

Environmental health workshop

Bringing
environmental health
into the home

Cairns September 2017

Workshop structure

- Community 'in-home' programs background
- Safe bathrooms – hardware and software
- Barriers
- Solutions
- Other opportunities

Interaction in the home environment

Precedents

Health Habitat – Fixing houses for better health –
Paul Pholeros, Paul Torzillo and Stephen Rainow

Housing for Health – NSW Health
“10 Years of Housing for Health in NSW”

Interaction in the home environment

Tuesday

1. Cleaning made easy - Steven Kelly,
Bundiyarra Aboriginal Community Aboriginal
Corporation, WA

2. “You gotta wash your face to come to my place”
Community Project Tim Bond, Kimberley
Population Health Unit and Sonny McKay,
Shire of Derby/West Kimberley, WA

Interaction in the home environment

Today

3. The development and implementation of an environmental health clinic referral system in WA Sonny McKay, Shire Of Derby/West Kimberley, WA

4. Environmental health response to acute rheumatic fever and rheumatic heart disease in NSW Dr Angela Pitts, NSW Health, NSW

Interaction in the home environment

Today

5. Squeaky Clean Kids - Making a Difference Dr
Melissa Stoneham, Public Health Advocacy
Institute of WA and Chicky Clements,
Nirrumbuk Aboriginal Corporation, WA

6. Developing sustainable E (environmental
health) practices in 'SAFE' - the
commitment to eliminate trachoma in
Australia Matthew Lester, WA Health

Interaction in the home environment

Tomorrow

7. Local and innovative partnering in addressing large scale, chronic community water usage issues Robert Mullane, Department of Health, WA

8. Three environmental programs from the Eastern Goldfields WA Cody Winter, Bega Garnbirringu Health Service, WA

Interaction in the home environment

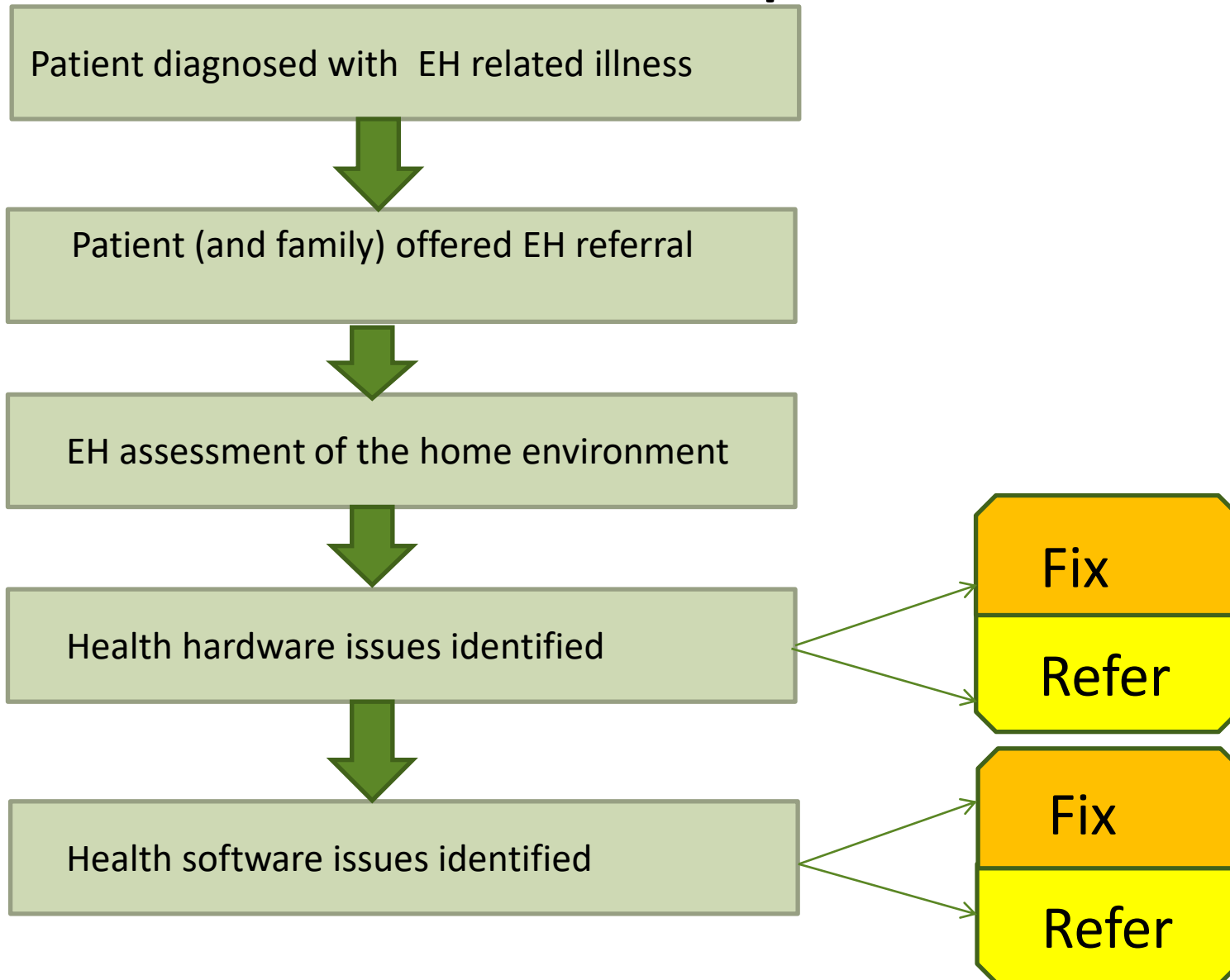
Tomorrow

9. A partnership approach: utilising environmental health workers to deliver health messages
Melinda Edmunds and Dr Melissa Stoneham, Public Health Advocacy Institute of Western Australia; Chicky Clements and Ray Christophers, Nirrumbuk Aboriginal Corporation, WA

10. Health hardware case study: Utopia homelands

Aaron Clifford, Environmental Health Central
Australia, NT

EH referral process



Two major issues

1. What is provided
(Health hardware)

2. What people do
(Health software)

Barriers

Access

- I'll never get permission from Housing to assess their homes
- I am not allowed to go into homes
- The householder doesn't want a stranger in the house
- I won't get past the front door
- The tenant will think they are being judged
- Tenant doesn't care - they've given up
- It's too dangerous to go into the home

Capacity

- EHW doesn't want to start something they can't deliver on
- There are too many houses and communities – it's too hard
- It's not in scope – we look after food and health regulations
- There's only one of me
- We don't have enough workers/people in community
- Will anything change if I do Safe Bathroom assessments
- Any fixes that I can arrange will only be short term

Responsibility

- Isn't this a Housing issue ? Why aren't they doing this ?
- Overcrowding means the situation won't change
- I don't do plumbing – I'm not allowed
- So we find some faults – then what happens ?
- It's not just the hardware that's the problem – it's the attitude and behaviour of the tenants and their visitors
- I can't do health education
- If there's no repair and maintenance in place for the rest of the home, why would we consider fixing up bathrooms

Discussion – hardware solutions

- How do you start something like this ?
- How do you get a referral ?
- I am only one person –how can I possibly do this ?
- Where do I get resources to support this ?
- How can I get support ?
- Who will help me ?
- How do I get traction ?
- Who can I ask for help ?

Discussion – software solutions

- What messages should I deliver ?
- How do you do this in a home ?
- Where can I get help ?
- Where can I get resources ?
- Who else is interested ?
- Where can resources be developed?

Outcomes

- Clean faces
- Strong eyes
- Good teeth
- Smooth skin

Reduced incidence of preventable diseases

- ARF/RHD, Scabies, Community acquired MRSA, Ear health, Eye health, URTI, pneumonia
- GAS and RHD, APSGN