

1. PURPOSE

Sexual Health Victoria (SHV) is part of a national movement working to ensure all people have access to, and engage with, sexual, relationship and reproductive health (SRRH) services and education. This document outlines SHV's Advocacy Plan from 2024-28. This accompanies the *SHV Advocacy Framework 2024-28*.

2. SCOPE

This Plan applies to all SHV employees, Board and Board committee members, contractors, volunteers, students and trainees.

3. SHV ADVOCACY GOALS

Goal 1. All people have timely access to high quality and inclusive SRRH services.

To achieve this goal, SHV will advocate for:

- A. Health workforce capacity building
 - Primary health care professionals, including GPs, nurse practitioners, registered nurses, midwives and allied health professionals are supported to access to training that will enable them to provide high quality, inclusive and safe SRRH care. Specific priority areas for SHV are long acting reversible contraception (LARC), medical abortion and menopause care.
 - Expanded scope of practice for nurses, midwives and nurse practitioners.
- B. Greater remuneration of primary health care professionals providing key SRRH services, such as LARC, to ensure financial viability and sustainability for health care providers and affordability for community members.
- C. Incentivisation for health professionals in regional, rural and remote areas to undertake training and provide key SRRH services.

Goal 2. All young people have access to accurate, comprehensive, age-appropriate RSE through schools and community-based settings.

To achieve this goal, SHV will advocate for:

- A. School and community workforce capacity building
 - School-based professionals, including teachers, health and wellbeing staff and leaders are supported to undertake professional training that enables them to provide developmentally-appropriate, safe and inclusive RSE for students and their parents/carers.
 - Community-based professionals, including disability, youth, Aboriginal and community workers supported to undertake professional training to provide education and support for young people outside of mainstream school settings.
- B. Increased funding for expert RSE providers to delivery whole school and community education.

C. Greater inclusion of RSE within the Australian curriculum and integration across subject areas.

Goal 3. Health information and resources are accessible to all communities.

To achieve this goal, SHV will advocate for:

A. Stronger government investment in co-designed health promotion to increase SRRH literacy and health service access among marginalised communities, including Aboriginal and Torres Strait Islander, culturally and linguistically diverse, disabled, LGBTIQ+ and rural communities.

B. Strengthened pathways to accessible, safe and inclusive health and support services for marginalised communities.

4. SHV ADVOCACY AMBITION

SHV will strive to strengthen primary care, school and community-based service systems to deliver inclusive, timely, accessible information, education and clinical care and empower people to make informed decisions that are right for them. SHV will work to overcome key barriers to community access to SRRH care and education, including:

- Limited workforce capacity to provide SRRH care, education and support
- Stigma associated with SRRH
- Prohibitive costs of SRRH services, goods and education
- Regulatory barriers to SRRH goods and services
- Inadequate funding for inclusive, accessible services and resources for marginalised communities
- Intersecting barriers associated with:
 - Geographic location, socio-economic status and occupation
 - Ability and disability
 - Country of origin, citizenship and length of residency/visa
 - Gender, sex characteristics and sexual identity
 - English and health literacy

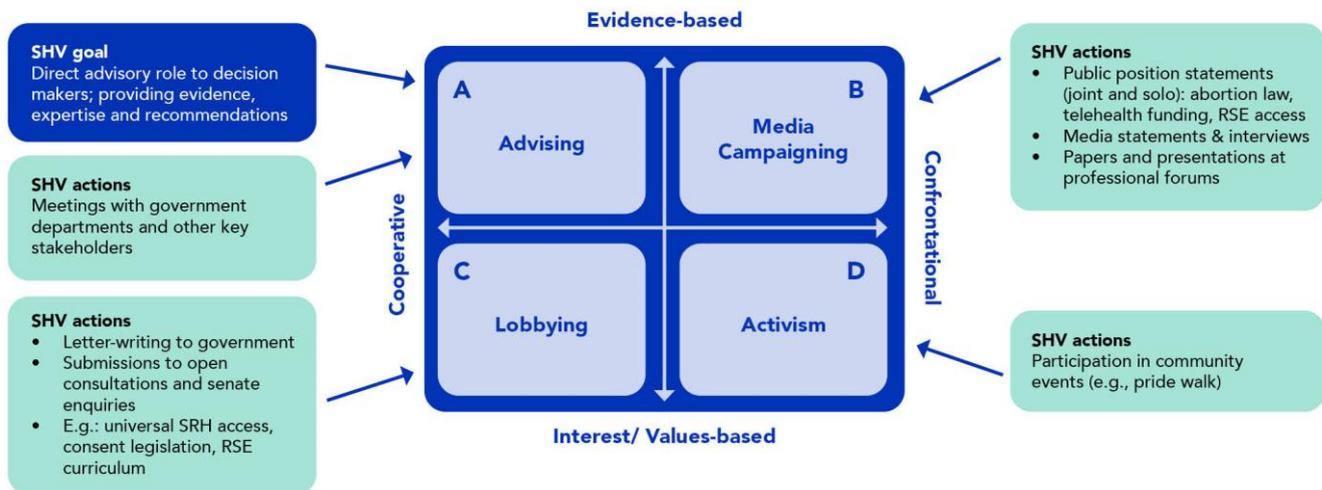
5. SHV APPROACHES TO ADVOCACY

SHV utilises an Advocacy Framework to guide the development and implementation of advocacy activities. All SHV advocacy efforts are founded on:

- The latest evidence, professional expertise and lived experiences
- Collaboration with other organisations and community groups to enact change
- Cooperation with government and regulatory bodies
- A human rights approach that supports all people to experience optimal health and wellbeing, and make health decisions that are right for them

SHV’s goal for the next five years is to place stronger focus on advisory-based advocacy, by continuing to share our expertise and strengthen our relationships with key decision makers.

Organisational Approaches to Advocacy



6. SHV RELATED DOCUMENTS

- SHV Advocacy Framework 2024-28.
- SHV Strategic Plan 2023-28.

7. REFERENCES

- World Health Organisation. (2020). Basic documents: forty-ninth edition (including amendments adopted up to 31 May 2019). Geneva: WHO.
- World Health Organisation. (2023). Human rights. www.who.int/news-room/fact-sheets/detail/human-rights-and-health.
- Young, E., & Quinn, L. (2012). Making research evidence matter. A guide to policy advocacy in transition countries. Open Society Foundations: Budapest, Hungary.

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