**Distance is no barrier—delivering continence resources to rural and remote health professionals across Australia**

Christine Murray, Barry Cahill, Continence Foundation of Australia

**Introduction and background**

Incontinence, both urinary and faecal, is a significant health issue affecting people of all ages within the Australian community. More than 3.8 million Australians are estimated to be affected and many people still do not report this condition to anyone. It affects men, women and children across the lifespan and has social, physical, economic and emotional implications for the individual and the wider community.\(^1\,^2\,^3\) In 1998 the Australian Federal Government, Department of Health and Ageing, established the National Continence Management Strategy (NCMS). Funding of $18.2 million was allocated by the government over four years to provide support for continence research and service development initiatives. The aim of the funding was to support projects to help prevent the development of incontinence and to treat this significant health issue more effectively. The NCMS aims to promote, across the whole country, better access to appropriate continence services and care and to promote better bladder and bowel health in people of all ages. As part of the National Continence Management Strategy the National Continence Helpline (NCHL) was launched in September 1998. It is managed by the Continence Foundation of Australia (CFA).

**Aims**

The National Continence Helpline aims to provide professional advice, referral, relevant literature and educational materials (at no cost and in bulk, where required) to health professionals, carers and consumers on continence topics. Callers can contact the Helpline from all areas of Australia (urban, rural and remote) at no cost to the caller.

**Methods**

Telephone data was collected from the National Continence Helpline using Lotus Notes.\(^4\) Call information was analysed and specific calls originating from rural and remote health professionals scrutinised.

**Results**

In the period analysed (1 July 05 to 30 June 06) 18733 calls were received by the National Continence Helpline. Calls were received from every Australian state and territory. 5021(27%) came from New South Wales, 4563(24%) from Victoria, 3060(16%) from Queensland, 1475(8%) from South Australia, 1152(6%) from Western Australia, 381(2%) from Tasmania, 365(2%) from the Australian Capital Territory and 123(1%) from the Northern Territory. Call location was not recorded from 2593 callers. 3859(20.6%) callers were male and 14874(79.4%) were female. Calls from health care professional numbered 8191(43.7%). Of the 8191 calls from health professionals, 2250 (27.5%) were identified as rural callers with 56(0.7%) designated as originating from remote centres or remote areas of Australia. When rural and remote health professional calls were analysed, 1091(48.5%) calls were made by nurses (hospital, practice, maternal and child health and community health, registered, primary health providers, school nurses), 78(3.5%) were physiotherapists, 112(5%) were allied health professionals including occupational therapists and personal care workers, 63(2.8%) were educators, 330(14.7%) were doctors (general practitioners, gynaecologists, urologists, etc) and 196(8.7%) were pharmacists or pharmacy assistants. 58(2.6%) callers asked for continence management advice.

Financial assistance calls from rural and remote professional callers numbered 47(2.1%). Product information and advice was sought by 69(3.1%) callers. Referral details to other health professionals

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was provided to 52(2.3%) callers. Brochures and other educational material covering various aspects of incontinence was sought by 1678(74.6%) rural and remote health care professional callers.

Requests for literature were made by 74.6% callers. The most commonly sought brochure in a language other than English was the Pelvic Floor Muscle Exercises for Women, written in Chinese (13600). Brochures in Arabic (8274), Vietnamese (8967), Greek (6147), Italian (7625), Dutch (3229), German (4389), Croatian (4518), Macedonian (3811), Maltese (2752), Polish (2387), Serbian (3457), Turkish (3811) and Spanish (3917) were also distributed.

Discussion

Prevalence rates for incontinence increase with age in both males and females. Incontinence is a common health problem that affects:

- 3.8 million Australians (1 in 5). 3.06 women (79.8%), 770 000 men (21.2%)
- an estimated 545 000 people or 2.8% of the Australian adult population experience severe incontinence (incontinence is a daily problem)
- 723 100 (3.7%) Australians experience moderate urinary incontinence (incontinence is reported several times a month)
- 2 877 500 (14.8%) Australians experience slight urinary incontinence (urinary leakage less than once a month)
- more than 50% of women aged 45–59 years have experienced urinary incontinence in the last three months
- one in three women who have ever had a baby wet themselves.

Many children are also affected by incontinence. Nocturnal enuresis (bed-wetting) is a common problem affecting more than 100 000 Australian children. Risk factors for nocturnal enuresis include male gender, new onset diabetes, constipation, attention deficit hyperactive disorder (ADHD) and mental illness. Daytime wetting in children is a less common problem that affects 5.5% of Australian children. Risk factors for day-time wetting include family history, mental illness, neurological deficit, urinary tract infection and congenital abnormalities.

There are many risk factors associated with urinary incontinence. The most prominent known risks are pregnancy, childbirth and delivery, menopause, obesity, prostate disease, chronic cough, chronic constipation, surgery, general mobility impairment and cognitive impairment. Other medical conditions where rates of incontinence are increased include diabetes, Parkinson’s disease, spinal cord injury, urinary tract infection and neurological conditions such as multiple sclerosis, dementia and stroke.

Risk factors for faecal incontinence are similar to those for urinary incontinence and include chronic diarrhoea, faecal impaction, family history of faecal incontinence, neurologic disease, severe cognitive impairment, poor mobility, age >70 years, obstetric trauma and urinary incontinence. Urinary or faecal incontinence is prevalent in 40% of people aged over 75 years and is a major reason for people being admitted to residential care facilities. Up to 77% of nursing home residents require assistance with continence management. In 2003 the estimated cost of urinary and faecal incontinence in the health and residential care system was $1.5 billion. The majority of this cost is for residential aged care ($1.3 billion) and continence aids ($111.7 million).

The Continence Foundation of Australia has managed the National Continence Helpline since it began operation in 1998. The NCHL is a central part of the Continence Foundation of Australia’s activities and enables the CFA to achieve its mission of improving the lives of Australians dealing with incontinence. The Helpline provides a vehicle to pass on a range of service to clients, carers, professionals and other continence agencies. The aims of the NCHL service are to:
• provide a free-call telephone number for callers anywhere in Australia (1800 33 00 66)
• raise awareness of issues surrounding incontinence
• provide confidential information and advice about the prevention, treatment and management of incontinence
• provide free information resources to callers
• provide a link to local continence services
• improve reporting and treatment of incontinence through the provision of this confidential service.

Health professionals in rural and remote areas have diverse and complex patient demands placed upon them and often lack specialised knowledge and resources to manage conditions such as urinary and faecal incontinence in a generalist setting. The National Continence Helpline can extend the clinical capability of rural and remote clinicians by providing information and clinical support via telephone. The NCHL service allows clinicians to contact expert continence practitioners regarding specific or general continence issues. Rural and remote clinicians may also refer their clients or carers to the helpline for discussion with a continence nurse.

Health promotion is an important avenue for publication and promotion of continence matters. The Continence Foundation of Australia conducts large scale mail-outs to general practitioners through the state Colleges of General Practitioners, pharmacy guild members through the Pharmacy Guild of Australia and community health centre professionals, special accommodation services, among others. ‘Bridge’ magazine is published quarterly, and distributed throughout Australia, aimed at the general public to highlight the positive treatment and management of incontinence. Continence Awareness Week is held in August each year. Large-scale promotion is conducted through various media outlets such as local and national radio, local and national newspapers and magazines and television stations. Industry initiatives to promote continence management include newsletters distributed extensively to general practitioners, community health centres and primary health teams.

Norton describes two of the key elements of a continence service as one which has ‘a sympathetic and knowledgeable person answering the telephone’ and ‘the public being well aware of the service through active publicity work’.3 The Continence Foundation of Australia, through its links with professional groups and industry, widely publicises the services offered by the National Continence Helpline. It aims to increase awareness of incontinence and publicise treatment options where possible. The National Continence Helpline is staffed by experienced Continence Nurse Advisors from diverse professional backgrounds who provide a variety and depth of experience in continence management.

The NCHL provides a specific service to professionals across all areas of Australia who may lack specialist training in continence management or lack the option of referring clients to a dedicated continence professional in their area. When faced with complex patient demands in a rural or remote setting, the provision of a cost free telephone service available twelve hours per day Monday to Friday provides a contact point with a specialist continence service. Various printed resources are available to callers and there are many other available resources such as CD ROMs, flyers, posters and videos on various aspects of continence management. Telephone health is a relatively new means of supporting health workers in all areas of Australia, especially those where specialist health services are absent. Those professionals located in rural and remote areas can utilise services such as the National Continence Helpline to provide assistance and guidance when managing specific client needs and obtain information regarding referral to existing local services. Health planning can be assisted in consultation with the continence nurse professional over the phone. The NCHL can provide a layering of complimentary information to the generalist health professional, with the opportunity of up-skilling of the non continence professional.

Staff at the NCHL can provide support to professional callers in the form of educational literature. Services can also include educational support through the provision of leaflets, posters and teaching aids. Information leaflets are provided and distributed to callers at no cost. Many titles of these leaflets
and teaching aids are also available in languages other than English and there are relevant resources for Aboriginal and Torres Strait Islander groups. Information for travellers is also available with the National Toilet Map project. This initiative provides detailed maps Australia wide. They include toilet locations and availability, opening hours and accessibility details. They are provided to callers free of charge to assist those with continence problems to travel to unfamiliar areas.

Brochures and booklets distributed by the NCHL include:

- pelvic floor muscle exercises for women
- good bladder habits for everyone
- expecting a baby
- 1 in 3 Women who ever had a baby wet themselves
- bladder retraining
- pelvic floor muscle exercises for men
- the continence guide
- prostate and bladder problems
- nocturia—are you up to the toilet at night?
- constipation and incontinence
- childhood bed-wetting
- what is a continence assessment?
- dementia and urinary incontinence
- faecal incontinence
- incontinence aids and appliances
- a list of 10 frequently asked questions
- help patients win the constipation battle (booklet).

Some of the CD ROMs DVDs and videos available include:

- Promoting continence
- Tackling incontinence in the community
- Pelvic floor muscles (booklet and CD)
- Solving common bowel problems, a resource tool for people with a spinal cord injury
- CD training package for general practitioners
- Improving bowel function after surgery for bowel cancer (booklet and DVD)
- Caring for a person with urinary or bowel problems (carer’s continence pack).

Posters available include:

- Don’t battle constipation on your own
- Prevention and management of constipation in adults
- One minute on your motions
- Continence awareness week poster
- Trouble with waterworks (ATSI).
Brochures are reviewed regularly to maintain accuracy and reflect trends in continence management. During the survey period 75% of callers requested printed or educational materials. These aids included brochures, booklets, comics and teaching flip charts specifically worded for Aboriginal and Torres Strait Islander groups. Access to specific brochures for people who speak languages other than English was assured by the provision of brochures in fifteen common community languages. These languages include English, Arabic, Vietnamese, Chinese, Greek, Turkish, Italian, Dutch, German, Croatian, Macedonian, Maltese, Polish, Spanish and Serbian. Professional and student packs are also available to callers. They contain a copy of all the available brochures, some posters and other current promotional material and an order form to complete which can be faxed or posted to the helpline for processing. Orders are usually delivered Australia wide within one week.

Conclusion

The Continence Foundation of Australia provides a free, extensive, multi-faceted and accessible telephone counselling service through the National Continence Helpline to rural and remote health professionals who often lack specialised services and expertise in this area of practice. This service can be especially valuable to professionals in isolation in rural and remote health care across Australia who may lack specialised clinical support networks. The NCHL is staffed by experienced continence nurse advisors with varied backgrounds in the area of continence management. A variety of educational resources relevant to professional and client needs are available to all callers at no cost and in many community and Aboriginal and Torres Strait Islander languages. The service is used by professionals from all states and territories of Australia.

Presenter

Christine Murray is a continence nurse advisor and midwife from Melbourne who has broad experience in the field of continence management. Her special interests are in women’s health management and health promotion.