The Australian Study of Health and Relationships (ASHR) is the country’s most comprehensive study of sexual and reproductive health. Conducted once a decade, the survey provides a snapshot of the sexual health and well-being of the Australian population. It also provides information essential for the development of policy and the delivery of sexual and reproductive health programs across Australia.

Chief investigators of the NHMRC-funded project were Professor Juliet Richters (School of Public Health and Community Medicine) and Professor Andrew Grulich (Kirby Institute), both at UNSW; Dr Richard de Visser from the University of Sussex, Professor Chris Rissel, and biostatistician Professor Judy Simpson from the University of Sydney. Together with the late Professor Anthony Smith from La Trobe University, they also conducted the first Australian Study of Health and Relationships, published in 2003.

The findings of the second survey were released last month at a launch held on 7 November to thank the more than 20,000 people who responded to the telephone survey, and to celebrate the work of the specially trained interviewers at Hunter Research Foundation who carried out the interviews. The results were published in 12 papers in an issue of the journal Sexual Health and received considerable media coverage in print (see www.smh.com.au/national/health/a-revolution-under-the-bedcovers-20141107-11iehs.html), on radio and on television (e.g. The Drum, ABC).

The questionnaire included questions on the respondents’ first sexual contact; the number of sexual partners; sexual practices; sexual relationships and satisfaction; sexual identity, experience and attraction; pubic hair removal; circumcision; sexual infections; attitudes; sexual coercion; condom use; and attitudes.

Behavioural and attitudinal findings include the following:

- Australians appear to be having sex less frequently, but they have broader repertoires of sexual practice;

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Women’s reports of numbers of partners and range of sexual practices are becoming more similar to men’s, suggesting a reduction in the double standard; despite these promising changes, there is room for improvement in several domains, including reducing rates of sexual coercion, which remain steady; 4% of men and 22% of women had been forced or frightened into doing something sexual that they did not want. People who had been sexually coerced had poorer physical, psychological and sexual well-being; in the previous 12 months, 1.1% of men and 2.7% of women had had a sexually transmissible infection; and, 37% of people had ever been tested for HIV. Of these, 0.6% of men and 0.3% of women were HIV-positive. Results suggest that about 1 in 1,000 heterosexual men, 1 in 20 gay men and 1 in 1,000 women in the sample were known to have HIV.

Comparison with the first ASHR survey a decade ago showed that there has been no significant decline in the age at first intercourse, which for about half the respondents was at 16, 17 or 18, although the use of protection has increased. Three-quarters of respondents were in a regular (i.e. ongoing) heterosexual relationship; they had sex on average 1.4 times per week, a drop since the last ASHR survey from 1.8. Knowledge of sexual infections had improved since the last survey. Most Australians have positive attitudes toward premarital sex and abortion and also show a greater acceptance of homosexual behaviour than previously, although over the last decade there has been a shift toward less tolerance of sex outside a committed relationship.

Men and women aged between 16 and 69 were contacted between October 2012 and November 2013, using random digit dialling of landline and mobile phones. Of the eligible people contacted, 66% completed an interview, a high response rate in today’s context, and at least as high as surveys on other topics. The completed sample size of 20,094 makes ASHR2 the largest national representative-sample sex survey in the world.

Most people said they were more than 90% honest in their answers and were not embarrassed by the questions – indeed, more people (8%) refused the income question than the question about masturbation (under 3%).

Positive life pathways for vulnerable adolescents

A team of researchers at the School of Public Health and Community Medicine together with the Ted Noffs Foundation and academics from the Centre for Social Research in Health and the School of Social Sciences have been awarded an Australian Research Council Linkage Grant, funded for three years.

The award of over $250,000 from the ARC together with matched funding of cash and in-kind from the Ted Noffs Foundation will enable the team to do vital research to understand the pathways of vulnerable adolescents and the role of the Ted Noffs Program for Adolescent Life Management (PALM) in assisting young people to get their lives back on track.

The project will examine and analyse the short and longer term outcomes and pathways of young people who participate in PALM compared with similar young people who have not completed such a program. The findings aim to directly inform policies and programs, including life management, drug and alcohol and other support programs to better address multiple needs among this vulnerable group.

The investigators are Sally Nathan, Patrick Rawstorne and Andrew Hayen from the School of Public Health and Community Medicine, Joanne Bryant and Eileen Baldry from the Centre for Social Research in Health and the School of Social Sciences and Mark Ferry from the Ted Noffs Foundation.
In line with its commitment to actively contribute to international public health issues around the world, the University of New South Wales (UNSW), held a one day ‘Ebola Day of Action’ at the Kensington Campus on 23 October 2014. The event was organised by the UNSW Alliance against Ebola – a ground-up initiative by some passionate students and staff of UNSW in response to the current Ebola outbreak in West Africa. This global crisis started in March this year and has infected over 15,000 persons with 7,000 lives lost in the process. The Alliance aims to raise awareness, enhance understanding of Ebola outbreak within the university and Australian communities, as well as to raise funds to support efforts to end Ebola. The involvement of students from two of the most affected countries – Liberia, Sierra Leone – within the Alliance has further enhanced the reach-out efforts to engage not just the minds, but also the hearts of the public to take prompt actions as well.

The Ebola Day of Actions brought together international and local students as well as staff. Dressed in colourful national attires, everyone was engaged in one way or the other through various platforms. Activities ran throughout the day. It started off with bake-sales on the library walk in the early morning hours, offering a scrumptious spread of local and overseas delicacies, and barbecue in the afternoon. The main highlight of the morning hours was the flash-mob by the students and staff at the library lawn featuring ‘Go Ebola Go’ – a song written by the Alliance members in various languages.

The need for global involvement to adequately and swiftly control the outbreak was strongly advocated by the Alliance members; as expressed by one of our students, distance and geographical barriers now mean little with global exchanges becoming a part of our daily lives. It has become increasingly apparent that we all share both responsibility and accountability to jointly tackle any issues as big and deadly as Ebola.

The afternoon continued with a simulation of a typical Ebola treatment unit in West Africa, portraying the dire situation of providing care to the large numbers of patients with limited resources, such as trained healthcare workers and personal protective equipment. The simulation showcased a holistic aspect of issues faced by families and communities when a member is infected or dies from Ebola: rejection of patients by most health facilities due to closure or limited space capacity; trauma of witnessing death of a family or community member; dealing with apparent hopelessness – grief over the loss of lives, and Ebola related stigma and discrimination. The simulation ended with showing more survivors with the increasing amount of aid and donations. The message expressed through the smiling faces was that, ‘one more life lost to Ebola is one too many, and that together, we can end Ebola.’

The day ended with an evening of documentary screening and panel discussions at the John B Reid theatre at the AGSM building. The panelists included Professor Raina MacIntyre, Head of the School of Public Health and Community Medicine, Dr Mike Kamara, and Ms Haijaratu Thomas, both Sierra Leoneans and actively involved in advocacy for Ebola efforts. Prof MacIntyre provided a historical perspective of Ebola and highlighted the catastrophic public health implications of the prevailing Ebola outbreak, while Dr Kamara and Ms Thomas, spoke about the social, cultural, and economic impacts of Ebola in Sierra Leone and the West African region. The panelists stressed the need for effective public health leadership in coordinating the Ebola control efforts in West Africa to ensure a successful and rapid end of the outbreak in the region and prevent further international spread.

All funds raised on the UNSW Ebola day of Action were donated to Médecins Sans Frontiers, which has been actively involved in controlling the Ebola outbreak in West Africa since its onset in March. Further information is available and donations can be made at: sphcm.med.unsw.edu.au/research/infectious-diseases/unsw-alliance-against-ebola
On 9 September 2014 Professor Raina MacIntyre and colleagues Dr Holly Seale, Dr Abrar Chughtai, Professor Guy Richards and Professor Patricia Davidson were the first experts to publicly challenge health worker personal protection guidelines issued by the World Health Organization (WHO), the US Centers for Disease Control and Prevention (CDC) and countries including Australia. These guidelines suggest health workers need only wear surgical masks rather than higher-level protective equipment, such as respirators, when treating Ebola patients. Their editorial was published in the *International Journal of Nursing Studies* (IJNS).

The recommendation for surgical masks for health care workers (HCWs) treating Ebola, are based on evidence that Ebola is largely transmitted through direct contact with blood and bodily fluids. The guidelines only consider this theoretical principal of transmission based on limited experimental studies and epidemiologic data. In a bizarre contradiction, the same organisations recommend higher levels of protection (including respirators, which filter smaller particles than masks, and also create a seal around the face) for scientists working with Ebola in laboratories. Yet scientists work in a cleaner, more controlled environment than nurses and doctors. The hospital is an unpredictable, highly contaminated setting which poses higher risk of Ebola transmission. The research evidence about the transmission of Ebola is limited and uncertain – for example, there are only some 2,000 publications on Ebola on Pubmed as of October 2014, compared to over 80,000 on influenza.

The guidelines fail to consider the complexity of infection transmission in the clinical setting, and the documented spread of Ebola by other modes. They also fail to consider the high death rate of Ebola, the lack of available proven treatments or vaccines, and the human price paid by getting it wrong.

Initially, the authors of the editorial were rebuked, and a barrage of publications in support of these guidelines ensued in leading medical journals. However, the occurrence of a travel-related case of Ebola in late September in the US and the infection of two nurses who treated this patient while following the old CDC guidelines led to change. There was an uproar among US nurses, and the PPE guidelines were discussed in the media (see www.youtube.com/watch?v=ahBzAn4w-9M&feature=youtu.be). The full talk on PPE is available at: www.youtube.com/watch?v=If8B7lpHBP0

The editorial is at: www.sciencedirect.com/science/article/pii/S002074891400234X#

voices in driving change has been highlighted in these events. See: www.healthcanal.com/public-health-safety/56488-leading-nursing-journal-plays-important-role-in-protecting-health-workers-combating-ebola.html

An excerpt on Ebola PPE from Professor MacIntyre’s keynote address at the UNSW Symposium on Public Health Aspects of Infectious Diseases on September 4, 2014, is available at: www.youtube.com/watch?v=ahBzAn4w-9M&feature=youtu.be

The full talk on PPE is available at: www.youtube.com/watch?v=If8B7lpHBP0

The editorial is at: www.sciencedirect.com/science/article/pii/S002074891400234X#

Photos Flickr: Ebola Army Medicine Research; EC DG Echo West Africa; CDC Global Treatment Centre and Handwashing Station West Africa
The infectious diseases field is a major research strength of SPHCM, with a large group of academics who are leaders in this field. Research areas include vaccines, vaccine preventable diseases, infectious diseases epidemiology and modelling, field epidemiology, health economics of vaccines, face masks, biosecurity, and hospital infection control. SPHCM boasts a NHMRC Centre for Research Excellence in Immunisation, and is also a member of the World Health Organization’s Global Outbreak Alert and Response Network (GOARN). SPHCM is also a co-founder of ARM, the Australian infectious diseases emergency field response network.

A graduate diploma or certificate in Infectious Diseases Intelligence will introduce you to the essential aspects of public health control of infectious diseases, including surveillance, screening, epidemiology, vaccination and outbreak control. This qualification is ideal for clinicians who wish to gain a better understanding of the principles of infectious diseases control in populations. Those who wish to pursue a specialised career in public health aspects of infectious disease control would be recommended to complete the MPH Specialisation in Infectious Diseases Epidemiology and Control.

Students can choose from a wide selection of courses in infectious diseases, including the flagship course, Current Challenges in Infectious Diseases, Immunisation Policy and Practice, Tropical Disease Control, Outbreaks, HIV/AIDS: Australian and International Response, and the WHO Communicable Diseases in Humanitarian Emergencies course. Specific infectious diseases subjects can be supplemented with methodological courses such as Epidemiology and Biostatistics.

On completion of the graduate certificate or diploma, students have the option of upgrading their program to a Master of Public Health (MPH) or a MPH Specialisation in Infectious Diseases Epidemiology Control. The graduate certificate program articulates with the graduate diploma, the MPH and the MPH Specialisation in Infectious Diseases Epidemiology and Control.

The program is designed to be delivered either face-to-face or in fully online mode. Fully online mode gives students access to course resources and learning activities via our state-of-the-art online learning management system, meaning you can participate no matter where you are, or what your schedule. We provide multimedia recordings of lectures, interactive learning modules, video clips of real world scenarios and case studies from the field to create media-rich, engaging learning environments. We facilitate collaborative learning opportunities through the use of wikis, blogs, and group discussion facilities and our webinar applications allow students to connect with peers and course convenors in real-time via audio/video link ups. The fully online mode may suit busy clinicians in Australia or overseas who wish to study while working. A mixture of online and face-to-face study is also possible. For those who wish to complete the majority of their study online and also experience Sydney for a short period of time, the option of doing our Summer School courses will meet this need.

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sphcm.med.unsw.edu.au/infectious-diseases-program
UNSW signs agreement with Nobel Peace laureate

Transforming poor and marginalised communities through research into social business and health is the aim of a new agreement between UNSW and Nobel peace laureate Professor Muhammad Yunus. Under the MOU, UNSW’s School of Public Health and Community Medicine will collaborate with the Yunus Centre, established by the Nobel laureate, to improve health outcomes for poor communities in Australia, Asia and the Pacific.

Professor Yunus and UNSW Deputy Vice-Chancellor Les Field signed a Memorandum of Understanding (MOU) at a ceremony in Sydney in October. ‘This exciting partnership will focus on research into the development of innovative approaches to making healthcare available and affordable for those who are left out,’ said Professor Yunus.

Professor Field said the agreement represented the beginning of an ongoing relationship between the University and the Yunus Centre, which aims to promote social business as a means to reduce poverty. ‘This agreement will enhance UNSW’s research strengths in the area of global health and improve understanding of the impact of poverty on health, and health on poverty,’ Professor Field said. ‘It will foster the formation of research networks and collaboration, the sharing of knowledge, and training and development opportunities.’

Under the agreement, the creation of a new ‘Yunus Centre for Social Business and Health’ at UNSW will also be considered. The centre would be part of a global network of university-based Yunus research centres.

Professor Yunus was awarded the Nobel Peace Prize in 2006 and the US Presidential Medal for Freedom in 2009 for his work as the founder of Grameen Bank. Grameen Bank provides small, low-interest loans to the poor in Bangladesh as a means to lift people out of poverty. This model of ‘microfinance’ has been replicated around the world.

Recent Grant Success

The following staff members were successful in being awarded prestigious and highly competitive research grants. Congratulations.

- Associate Professor Virginia Wiseman received an ARC Discovery Grant for research titled: “A systems wide approach to evaluating equity in health financing in Cambodia”.
- Professor Raina MacIntyre was awarded a NHMRC Project grant: “Real time models to inform prevention and control of emerging infectious diseases”. The amount of the grant is $532,796.
- Dr Anthony Newall, received a NHMRC Project grant for “Economic evaluation of alternative pneumococcal vaccination strategies”. The amount of the grant is $236,941.
- Dr Heather Gidding, was awarded a NHMRC Project grant for “Vaccination timeliness in Aboriginal and non-Aboriginal infants: risk factors for delayed vaccination and impact on disease burden—a record linkage study”. The amount of the grant was $520,742.

The sixth Annual Research Symposium on “Advances in Public Health and Health Services Research at UNSW” was held in September 2014. The program included a focus on malaria, emerging infections, sexually transmitted infections, vulnerable populations, translation and policy, epidemiology and modelling, global infectious disease, risk behaviours and infections including presentations by academics and postgraduate research students. Keynote speakers were Professor Graham Brown, Professor Raina MacIntyre and Professor John Kaldor. The day also included a lively debate ‘Planning for emerging epidemics is a waste of time’. To download presentations from the symposium go to: sphcm.med.unsw.edu.au/symposium/annual-research-symposium

Photo: Keynote Speakers: Prof John Kaldor, Prof Raina MacIntyre, Prof Graham Brown
The Initiative works to reduce the prevalence of preventable health outcomes and alleviate health disparities within the US. The Health Matters Initiative is one of the eleven initiatives that make up the Bill, Hillary and Chelsea Clinton Foundation. President Clinton established the Foundation after his second term in office with the mission to improve global health and wellness, increase opportunity for women and girls, reduce childhood obesity, create economic opportunity and growth, and help communities address the effects of climate change.

In the US, the prevalence of chronic disease, and health risk behaviours that cause chronic disease, is high. Seven of the top ten causes of death in America are chronic diseases – and racial and ethnic minorities are more likely to suffer from these preventable conditions than the American majority.

In response to this, the Health Matters Initiative works at the national and community levels, and in the digital and technology space, building strategic partnerships to create systemic changes for health improvement in America. I have been working specifically in the areas of health, technology and digital innovation, on compelling ways to leverage the power of technology to improve health in the US.

I have assisted staff on assignments ranging from employee health and corporate wellness to women’s mental health and access to sports and physical activity. Technology has the potential to enhance health in all of these areas; particularly with the incredible reach of mobile technologies and the rise of mHealth, as well as the rapidly expanding wearable device market. I have also had the opportunity to learn about, and contribute to, the Initiative’s work in all of these areas.

In addition, I had the opportunity to see, firsthand, how the Initiative’s, and indeed the Foundation’s work, touches individuals. One of the biggest projects I have been involved in is the second in a series of three women’s health codeathons. This codeathon encouraged majority female developers and technologists to design and build functional digital prototypes around women’s mental health that can be scaled in a sustainable and impactful manner. As part of the internship program I have also volunteered to repackaged food for a New York food bank at 3am, and built compost bins in zero degree weather in a Harlem community garden, where the nearest grocery store is over thirty blocks away.

In each task that I complete in my internship at the Foundation, I draw on the knowledge and skills taught in the SPHCM masters program. The comprehensive understanding that I have of foundational concepts in public health and the skills I have developed allow me to contribute to this large-scale, high impact organisation in a professional and substantive capacity.

I would encourage other UNSW public health and health management students to use their time at the school as a springboard to practical opportunities like the internship at the Clinton Foundation that provide opportunities to learn more about your field of study, and put your new skills into practice.”

Rachel Wilkins is a Sydney-based registered nurse and student in the Master of International Public Health program at the UNSW School of Public Health and Community Medicine. However, for the past four months she has been living in New York City and working as an intern at the Clinton Foundation’s Health Matters Initiative. This is a reflection on her experience.
It is not every day that research makes it to the front page of the Sydney Morning Herald. However, recently, research by Louise Shaw (PhD student in the School) did just this. Her research was based on data collected from a large cohort of cyclists enrolled in the Safer Cycling Study. Louise’s paper, published in the journal Injury Prevention (doi: 10.1136/injuryprev-2014-041243), looked at road rule breaking among cyclists. She explored both how and why cyclists break the road rules.

Louise found that riding on the footpath and going through a red light were the most common infringements reported by cyclists. The research found that such actions were often motivated by issues of safety, with cyclists avoiding perceived danger from fast-moving vehicles in traffic and ensuring minimal conflict with drivers.

In addition to print media interest, Louise (and the research team) also undertook a number of radio interviews across Australia. “It was a great experience, seeing my research out in the public domain,” says Louise, “I really hope my work is able to usefully inform debate on how to make cycling safer”.

The Safer Cycling study was funded by an Australian Research Council Linkage Projects funding scheme, with financial contributions from the Roads and Maritime Services, Sydney South West Area Health Service, Bicycle NSW and Willoughby City Council.

It aimed to measure crash and injury rates for cyclists, and to identify contributing factors; as well as to collect data on other aspects of cycling, such as aggression experienced while cycling, and infrastructure preferences, road rule breaking etc. Data were collected through six cycling diaries over the course of a twelve month period.

The study is led by Associate Professor Roslyn Poulos from the SPHCM, who is also Louise’s PhD supervisor. “Over 2000 cyclists from across NSW have contributed data to the study,” says Ros, “We aimed to gather information that is useful for decision makers in planning for the needs of cyclists.” Data analysis continues, and more scientific publications from the study are anticipated in the near future.

Let’s hear from you

We would like to keep in touch with former staff and students of the School. Please send your contributions to the editor Kevin Forde: k.forde@unsw.edu.au

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