6	26,925
Brampton	266.7	433,806
Richmond Hill	100.9	162,704
Ajax	67.1	90,167
Oakville	138.6	165,613
Oshawa	145.7	141,590
Aurora	49.6	47,629
Burlington	185.7	164,415
Vaughan	273.6	238,866
Pickering	231.6	87,838
Grimsby	68.9	23,937
Whitchurch	206.7	24,390
Total (not incl. Sudbury)	2,707.5	4,854,005


Greater Sudbury 3,200.6 157,857


Greater Sudbury Infrastructure

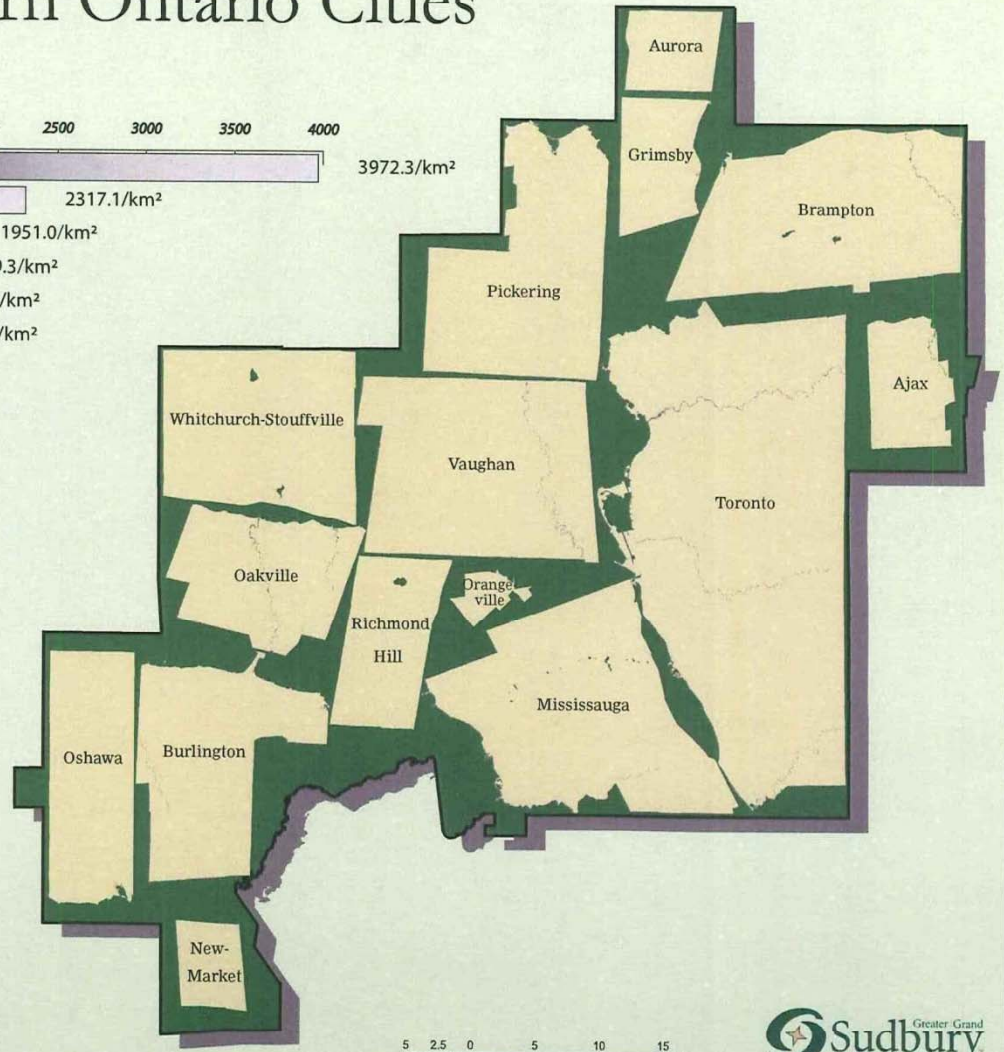
Road Lanes	5116 km
Water System	886 km
Sanitary System	723 km
Arenas	14
Libraries	13
Lift Stations	75
Fire Stations	25
Lakes (over 10 ha.)	330
Licensed Daycares	107

Population Density Chart



 Southern Ontario Cities

 City of Greater Sudbury



5 2.5 0 5 10 15 Km

 Greater Sudbury
www.greatersudbury.ca

Data Source: Statistics Canada 2006 Census.

The Healthy Sexuality Risk Reduction Outreach Initiative - Overview





Program Objectives

There were four key objectives:

1. Outreach to harder-to-reach populations;
2. Increasing access and reducing barriers to sexual health and risk reduction services;
3. Development of community partnerships;
4. Sustainability and effectiveness.





Evaluation Plan

Phase I

Development of questionnaire and pilot testing

Phase II

Questionnaire implementation

Phase III

Staff and partner interviews





Findings – Clinic Site Differences

- At PHN/NP sites (98% ♀)
 - Over 540 client contacts for sexual health counselling, birth control and screening
 - 270 client contacts for STI testing and treatment
- At PHN-only sites (x6)
 - 60:40 male to female ratio
 - Main reasons for attending = STI/Sexual Health, Hep B, Hep C and HIV counselling and testing
 - Vaccinations





Findings - Questionnaire

- Demographics:
 - ~ 75% of clients were under 25 years of age
 - ✓ Of these, 65% were 15-18 year olds
 - 9% Aboriginal or Métis
 - 10% identified various cultural identities beyond English, French and Canadian
- 1/3 indicated 'no family doctor'
- Overall, 40% rated their health as *Very Good* to *Excellent*, while ~11% rated their health as *Fair* or *Poor*





Findings - Questionnaire

- Top reasons for attending the clinics:
 - Pap screening and birth control
 - Time and location convenient
 - Wanted STI testing
- Learned about the service through “word of mouth”
- Most were “very satisfied” with the service
- Nurses/NP are well-suited to meet the needs of clients
- Risk behaviours and benefits of counselling





Recommendations

A total of 19 recommendations were made under 4 broad themes, resulting mainly from interview findings:

1. Outreach to priority populations
2. Increasing access and reducing barriers
3. Community partnerships
4. Sustainability and program effectiveness



The Nurses in Outreach

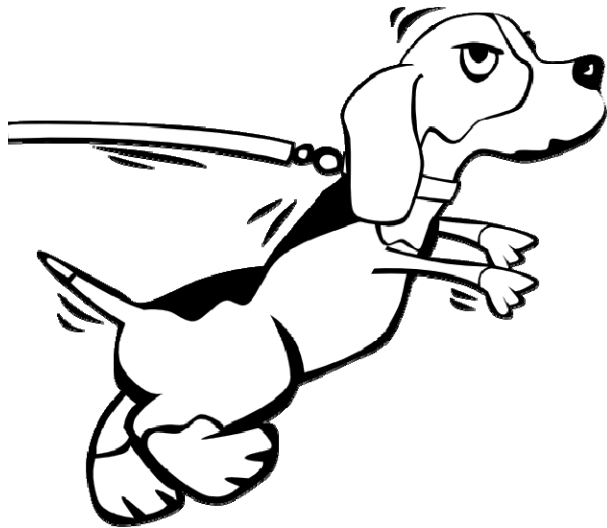


Implications for Practice

- May 2008—clinic moved to a downtown mall, which made services more accessible for our target population
- May 2009—offered “drop-in” hours only: Monday and Friday 0830-1530
 - in 2008 we saw ~ 9,000 clients
 - in 2009 we saw 10,000 clients and 50% of these were “drop-ins”
- Street outreach one afternoon and one evening a week



Issues/Obstacles



- Lack of primary care health practitioners
- Public health mandate
- Scope of practice
- Time



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