



WOMEN'S HEALTH
AND WELLBEING
Barwon South West Inc.

WOMEN'S HEALTH AND WELLBEING BARWON SOUTH WEST INC.

CONDOM ACCESS & AVAILABILITY IN THE GREAT SOUTH COAST

IMPROVING WOMEN'S SEXUAL & REPRODUCTIVE HEALTH OUTCOMES

2017

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This report has been produced by the Sexual and Reproductive Health Promotion team at Women's Health and Wellbeing Barwon South West, led by Emily Grant with large contributions from Sara Elzahbi and Katie Young.

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Definitions

Site/s: a collective term used for a building (e.g. public toilet, business, organisation etc) which has condoms available either to purchase (business or condom vending machine) or for free (e.g. community health centre).

CVM: Condom vending machine(s)-an apparatus which dispenses either single or double packs of condoms when a coin is inserted. Usually costing \$1 or \$2 and may offer a variety of other products (e.g. tampons, deodorant, perfumes etc).

Town: population over 1,000 residents

Rural community: population less than 1,000 residents, generally with at least 1 operating business present (general store, service station, pub etc.)

Locality: small number of residents, generally without an operating business present and may or may not have obvious boundaries, or buildings (e.g. town hall, CFA shed) present.

WHWBSW: Women's Health and Wellbeing Barwon South West

LGA: Local Government Area

GSC: Great South Coast

Used spaces: A term was used to describe areas which are frequently occupied and visited by the public. Places such as schools, hospitals and parks.

Freely available condoms: These are condoms which are not only provided at no cost (free), but are also publicly available. This means being presented in a way which does not require permission to be sought to obtain them.

Disclaimer

WHWBSW acknowledge the limitations in the research, and data represented in this report is to be used with this in mind. Firstly, data may have changed since time of inspection which may influence both availability or accessibility in a positive or negative way. Additionally, despite WHWBSW's best efforts to reach each area and inspect as many potential sites, there may have been some sites which were missed due to human error. Researcher bias is also a limitation, as data on accessibility was collected based on the perception and experience of the WHWBSW staff member.

Executive Summary

This project was developed to better understand the availability and access to condoms in our region to be able to identify gaps and needs in service. Condoms are the only way to prevent both STIs and unplanned pregnancy. Research has shown that barriers in availability and access to condoms combined with attitudes and stigma results in decreased use of condoms during sex.

This project involved an environmental scan, with the development of a survey to collect qualitative and quantitative information. Staff members at Women's Health and Wellbeing Barwon South West (WHWBSW) designed, planned and implemented this condom mapping project. They used maps to determine towns within each Local Government Area (LGA) and organise travel routes. Research into potential sites was done through internet searches, business directories and local knowledge. Staff visited each town and inspected each potential site and recorded findings in a 'Survey Monkey' questionnaire which had been developed specifically for the project. Reports have been written from the collated results for each LGA and collectively for the Great South Coast and Barwon regions by WHWBSW staff.

Key findings on availability

In the Great South Coast (GSC):

- 90 towns, rural communities and localities were visited by researchers to investigate condom availability and access.
- 43 of these 90 towns and rural communities were identified by staff as expected to have condoms available.
- Of these, **25 towns and rural communities had condoms available** through businesses, condom vending machines and freely available condoms.
- There were 92 sites for condoms found across these 25 towns in the GSC.
- 55 additional sites, who were expected to have condoms available, were found to not have them available.

See Appendix 1 for a full list of these towns, rural communities and localities.

Key findings on accessibility

- Four businesses (5%) were open 24hrs and only three towns had businesses open after 10pm for condom purchases.
- 14 out of 84 stores had condom packets available for less than \$5.
- All businesses had condom packets available for less than \$10.
- Four towns had self-service registers available.
- Five out of 84 businesses had condoms located behind the counter.
- Poor variety and choice was a barrier at 48% of all businesses.
- Poor product placement was a barrier at 42% of businesses.
- Over three quarters of businesses were both geographically accessible and in close proximity to used spaces.
- Five sites with condom vending machines were found. One LGA had four sites and one LGA had one site.
- Three sites had freely available condoms.

Methodology

This project was an environmental scan. The WHWBSW researchers developed a questionnaire on Survey Monkey to collect data on condom accessibility. The questionnaire was developed by considering various aspects which influence decision making in purchasing condoms. Young people (teenagers and under 25yrs) were the primary focus for this research, however access for the general population was also considered. During planning and development of the questionnaire, consideration on the scope and boundaries of the project were taken into account, such as:

- Not including night time venues in the scan (i.e. pubs and clubs). These venues are not always accessible by all people (e.g age restrictions). Additionally the opening hours of the venues provided limitations for the researchers in conducting the scans.
- Anonymity and privacy or confidentiality in purchase was not included as a specific category for the barriers section. This was done because the *Victorian Rural Women's Access to Family Planning Services: Survey Report 2012* found that anonymity was a barrier to accessing condoms in the vast majority of cases. It was therefore decided that the perception of anonymity and privacy in purchase was a constant barrier regardless of where a person obtains condoms.

Wording of the questions, was an important component of the research:

- In the question on **cost per packet**: the usual price was used rather than the sale price due to the time frame of data collection. Researchers collected data over several months and wanted the price to be reflective of the general cost rather than sale prices.
- In the questions on **variety of packets**: "Options" was based on different packets available which included: varied brands, sizes, designs, shapes, number of condoms per pack, colours, textures, or flavours.
- In the questions on **barriers**: "Other" also included comments on listed barriers e.g comment on how the product was displayed (under poor product placement). Geographic accessibility is being in town, walking distance or close to public transport. Proximity to used spaces is being near schools, parks, hospitals or other shops. These two are separate as sometimes businesses may be in town, but the school, parks hospitals etc are on the outskirts of town. Researchers wanted to make a distinction between these two.
- In the questions on **enablers**: it was not assumed that lack of a barrier equals an enabler, as this is not always the case.

Researchers used a list of localities within each LGA to then develop travel routes on Google maps. Through internet searches, business directories and local knowledge a list of potential sites within each town or rural community was developed. This was used as a guide for researchers when undertaking the environmental scans. Each council was contacted and asked to provide information on the availability of CVM within council owned or maintained facilities. Researchers used this information to physically check the facilities and locate the CVM to collect data.

Organisations identified as potentially having freely available condoms (community centres, health services and youth services) were called and asked if they had condoms available. Researchers used this information to assess freely available condom accessibility.

Data was collected for the GSC from September 2016 to April 2017 and analysed between May 2017 and October 2017. Reports have been written for each LGA as well as collective reports for the GSC and Barwon regions.

About the Great South Coast

The GSC region covers five local government areas in the South West of Victoria. This includes the shires of: Corangamite, Moyne, Southern Grampians and Glenelg and Warrnambool City Council. The region has strong tourism, agricultural and fishing industries, a major deep-water port in Portland, established rail networks, several commercial airports as well as continuing investment in sustainable energy production from wind farms and gas-fired power plants. The region attracts many tourists with parts of the Grampians National park and Great Ocean Road included in the area. The GSC is home to just over 100,000 residents with approximately half living in the three major centres of Warrnambool, Portland and Hamilton. To service this sparsely populated area many smaller inland and coastal towns and settlement networks act to support economic, social and community needs (Victorian Government 2014).

Towns (more than 1,000 residents) include:

- Warrnambool: 29,661 residents
- Dennington: 1,668 residents
- Allansford: 1,521 residents
- Port Fairy: 3,340 residents
- Koroit: 2,055 residents
- Mortlake: 1,372 residents
- Camperdown: 3,496 residents
- Terang: 2,288 residents
- Cobden: 1,839 residents
- Timboon: 1,202 residents
- Coleraine: 1,029 residents
- Hamilton: 9,974 residents
- Portland: 10,800 residents
- Casterton: 1,668 residents
- Heywood: 1,726 residents

Rural communities (less than 1,000 residents) include:

- Macarthur: 522 residents
- Peterborough: 247 residents
- Caramut: 246 residents
- Hawkesdale: 322 residents
- Nullawarre: 267 residents
- Panmure: 424 residents
- Wangoom: 226 residents
- Woolsthorpe: 422 residents
- Yambuk: 267 residents
- Skipton: 586 residents
- Port Campbell: 478 residents
- Simpson: 569 residents
- Lismore: 420 residents
- Derrinallum: 415 residents
- Princetown: 241 residents
- Balmoral: 294 residents
- Dunkeld: 678 residents
- Peshurst: 622 residents
- Branxholme: 351 residents
- Byaduk: 123 residents
- Cavendish: 334 residents
- Glenthompson: 232 residents
- Merino: 253 residents
- Nelson: 190 residents
- Digby: 124 residents
- Narrawong: 387 residents
- Cape Bridgewater: 150 residents

(Population data from ABS 2016 Census)

Condom Mapping Results

Number of sites

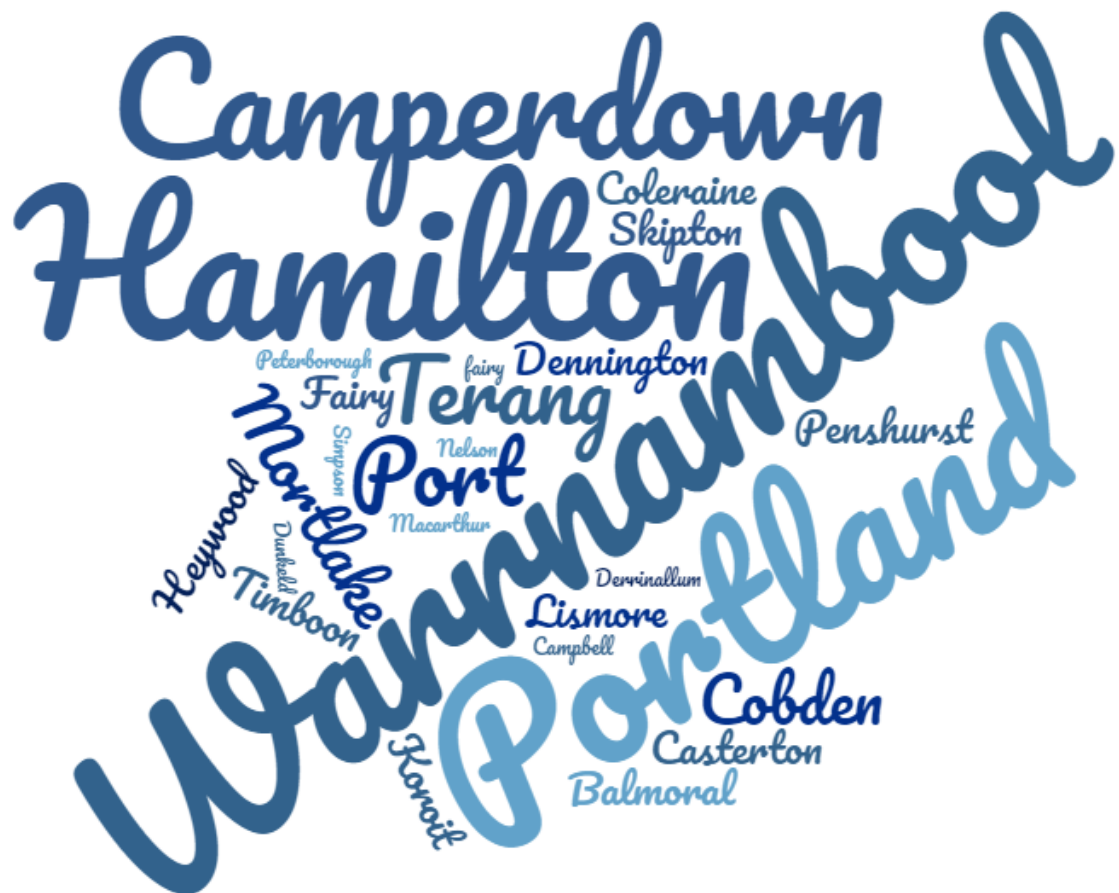
92 sites were found across the GSC.

Number of Towns

25 towns in total had condoms available.

These were spread across LGAs:

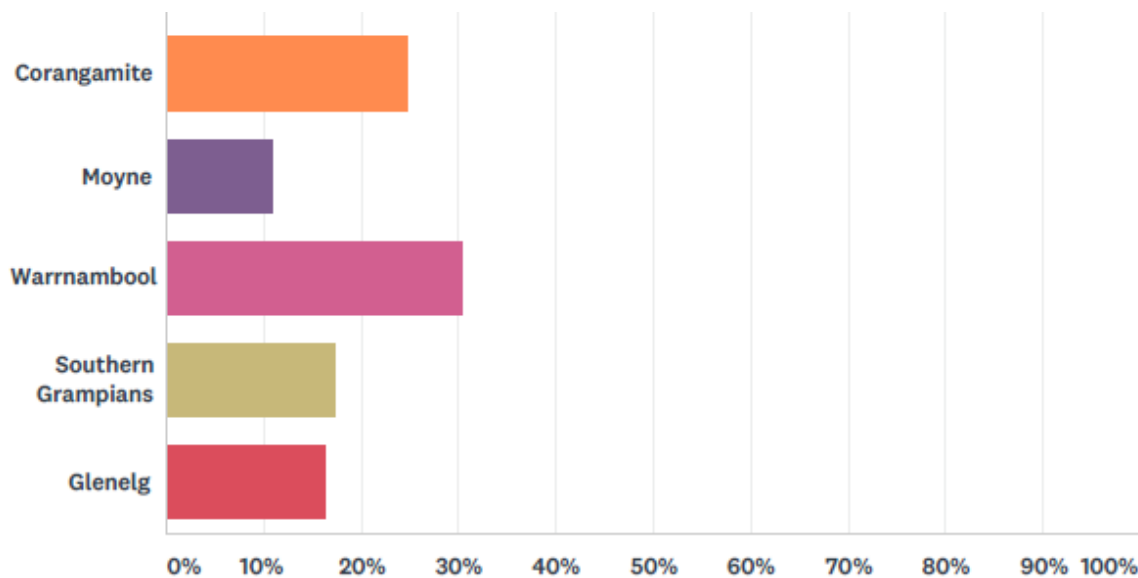
- Corangamite: nine towns
- Moyne: five towns
- Warrnambool City: two towns
- Southern Grampians: five towns
- Glenelg: four towns



Sites per LGA

Warrnambool City hosted the most sites for condoms at 30%, closely followed by Corangamite at 25%.

Breakdown of sites per LGA.



Number of Businesses vs CVM's vs Freely available

Businesses:	84	91% of sites
CVMs:	5	6% of sites
Freely available condom sites:	3	3% of sites

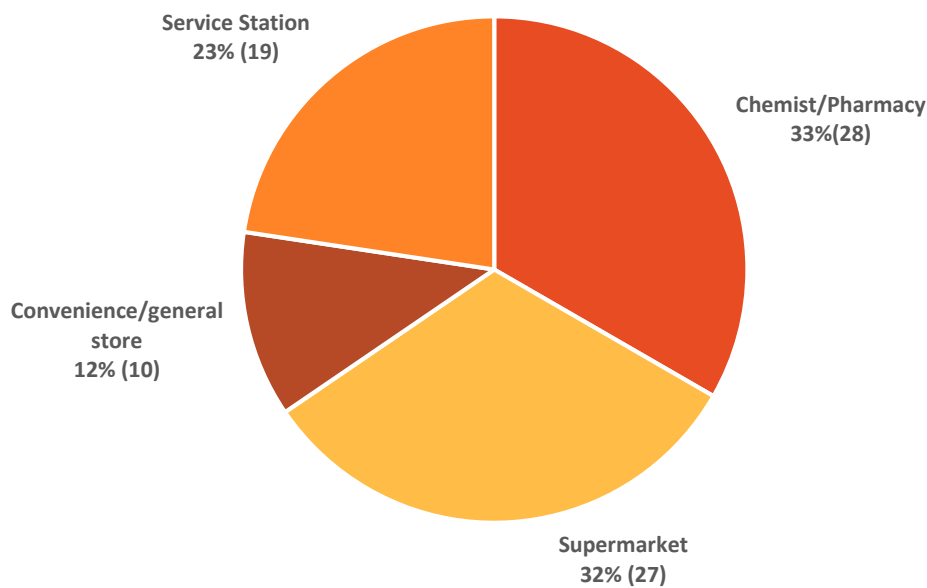
Condom Accessibility in Retail Settings

*The following findings are based on the total number of businesses that sell condoms, in this case, **84 out of 92 sites (91%)**.*

Type of business

In the GSC condoms were found for sale in 4 types of businesses.

- 33% of businesses were Chemist/Pharmacies
- 32% of businesses were Supermarkets
- 23% of businesses were Service stations
- 12% of businesses were Convenience/General stores



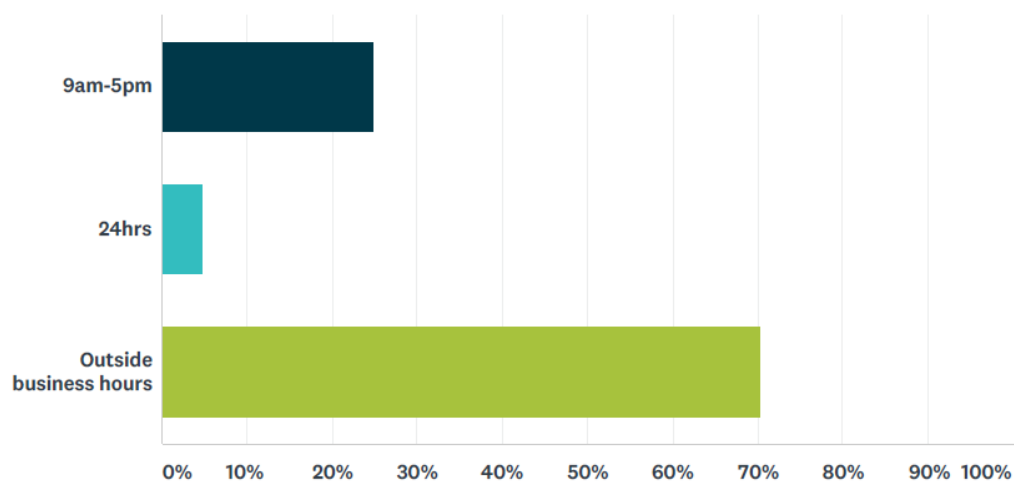
Opening hours

Majority of businesses were open at times outside of work or school hours, increasing accessibility.

- 70% of businesses were open outside usual business hours
- 5% were open 24hrs
- 25% were open usual 9am-5pm hours.

Only Warrnambool, Camperdown and Portland have businesses open after 10pm for condom purchases.

Opening hours cont.



Of the 59 businesses who were open outside usual business hours:

- 12 closed by 6pm
- 29 closed between 6pm and 9pm
- 15 closed between 9pm and 10pm
- Two closed between 10pm and 11pm
- One closed at midnight

The opening hours of weekdays was used; therefore, it is worth considering that hours on the weekend are probably more limited than mentioned here.

Location of condoms within the store

Categories for this question were “on the shelf” or “behind the counter”. Accessibility decreases when people must ask for items behind the counter, combined with barriers of privacy in purchase.

- 94% of businesses had condoms located on the shelf
- Of the five businesses with condoms located behind the counter (and requiring customers to request them):
 - 3 were visible from the counter, either located on the wall behind the register or in a stand behind the register
 - 2 were hidden from view, one business had them stored out the back of the shop and one had them stored high in a cupboard.

Previous issues with theft was a common theme across the GSC and was often attributed to condoms being in a poor location within stores. Whilst condoms may have been on the shelf, which increases accessibility, some businesses had them located in hard to reach/find locations on the shelves, which decreases accessibility. This information was collected in the ‘Barriers’ section below.

Self-service registers

Self-service registers increase accessibility by providing privacy in purchase.

- Nine businesses had self-service registers.
- 89% of businesses did not have self-service registers.
- Four towns, Warrnambool, Dennington, Hamilton and Portland had self-service registers.

Majority of businesses didn't have self-service registers; however they are present in some of the major centres across the GSC.

Range of price of packets

- The lowest price of a packet available ranged from \$4 to \$10.
- The highest price of a packet available ranged from \$4 to \$25.
- The lowest priced packet contained 6,8,10, 12 or 24 condoms. With 55% being a 12pk.
- The highest priced packet contained 6,8, 10,12, 20, 24, 30 or 40 condoms.



Could you get a packet for less than \$5?

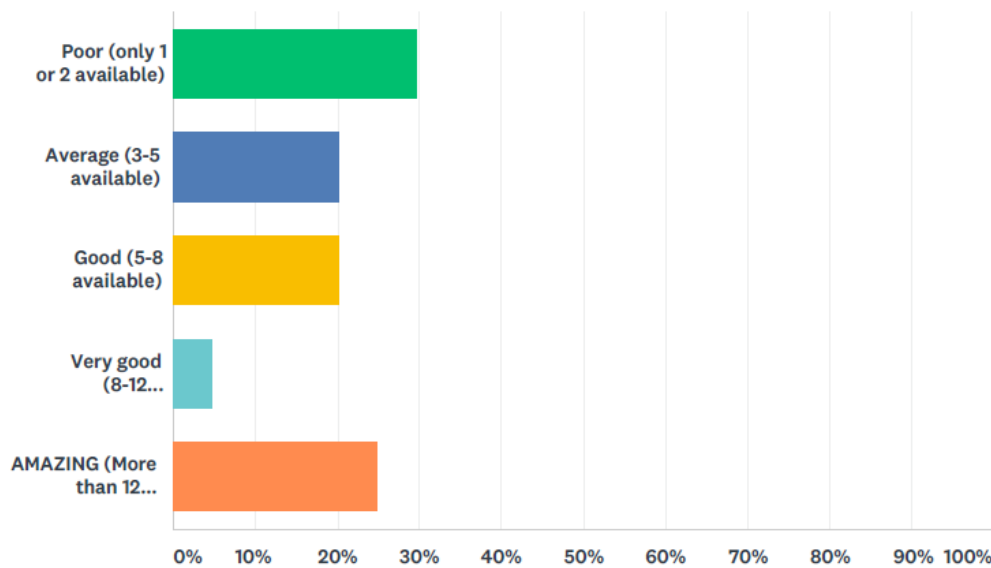
Yes, at 14 businesses (17%).

Could you get a packet for less than \$10?

Yes, at all stores.

The lowest and highest price was used instead of "cheapest price per condom" as it was decided that not every customer would be considering the "best price" when purchasing. Decisions might be based on a budget and spending the least amount of money, over best value for money. It is worth noting that many places had packets that were good value for money (between 40¢ and \$1 per condom). Many businesses also had packets on sale at the time of inspection, however these prices were not collected. Around five businesses didn't have the price displayed on or near the packets, which could be a barrier to purchase. Several stores also had packets on sale that were close to expiry date and considering condoms last for a few years, this would suggest poor sales.

Variety of packets



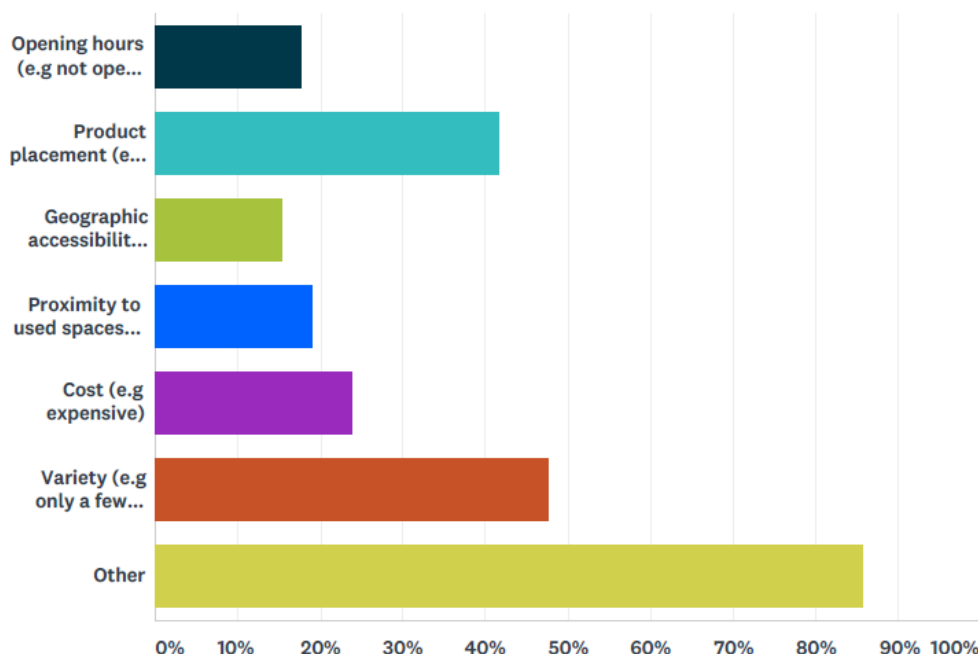
- 30% of businesses had “poor variety (only 1 or 2 options)”
- 20% of businesses had “average variety (only 3 to 5 options)”
- 20% of businesses had “good variety (between 5-8 options)”
- 25% of businesses had “amazing variety (more than 12 options)”

Variety was diverse and spread across the GSC region. Unfortunately, the most common was one or two options, which is quite poor variety. Variety may impact on purchasing condoms and it also may indicate the sales and demand on purchase on stores. Businesses with more than 12 options, apart from a few, were mostly large supermarket or pharmacy chain stores (i.e. Woolworths, Coles, Direct Chemist etc). This could indicate that customers are more likely to purchase condoms in these larger stores, rather than smaller stores. This would be supported by evidence that anonymity and privacy in purchase is a barrier to purchasing condoms, and in larger stores this would be less of an issue compared with small stores.

Barriers to purchase

Barriers were established by categorizing those things which would decrease ease of purchase. Anonymity and privacy or confidentiality concerns are acknowledged as major barriers to sexual and reproductive health. These concerns are amplified within rural and regional areas, where community members are likely to know those who work in local businesses. As condoms are often considered an embarrassing or sensitive item, being served by someone you know may be intimidating and a possible barrier to purchase. Anonymity in purchase was considered to be a constant and known barrier and was therefore not included as a category. However, researchers additionally commented that anonymity and/or privacy was a barrier at 66 sites (78%).

Barriers to purchase cont.



Top 3 barriers

1. "Poor Variety" was a barrier at 48% of businesses
2. "Poor Product placement" was a barrier at 42% of businesses
3. "Cost" was a barrier at 24% of businesses

Privacy:

Potential perceived anonymity or privacy in purchase was the most common barrier in almost 75% of businesses. An additional barrier in several businesses, mostly pharmacies, was the prompt staff assistance. Whilst this would usually be an enablers and positive factor for customers, when purchasing condoms - an item which can be embarrassing or sensitive - it can become intimidating, especially for young people. Majority of pharmacies had a retail assistant approach researchers almost immediately after entering the store to offer for assistance. Some stores themselves were quite small, making privacy in purchase an issue, as well as sometimes making it difficult to find condoms as they were mixed in amongst other products

Product placement:

Additional comments on "Poor product placement" included comments on condoms being on a high shelf out of reach, in an odd location within the store making them harder to find, positioned right at the front of the store visible to the registers, or being on the end of an aisle or stand, making them difficult to find.

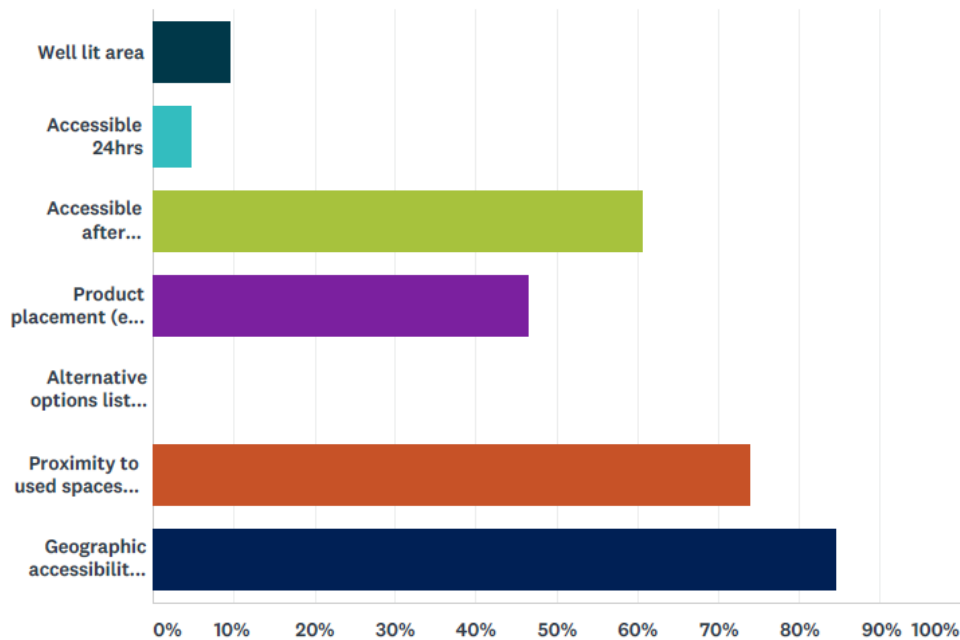
Other barriers:

Additional barriers/comments:

- Feedback from some retail staff was that they rarely, if ever sell condoms.

- Some stores had opening hours that were very limited i.e. only open for a few hours in the middle of the day, or only open a few days per week.

Enablers to purchase



Top 3 enablers

1. 85% of businesses were geographically accessible (in town, walking distance or near public transport).
2. 74% of businesses were in close proximity to used spaces (near schools, parks, hospitals or shops).
3. 61% of businesses were accessible after hours.

Condom Vending Machines

The following data is based solely on sites which sold condoms through condom vending machines (CVM). The number of sites was five out of 92.

Location of CVMs

There were five sites with six machines in total located in Hamilton, Penshurst, Balmoral and Portland.

- Three sites were public toilets, with a total of 3 machines. Two sites had CVMs in accessible/unisex toilets and one site had a CVM in Female toilet. There is a potential at this latter site there was a CVM in the Male toilet, however at time of inspection this could not be confirmed.
- Two sites were service stations with a total of three machines. One site had a CVM in the accessible/unisex toilet and one site had one machine in both Female & Male toilets.

According to the council, machines were supposed to be located in an additional public toilet in Hamilton, however were unable to be located upon inspection in the female and accessible toilets. It is acknowledged that the CVM could be located in the male toilets but this could not be verified on day of inspection. If the CVMs are not located in a unisex facility and are only placed in either male or female toilet this poses accessibility issues as they cannot be used by any gender.

Price per condom

All CVMs sold packets of two condoms (i.e. 2pk for \$1 or \$2)

- Three sites had condoms for 50c each (2pk for \$1)
- Two sites had condoms for \$1 each (2pk for \$2)

Hours available

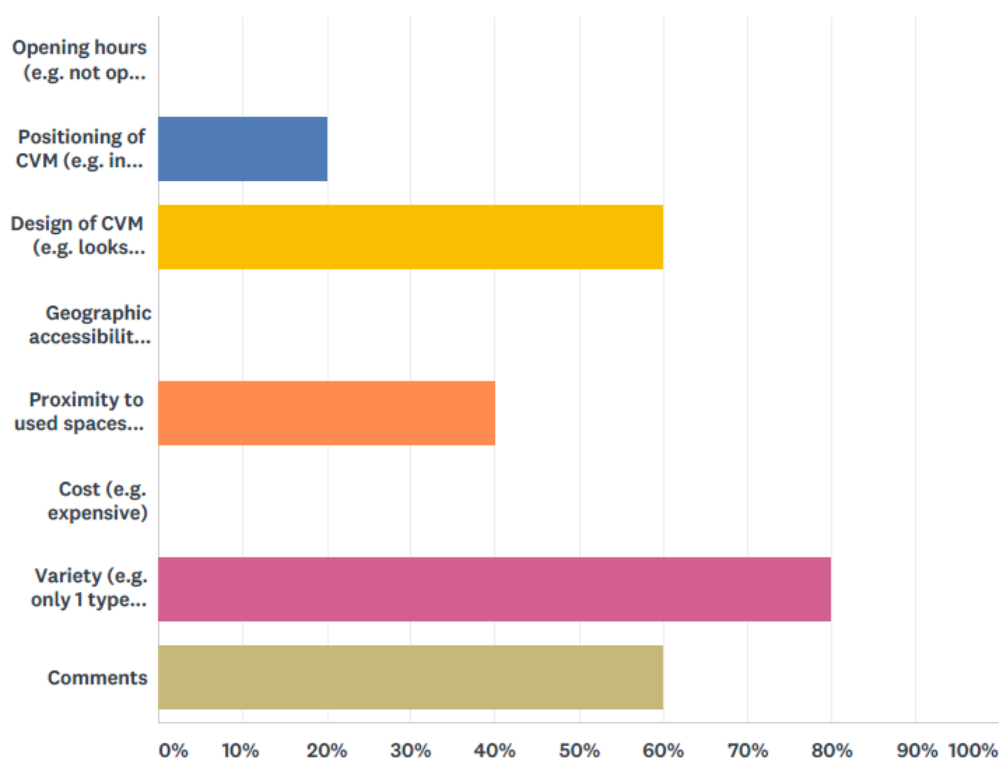
All sites were open outside usual business hours.

- Three sites were open 24hrs
- One site was open 4.45am-11pm
- One site was open 6am-9pm

Working order

- Three sites were tested by the researcher and the CVM effectively dispensed condoms.
- One site not tested by the researcher had two machines: one located in the female toilet with an "out of order" sign on it. The one located in the male toilet was in working order according to the retail assistant at the site.
- The other site not tested by the researcher was in working order and maintained frequently according to the retail assistant at the site.

Barriers to purchase

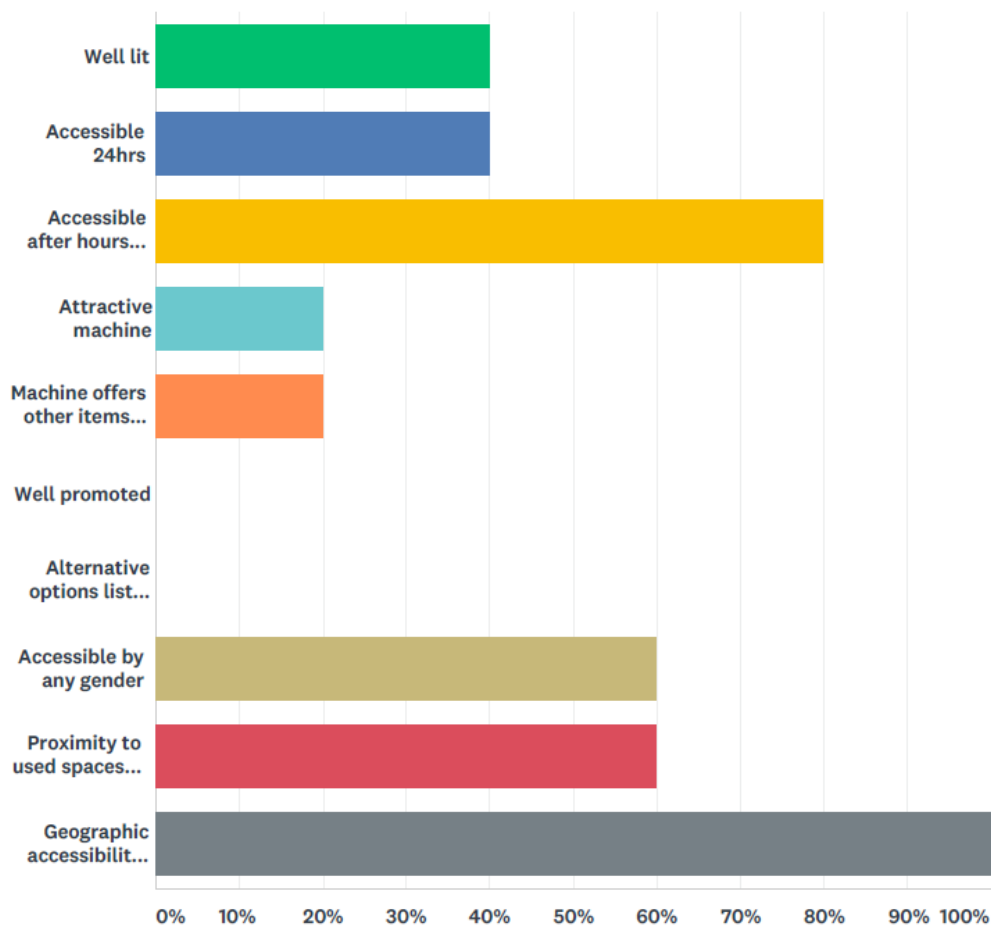


- Poor variety was an issue with 80% of CVMs with four out of five sites only offering one option. One site offered two options.
- Design of the CVM was an issue with three of the five sites. Machines looked unreliable and didn't display either cost &/or product on the machine.

Other barriers/issues:

- All machines required a certain coin (either \$1 or \$2 coins only).
- One site had the CVM located on a North facing tin wall, and on the day of inspection it was very hot. This could pose an issue as condoms need to be kept in a cool, dry spot.

Enablers to purchase



- The major enabler was geographic accessibility, with all sites being in the middle of town.
- Additionally, being accessible almost 24hrs a day was a major enabler for most sites.
- Three out of five sites had accessibility for any gender and ability.
- Three out of five sites were also in close proximity to used spaces.

No sites had any form of promotion that the machine was located there. There were no listed options for alternative locations (if that machine was broken). Only one machine was visually appealing.

Freely Available Condoms

Locations

Only three sites were noted as providing access to freely available condoms. However, researchers acknowledge this number may be higher as this type of service could be provided in unexpected sites.

Of those places found to have freely available condoms, one was a youth centre and two community health centres. Two had condoms which were visible from the waiting area/foyer, one had them not visible but in an accessible/unisex bathroom. These places responded that they frequently refill the condoms - a sign that people know about them and use this service. However barriers such as the “type of service” (e.g not having another reason to be in the building, stigma attached to the service or not a typical youth service) as well as the “position of the condoms” (in a hidden spot or in a high traffic area) meant that the condoms may not be as accessible as they could be.

An additional nine community/health services were contacted and were found to not have condoms freely available, suggesting that freely available condoms may not be as widely spread as initially suspected.

It is noted that some health/community services as well as schools and youth services may provide condoms upon request by clients/patients/students. However having to request condoms can be a large barrier to access.

Additional findings

Anecdotes collected

This qualitative data has provided cultural and social context to some of the above barriers and enablers. This information was collected informally and is therefore anecdotal. The researchers recorded interactions with retail staff and/or additional observations when collecting the data on condoms. This information adds to the narrative of limited access to condoms within rural and regional areas and is often corroborated in discussions WHWBSW have with members of the community.

- One small supermarket had condoms located in a concealed cupboard above the cigarette cabinet behind the register. The condom packets were not visible from the register, the retail staff didn't know how much they were and had to climb up to get them down. The retail assistant said: "I usually didn't sell any but at least up the in cupboard they don't get stolen!"
- One service station used to have condoms available for sale, but rarely sold them and they would often expire, so they decided to install a CVM into the bathroom and have found this a much more effective solution.
- In one rural town, informal feedback from several year 11 boys indicated that they didn't know where to get condoms other than the Coles/Woolworths located almost an hour away. They were unaware that there were two sites in their town which had condoms available (including one CVM).
- One small general store said they usually stock just one packet, for "bucks parties passing through", however at the time of inspection they were out of stock and were unaware that they were out of stock. This indicated that they would be an unreliable site.
- One small pharmacy had a female staff member who was very friendly and happy to chat about selling condoms. She said she sells a lot and people always ask for them. She said she is often asked why she doesn't get embarrassed when customers ask her for "embarrassing or sensitive" products and she responded by saying that it was not her place to judge or be embarrassed it's the same as every other product in the store. This woman's attitude and confidentiality would be a major enabler for access, and is obvious by her saying that anonymity doesn't seem to be an issue in her store.
- One service station noted their town is a high tourist area over summer and fluctuations in condom sales would most likely occur over this time period. They said around New Years Eve and festival time they sell a lot more than they do the rest of the year.
- One small pharmacy noted they stock and sell a variety of different condoms (no "regulars" stocked) mainly due to having an older clientele. This should remind us that condoms are not just used by young people, and accessibility needs to take this into consideration.

- One rural pharmacy recently had all their stock of condoms go out of date, so now they are only stocking one packet at a time. This is an obvious barrier, but also reflects the demand of the community to purchase condoms from the store.
- At several sites retail staff indicated the position of condoms had been moved (to a highly visible location by staff) or the store had stopped stocking condoms, because they were a high theft item by young people.
- A common theme in several pharmacies, small supermarkets and service stations was that although stocking condoms, they don't sell many, if any. At one site, the retail staff told researchers they don't sell any because people would be too embarrassed to ask for them.
- Another common theme in pharmacies and some smaller supermarkets (e.g. IGA's, Food Works) was that retail staff would ask if you needed assistance within moments of entering the store. Whilst this is a friendly and welcoming practice, under circumstances where the purpose of entering the store is to buy something perceived to be embarrassing this would be quite confronting and awkward for some people.

Accessibility scores

Accessibility scores were developed by ranking the accessibility factors that were collected in the above-mentioned data and averaged out across each LGA. The higher the accessibility score the better with the maximum score being 36.5.

The gold standard for accessibility in businesses includes:

- Opening hours of 24hrs or later than 9pm.
- Being located on the shelf in an easy to find and reach location as well as in a position with a little bit of privacy to browse condoms.
- Packets available for less than \$5.
- A large variety of packets.
- In close proximity to used spaces and geographically accessible.

LGA	Score out of 36.5	Percentage of the maximum score.
Corangamite Shire Council	18.64	51.1%
Moyne Shire Council	15.77	43.2%
Warrnambool City Council	20.94	57.4%
Southern Grampians Shire Council	18.8	51.5%
Glenelg Shire Council score	21.92	60.1%

These accessibility scores need to be considered the context with availability. A visual representation of the availability and accessibility can be viewed in appendix 3.

Businesses that didn't sell condoms

There were 45 businesses across the GSC region that were expected to sell condoms, that didn't. This included businesses in 18 towns which had no other availability of condoms. These towns were: Allansford, Caramut, Hawkesdale, Nullawarre, Panmure, Wangoom, Woolsthorpe, Yambuk, Princetown, Noorat, Cape Bridgewater, Digby, Merino, Narrawong, Branxholme, Byaduk, Cavendish and Glenthompson.

Additionally Target, Kmart and Aldi stores do not stock condoms in any of their stores across Australia.

10 community/health centres were contacted and found to not have freely available condoms, although four commented that people could get condoms by asking a staff member (e.g community nurse).

WARRNAMBOOL CITY

- There were nine businesses that were expected to sell condoms that were found not to have them available.
- This included six convenience/general stores and three service stations.
- One of these was in a town with no other options for condom purchasing.

MOYNE

- There were 10 businesses that were expected to sell condoms that were found not to have them available.
- This included nine convenience/general stores and one service station.
- Seven of these sites were in towns which had no other availability of condoms at all.

CORANGAMITE

- Nine businesses that were expected to sell condoms were found to not have them available.
- This included two supermarkets, two general stores and five service stations.
- Two of these sites were in towns in which had no other availability of condoms at all.

GLENELG

- Seven businesses that were expected to sell condoms were found to not have them available.
- This included three service stations, and four general stores.
- Four of these sites were in towns which had no other availability of condoms at all.

SOUTHERN GRAMPIANS

- There were 10 businesses that were expected to sell condoms that were found not to have them available.
- This included six convenience/general stores and four service stations.
- There was one public toilet site which was supposed to have CVMs however upon inspection CVMs were unable to be found.
- Four of these sites were in towns which had no other availability of condoms at all.

Recommendations

This report makes clear that there are significant issues relating to the availability of condoms within the Great South Coast, particularly for those with additional barriers to accessing mainstream services.

Addressing condom accessibility is a major part of improving safe sex practices within the community. However, it is important to consider this intervention needs to be combined with social marketing and educational campaigns to have an impact. No amount of learning will lead to behaviour change unless the learner's environment supports the new behavior, including the provision of new structures or resources to make the behavior easier to perform (Bandura 1998).

In light of this research, WHWBSW makes the following recommendations to partner agencies, government and businesses:

1. Councils, businesses, health agencies and other relevant organisations should increase availability of condoms through condom vending machines and freely available condoms in a range of settings in the Great South Coast.

- A priority should be made to focus on the highest level of need first.
- Settings could potentially include: council public toilet facilities, sporting facilities (public and private), community and youth services, youth events, shopping centre facilities and schools.
- Focus groups should be done with young people to investigate where CVM and freely available condoms would be best placed.
- Free condoms should be distributed at all age-appropriate youth events.
- Councils to consider installation CVMs in their facilities.

2. WHWBSW and other health promotion agencies, youth services and community organisations should work to improve awareness and knowledge of safe sexual practices.

- Development and delivery of sexual health education programs in schools, community services and sporting clubs.
 - i. This should include a range of initiatives in varying scopes (ranging from posters & information through to capacity building of teachers).
 - ii. Advocacy needs to be undertaken for comprehensive sexual health and relationship education in schools.
- Development of resources for parents to assist them in discussing safe sex with their children.
 - i. This should include promotion of existing resources.

- Provision of educational material and a list of local CVMs and freely available services on council and health services websites.
- 3. WHWBSW should lead the development of a partnership to implement the Victorian Government's 'Women's sexual and reproductive health: key priorities 2017-2020' strategy, engaging relevant partner agencies to play a concrete role in the delivery of this strategy.**
- 4. WHWBSW, Department of Health and Human Services, and community service agencies should support and encourage businesses to achieve gold standard status in placement of condoms within their sites**
- Research into condom product placement guidelines by suppliers and stores
 - Provision of advice to businesses on gold standard/best practice in product placement for condoms and other similar products related to sexual and reproductive health
 - Evaluation of program to ensure outcomes are achieved and goals met

REFERENCES

ABS 2016 Population data can be found:

http://www.censusdata.abs.gov.au/census_services/getproduct/census/2016/communityprofile/LGA22410?opendocument

Bandura A, 1998, "Health Promotion from the Perspective of Social Cognitive Theory", *Psychology and Health*, 13, p623-649

Victorian Government 2014

https://www.planning.vic.gov.au/_data/assets/pdf_file/0017/74033/Great-South-Coast-Regional-Growth-Plan-Background-Report-March-2014.pdf

Appendices

Appendix 1: List of names of towns, rural communities and localities in the Great South Coast

LGA	Towns & rural communities with condoms available	Towns & rural communities with businesses and no condoms	Towns & rural communities with no businesses and no condoms	Towns with CVM
Warrnambool City	<ol style="list-style-type: none"> 1. <u>Dennington</u> 2. <u>Warrnambool</u> (Warrnambool South, Warrnambool East, Warrnambool North, Warrnambool West,) 	<ol style="list-style-type: none"> 1. <u>Allansford</u>: 	<ol style="list-style-type: none"> 1. Bushfield 2. Woodford 	None
Moyne Shire	<ol style="list-style-type: none"> 1. <u>Koroit</u> 2. <u>Macarthur</u> 3. <u>Mortlake</u> 4. <u>Peterborough</u> 5. <u>Port Fairy</u> 	<ol style="list-style-type: none"> 1. Caramut: 2. Hawkesdale 3. Nullawarre: 4. Panmure 5. Wangoom: 6. Woolsthorpe 7. Yambuk: 	<ol style="list-style-type: none"> 1. Ballangeich 2. Codrington 3. Darlington 4. Ellerslie 5. Framlingham 6. Garvoc 7. Grassmere 8. Hexham 9. Killarney 10. Kirkstall 11. Knebsworth 12. Kolora 13. Laang 14. Mailor Flat 15. Mepunga (including east & west) 16. Minhamite 17. <i>Minjah</i> 18. <i>Naringal</i> & Naringal East 19. Nirranda & East & South 20. <i>Nullawarre North</i> 21. Orford 22. Purnim & <i>Purnim West</i> 	None

			<ul style="list-style-type: none"> 23. Tarrone 24. The Sisters 25. Tower Hill 26. Willatook 27. Winslow 28. Woorndoo 	
Corangamite Shire	<ul style="list-style-type: none"> 1. <u>Camperdown</u> 2. <u>Cobden</u> 3. <u>Derrinallum</u> 4. <u>Lismore</u> 5. <u>Port Campbell</u> 6. <u>Simpson</u> 7. <u>Skipton</u> 8. <u>Terang</u> 9. <u>Timboon</u> 	<ul style="list-style-type: none"> 1. Princetown 29. Noorat 	<ul style="list-style-type: none"> 1. Boorcan 2. Bradvale 3. Brucknell 4. <i>Chocolyn</i> 5. Cobrico 6. <i>Cooriemungle</i> 7. Ecklin South 8. Elingamite & north 9. Kariah 10. <i>Larralea</i> 11. Mingay 12. <i>Skibo</i> 	None
Glenelg Shire	<ul style="list-style-type: none"> 1. Casterton 2. Heywood 3. Nelson 4. Portland, Portland North, Portland West, Portland South 	<ul style="list-style-type: none"> 1. Cape Bridgewater 2. Digby 3. Merino 4. Narrawong 	<ul style="list-style-type: none"> 1. Breakaway Creek 2. Cashmore 3. Condah 4. Henty 5. Homerton 6. <i>Mount Eckersley</i> 7. Myamyn 8. Tyrendarra 9. Wallacedale 	1 in Portaldn at the Amenities
Southern Grampians	<ul style="list-style-type: none"> 1. <u>Balmoral</u> 2. <u>Coleraine</u> 3. <u>Dunkeld</u> 4. Hamilton 5. <u>Penshurst</u> 	<ul style="list-style-type: none"> 1. Branxholme 2. Byaduk & North 3. Cavendish (Mona Park) 4. Glenthomps on 	<ul style="list-style-type: none"> 1. Bochara 2. Tabor 3. Tarrington 4. Vasey 5. Wannon 	CVMs at Balmoral Public Toilets, Penshurst Hall public toilets, United Petrol Hamilton and BP (Lonsdale St) Hamilton

Appendix 2: Names of businesses that don't sell condoms

WARRNAMBOOL CITY

Warrnambool: Hopkins River milkbar, Jamieson St milkbar, Gardent St milkbar,
Derby St milkbar, BP industrial estate, McNeil BP, Caltex 1155 Raglan pde
Dennington: General store
Allansford: General store

MOYNE

Macarthur: General store
Mortlake: BP service station
Caramut: General store
Hawkesdale: General store
Peterborough: General store & Takeaway
Nullawarre: general store
Panmure: General store
Wangoom: General store
Woolsthorpe: General store
Yambuk: General store

CORANGAMITE

Princetown: General store
Derrinallum: Shell service station
Lismore: Foodworks and BP service station
Noorat: General store
Port Campbell: Fuel station
Skipton: BP service station
Terang: IGA Xpress
Timboon: fuel station

GLENELG

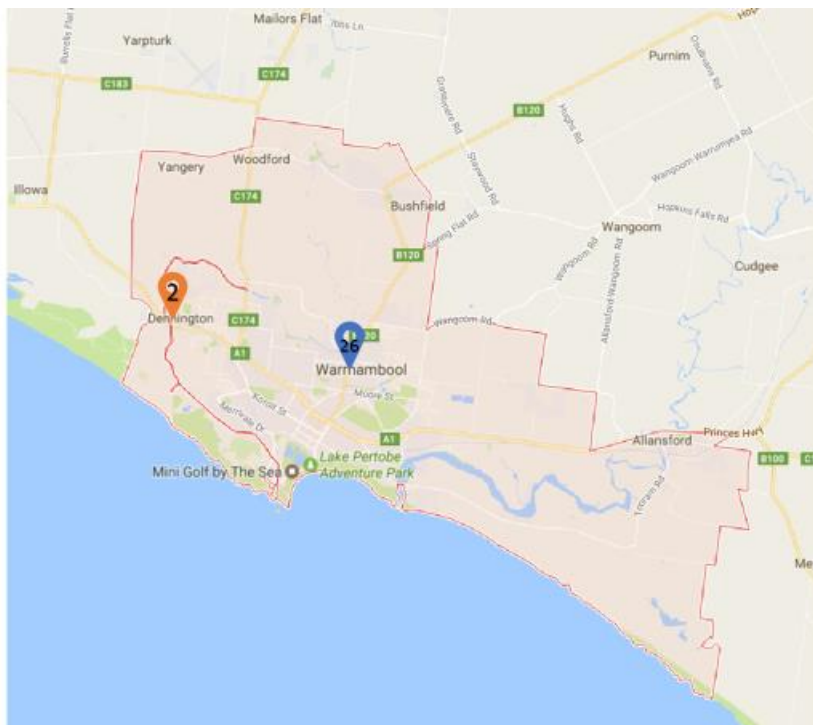
Heywood: Shell service station
Portland: Caltex at Woolworths and Shell on main road service station
Cape Bridgewater: Takeaway store
Digby: General store
Merino: General store
Narrawong: General store

SOUTHERN GRAMPIANS

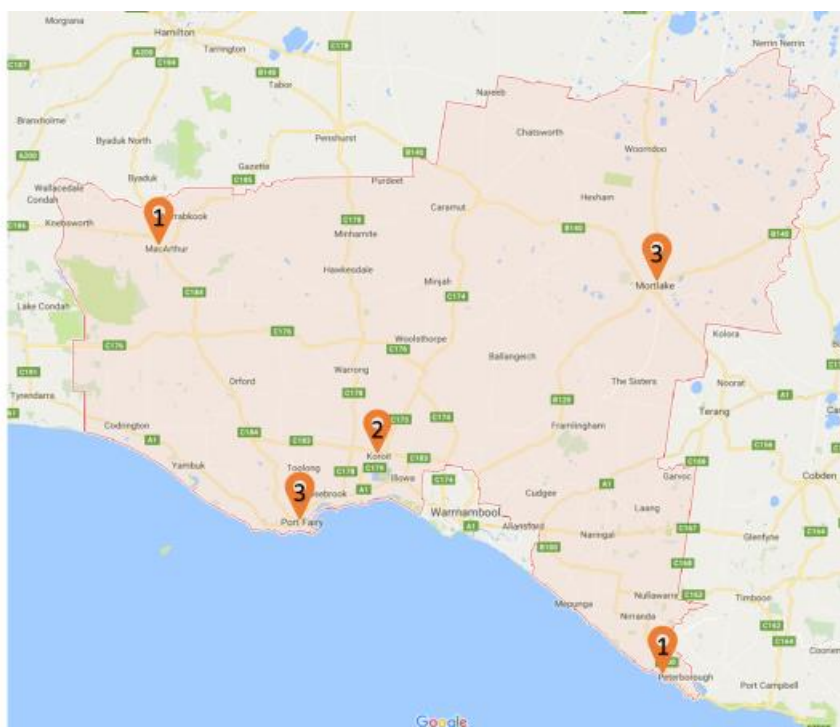
Dunkeld: General store
Hamilton: Scoresby Street Milkbar, Riordan fuel station, Safeways plus fuel station,
BP French St service station, Shell service station
Branxholme: General store
Byaduk: General store
Cavendish: General store
Glenthompson: Roadhouse

Appendix 3-Maps with availability and accessibility.

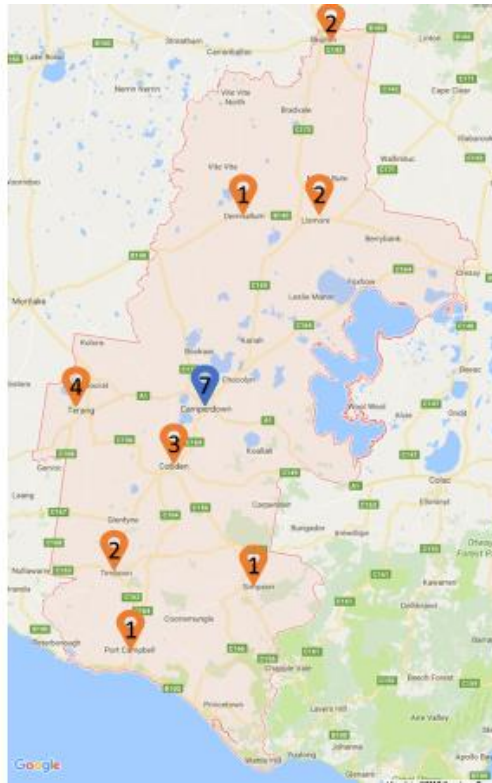
WARRNAMBOOL CITY



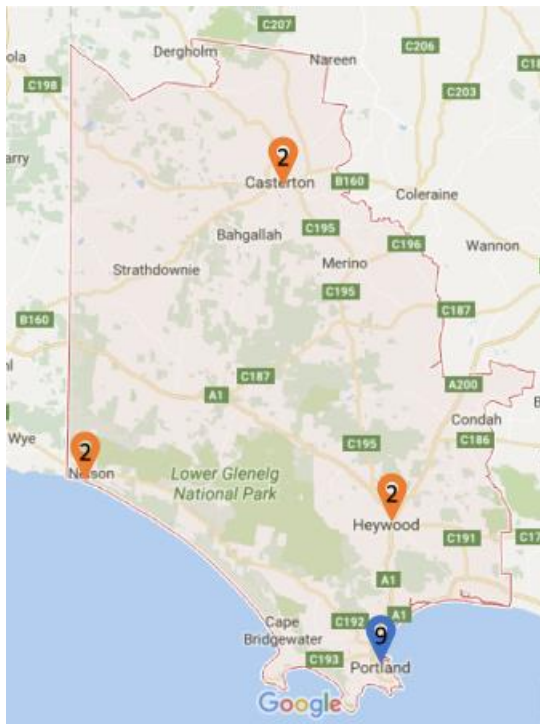
MOYNE SHIRE



CORANGAMITE SHIRE



GLENELG SHIRE



SOUTHERN GRAMPIANS

