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## **RE: HCCA Feedback on the Canberra Sexual Health Fact Sheets (Batch 1)**

The Health Care Consumers' Association (HCCA) of the ACT was formed over 30 years ago to provide a voice for consumers on local health issues and now provides opportunities for health care consumers in the ACT to participate in all levels of health service planning, policy development and decision making.

HCCA welcomes the opportunity to provide feedback on the Canberra Sexual Health Fact Sheets (Batch 1). HCCA recognises the importance of documents like these in developing the expertise of health consumers to actively engage with our own health care, understand the health care system and to be able to participate as equal partners with health professionals to make informed decisions about our own and our family's health. Health literacy is an essential right of a health care consumer as addressed in the Australian Charter of Health care Rights, particularly the charter rights of access, communication and participation.

### **General Comments**

The five brochures being reviewed are **Bacterial Vaginosis, Candidiasis, Colposcopy, Chlamydia** and **Emergency Contraception**. Overall the fact sheets are clear and easy to follow with a logical flow. This document will focus on the content of these brochures, however HCCA would also be willing to comment on the finished brochure layout (3 panel, folded), and any included figures. More broadly it needs to be clear if these are the only documents being used to inform clinic clients or whether the brochures form part of a more comprehensive information strategy including online information. In all of the brochures provided it is essential that the sections *Where can I get tested and treated for ------ in Canberra? and Useful Websites*. Whilst HCCA has been told that the brochures will only be provided in English due to the low numbers of CALD community members using the Sexual Health clinic, we urge you to develop various language brochures for your website or database to be printed on demand. Providing access to health literacy is outlined as part of the ACT Health Multicultural Coordinating Framework as a key action area to increase health literacy. *'Establish and maintain a register of materials available in languages other than English.'-* **Key Action Areas (Section 6.42) Internal Draft of ACT Health Multicultural Coordinating Framework 2014** 

If these CALD brochures are developed, HCCA would be willing to provide community feedback on these documents.

## **Specific Comments**

Specific comments will be given for each fact sheet under the headings within each document.

## **Bacterial Vaginosis (BV)**

Overall this brochure is clearly laid out with appropriate information. In the first sentence it may be clearer to identify the difference between BV and Candidiasis, perhaps a clear statement about which pathogens actually cause the symptoms of the disease.

## What are the symptoms of bacterial vaginosis?

In this section the last paragraph it states 50% of woman with BV do not have any symptoms. For these woman <u>it</u> may not need any treatment. It is unclear here what it is referring to, is it the woman who may not need treatment or the BV? Rewording this to include for the **majority** of these women, would also make it clearer. Under this heading we suggest you include a sentence indicating that BV can occur at the same time as other infections. This section also does not seem to fit under the symptoms heading as it describing data about woman without symptoms rather than describing physical symptoms. We suggest moving this paragraph to under the heading of *What can happen if Bacterial Vaginosis is not treated*?

### What causes bacterial vaginosis?

Instead of using the word *normal* to describe healthy vaginal bacterial flora we suggest, '*The vagina contains a range of bacteria which help keep the vagina healthy.*'

### How is bacterial vaginosis diagnosed?

Under this heading we suggest including a sentence stating that 'diagnosis is made on both signs and symptoms, following this your practitioner may use a cotton swab to collect vaginal discharge.' You state that a cotton swab is inserted into the vagina, it would be good to make clear if this is with the use of a speculum, and how far into to the vaginal opening the swab is inserted. It isn't clear that the cotton swab is what collects the vaginal discharge that is examined. Perhaps including; A cotton swab is inserted into the vagina, 'this removes a small amount of vaginal discharge that is then examined under a microscope' would clarify this. Please include where the sample from the swab is examined under the microscope, is it sent away to a pathology laboratory or examined under the microscope in your GP's or practitioners surgery or office?

## What is the treatment for bacterial vaginosis?

It is important that this section also includes mention of the fact that BV often reoccurs if not treated properly.

You state that male partners do not need to be treated, but it is not made clear if female partners need to be treated.

## What can happen if bacterial vaginosis is not treated?

While you state that little is known about the causes and that in most cases treatment is not needed or symptoms are not present, it seems it can cause serious health consequences. It would strengthen the document if you expanded on how BV was found to be linked to these health consequences and what the relative risks are.

## **Candidiasis**

This brochure is again clear and well laid out. You inconsistently capitalise the word candidiasis throughout the document which should be consistent throughout the document.

## What are the symptoms of Candidiasis?

We suggest including that candidiasis can also occur around the anus and in the mouth, throat and oesophagus.

### What causes candidiasis?

When describing risk factors for candidiasis, it may be clearer for readers if it is changed to **risk factors that** <u>may</u> increase chances of candidiasis. When including diabetes as a risk factor it is important to specify that this is when blood sugars are poorly controlled and if repeat episodes of candidiasis is occurring diabetics should speak to their doctor or diabetic specialist. It may also be informative to include, antibiotics and the use of recreational drugs as added risk factors.

## What is the treatment for candidiasis?

In this section each paragraph is missing the capital letter at the start of each sentence. When you mention oral treatment you write that these treatments should be avoided during pregnancy and breast feeding or if there is a *risk* of pregnancy this could be amended to *chance of pregnancy*.

### Will candidiasis come back again?

You mention that in women repeat occurrences of candidiasis is possible, please include a sentence stating if the same is true for men.

## Is it safe to have sex with candidiasis?

In this section an explicit answer as to whether it is possible to pass on candidiasis to sexual partners is needed.

## **Colposcopy**

This is a comprehensive fact sheet that could be strengthened by some clarification of the information provided and some added detail in relation to biopsies.

The first sentence is quite dense and could be reworded to make it clearer, it currently reads as though the doctor looks through a stand rather than a microscope that is mounted on a stand.

## Why would a colposcopy be recommended?

In the first sentence the colposcopy procedure is described as *examining the cervix* but under this heading examination includes the *cervix, vagina or vulva*. It needs to be clear if colposcopy examines all three areas or just the cervix.

# Preparing for <u>a</u> colposcopy

In the first sentence we suggest changing the word *the* to *your* so it reads .../...*pessaries in your vagina.* 

## What happens during this the procedure?

In this section you state that the practitioner may take *another* pap smear this could be clarified as it isn't clear when the first pap smear was performed. This section also describes the cervix being *swabbed with some solutions*. It isn't clear how this is performed, what a swab is, or what is involved. This could be expanded upon. You state that a *biopsy* may be taken. The brochure should include information on what a biopsy is, and how this is performed. It would also be good to indicate if the patient receives further information or preparation for a biopsy before or during the colposcopy. We suggest including a sentence about whether there is bleeding during this procedure.

# Is having a colposcopy a painful procedure?

In this section, in the second sentence there is a small typographical error and should read *It feels the same has having a pap smear taken.../...* 

# After <u>the</u> colposcopy

We suggest grouping the 'expected' or 'normal' after-effects together first, moving the statement about *normal brown or black discharge for the first few days* before

listing side effects that require treatment or assessment. You state that most woman are able to return to *work* straight away. We suggest changing this to *most women are able to return to 'regular activities' straight away*. To avoid presuming the woman is working. Again we suggest the use of the word '*your* 'instead of *the* when referring to the use of tampons ect. You state that *sex* should be avoided 7 days after a biopsy, it needs to be clear if this is all forms of sex or just penetrative sex.

## <u>Chlamydia</u>

A very clear fact sheet with only minor changes needed. The **Useful Websites** section could be further expanded to include the Jean Hailes women health website and other reputable online resources.

In the third sentence a comma is needed after commonly.

### How is chlamydia diagnosed?

After swabs are taken it would be good to indicate what happens next. Are the swabs sent somewhere? What tests are performed? How long before you get the results and how do you access them?

#### What is the treatment for chlamydia?

We suggest rewording the first sentence to *Chlamydia is usually treated with a single dose of oral antibiotics, if detected early.* Leaving out the names of the antibiotics and the word *easily*.

### **Emergency Contraception**

Some additional sections could be added to this fact sheet to make it more informative but information provided is quite straightforward.

# What if I am taking Emergency contraception because I have missed my usual contraceptive pills?

In is unclear in this section if you can take Emergency Contraception in addition to regular contraceptive pill this could be clarified.

### Can I use Emergency Contraception more than once?

It is important to make clear what the time frame for using EC is, can you use EC 3 days in a row? Or twice in one day?

### Where can I get Emergency Contraception in Canberra?

In this section the provision of street addresses for these services would be helpful. A section or note should also be included stating that Calvary Hospital <u>does not</u> provide EC.

Additionally a section on what happens if you have missed the time frame for EC and need advice about abortion and/or family planning could be included. This could include contact information for SHFPACT, Marie Stopes ect.

In conclusion, we are pleased to provide feedback on these brochures and look forward to reading more in the future. Please feel free to contact us in regards to reviewing future drafts of these documents in both English and languages other than English.

We are happy to discuss our submission further.

Yours sincerely,

Lewis

Darlene Cox Executive Director Health Care Consumers' Association

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