



HIV AND MOBILITY IN AUSTRALIA

Multicultural Community Action Network (M-CAN)



PASSI

Project Organisation

Established in 2015, the Multicultural Community Action Network (M-CAN) is a community led-program run by the Multicultural Health & Support Services (MHSS), part of the Centre for Culture, Ethnicity and Health (CEH).

Project Summary

M-CAN supports members of culturally and linguistically diverse (CaLD) communities to become peer educators and advocates for the improvement and awareness of sexual and reproductive health among their respective communities. Using a peer-based model, M-CAN empowers peer-educators to deliver sexual and reproductive health education, community-driven campaigns, workshops, and forums. Several presentations and workshops are delivered in the main language of the participants i.e., not English. The M-CAN network is currently made up of over 100 community members from CaLD backgrounds, including migrants, refugees, and international students.

Location: Victoria

Populations Involved: Multicultural communities

Duration: 2015 - Present

Funding: None

Project Aim

M-CAN aims to build the capacity of CaLD communities around sexual and reproductive health promotion, to prevent the transmission of blood-borne viruses (BBVs) and sexually transmissible infections (STIs). Additionally, M-CAN aims to build a strong network between peer-educators, community members and the Multicultural Health Support Services.

Project Objectives

- Build capacity of CaLD community members to advocate and educate within their community.
- Increase STI and BBV health literacy, screening, treatment and uptake of support services by CALD community members.
- Strengthen relevant partnerships with CALD communities, services and health sector stakeholders.
- Support the Victorian state response to STIs and BBVs.

Contact

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Road Map Action Areas

The [HIV and Mobility in Australia: Road Map for Action](#) proposed 71 strategies under five action areas to address HIV in mobile populations. This project addresses the following action areas:

Action Area 3) Community mobilisation

Strategy 3.2. Develop HIV knowledge and capacity amongst migrant community, cultural and spiritual leaders.

Strategy 3.3 Support and build capacity of migrant groups and mobile populations (including PLHIV) to develop skills in advocacy, the development of advocacy networks and peers involvement.

Strategy 3.6 Further develop and deliver sensitive and comprehensive HIV programs which address wider issues such as gender equity, domestic and sexual violence and social exclusion.

Strategy 3.7 Further develop and deliver programs which promote access to HIV testing and treatment services for migrant and mobile populations

Strategy 3.8 Further develop programs (personal perspectives etc.) which aim to reduce stigma and discrimination related to migrant and mobile populations.

Action Area 4) Development of services for mobile or migrant people and groups

Strategy 4.3 Further develop programs and services to be delivered by peers in migrant and multicultural organisations and HIV sector organisations.

Measuring Achievements

M-CAN's impact is measured through a post-training survey shared to participants at the end of project activities. The survey collects process evaluation data (e.g., content satisfaction) and demographic information (e.g., age, ethnicity, language, visa status). This data is used to develop future activities, ensuring they are culturally appropriate and relevant. Attendance at project activities is also counted. All data is reported in an annual MHSS evaluation report.

Project Successes

During 2019-2021, co-designed workshops (n=23) and media campaigns (n=3) were delivered with the members of M-CAN and MHSS. In addition, M-CAN was represented at two conferences: Australian Association for Adolescent Health 2019 Conference and ISANA ONAIR: 2020 Online Conference. A successful reach of 500+ community members was recorded.

Project Challenges

Retention of peer-educators is a challenging as involvement is voluntary. Feedback from session participants indicate the need for ongoing sessions, to help address the stigma around sexual and reproductive health. In the future, MHSS will seek extra funding avenues for its volunteers. An Advisory Body will be established, comprising members of the CaLD community sector.



This document was published by the **Community of Practice for Action on HIV and Mobility (CoPAHM)**. CoPAHM was established to keep HIV and mobility issues on the national agenda, and to progress action areas highlighted within the *HIV and mobility in Australia: Road Map for Action*.

To find out more details about *The Road Map* or *CoPAHM*, please [click here](#) or email [**copahm@curtin.edu.au**](mailto:copahm@curtin.edu.au)

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