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Peak health and community organisations congratulate the Australian Government's new National BBV and STI Strategies

Media Release – 4 December 2018

Peak HIV, viral hepatitis, sexual health and community organisations today welcomed the release of five new National Blood Borne Virus (BBV) and Sexually Transmissible Infections (STI) Strategies by the Australian government.

The peak organisations were closely involved and consulted heavily in the development of the strategies, ensuring they provide a strong platform for a high quality and coordinated national response to BBVs and STIs over the coming five years.

The release was accompanied by the announcement from Federal Health Minister Greg Hunt of \$5 million in initial funding to support the implementation of the strategies at a national level, with further investment to be announced in coming months.

The peak organisations are committed to supporting the implementation of the strategies to work towards the elimination of BBVs as a public health threat, and to reduce the impact of STIs for all Australians.

The five new National BBV and STI Strategies are available at <http://www.health.gov.au/sexual-health>

Quotes available for use

"These are ambitious strategies, with strong goals and targets to reduce infections and provide excellent care. Australia is one of the few places in the world that has the opportunity to deliver on this ambition. Doing so will require determination and intensive effort."

Darryl O'Donnell, Chief Executive Officer of Australian Federation of AIDS Organisations (AFAO)

"We applaud the government for actively listening to and engaging with peak health and community organisations and giving Aboriginal and Torres Strait Islander voice to the five strategies. These strategies have a strong emphasis on community empowerment. They centre around community-led education and cement the critical role of alternative models of care for our people played by Aboriginal Community Controlled Health Services (ACCHS) and nurse or Aboriginal Health Worker-led programs."

"The focus is on building healthy communities and a strong multidisciplinary workforce of health professionals. Whilst acknowledged in the strategies, it is also of critical importance that there is a focus on harm reduction, particularly in custodial settings where Aboriginal and Torres Strait Islander Peoples are grossly overrepresented."

Dr Ben Armstrong, Australian Indigenous Doctors' Association (AIDA) spokesperson

"AIVL is particularly delighted that custodial settings are named as priority settings in the new National Strategies. It is vitally important that people entering and exiting custodial contexts are not forgotten, particularly as they are returning to their families and communities. Ensuring access to the full suite of preventive, harm reduction measures – and ensuring that people are able to continue their engagement with treatments post-release – are tangible ways that we can protect more Australians from contracting BBVs and STIs. The strategies refer specifically to 'evidence-based harm reduction and demand reduction programs such as provision of sterile needles and syringes' in custodial settings within this context."

Melanie Walker, Chief Executive Officer of Australian Injecting and Illicit Drug Users League (AIVL)

"The strategies profile the critical role of primary care in supporting a sustained and accelerated response to BBV and STI. ASHM are excited to continue to support primary care and other healthcare professionals to provide effective care for all people living with BBV and STI."

"Identifying and scaling up successful innovative models of STI service delivery tailored to the needs of priority populations and sub-populations (including multidisciplinary team approaches and shared-care models) is a key action point in the Fourth National STI Strategy."



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"While we applaud the success of PrEP and Treatment as Prevention (TasP) in making great progress to HIV elimination goals, rebalancing concerns about equity of access will be an area to address – particularly for localities outside inner metropolitan areas and for Medicare ineligible individuals. We further welcome the announced additional funding that can be used towards strengthening the capacity of the existing health care system (particularly sexual health centres) in our response to the concerning rise in STI, such as gonorrhoea and syphilis."

Alexis Apostolellis, Chief Executive Officer of Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM)

"We have a big task ahead to realise the goals within these strategies, but it can be done. Hepatitis Australia looks forward to working in partnership with all stakeholders to engage each of the hepatitis B and hepatitis C communities in gold-standard prevention and care and continue efforts to help individuals to live free from stigma and discrimination."

Helen Tyrrell, Chief Executive Officer of Hepatitis Australia

"NAPWHA applaud the ambitious goals across these new strategies and are particularly pleased to see a continued and renewed emphasis on support for people living with HIV in the Eighth National HIV Strategy. Commitment to getting people who are newly diagnosed onto HIV treatment quickly and providing appropriate care and clinical support in stigma-free environments is vital to ensure people are retained in care and stay on treatment to achieve an undetectable viral load." "NAPWHA are particularly delighted to see the importance and value of peer support recognised in the HIV strategy and are excited to see how this is represented in the implementation plan."

Dr John Rule, Acting Executive Director National Association of People with HIV Australia (NAPWHA)

"The National Strategies importantly recognise the crucial need to address the social drivers of BBV and STIs and the structural barriers to health, including the impact of stigma and discrimination and legal and human rights issues on people's health. These remain significant hurdles in achieving the elimination and management of BBV and STI and equitable access to quality health care for all. Addressing these will be vital in ensuring no one is left behind."

Jules Kim, Chief Executive Officer of Scarlet Alliance

- **Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM)** is the peak body representing the HIV, viral hepatitis and sexual health workforce. <http://ashm.org.au>
- **Australian Federation of AIDS Organisations (AFAO)** is the national federation for the HIV community response providing leadership, coordination and support to Australia's policy, advocacy and health promotion response to HIV/AIDS. <https://www.afao.org.au>
- **Australian Indigenous Doctors' Association (AIDA)** is a not-for-profit, member-based, professional association supporting Aboriginal and Torres Strait Islander medical students and doctors. <https://aida.org.au>
- **Australian Injecting and Illicit Drug Users League (AIVL)** is the national organisation representing people who use/have used illicit drugs and is the peak body for the state and territory peer-based drug user organisations. <http://aivl.org.au/>
- **Hepatitis Australia** is the peak community organisation to progress national action on issues of importance to people affected by hepatitis B and hepatitis C. <https://www.hepatitisaustralia.com>
- **National Association of people with HIV Australia (NAPWHA)** is Australia's peak non-government organisation representing community-based groups of people living with HIV. <http://napwha.org.au/>
- **Scarlet Alliance, Australian Sex Workers Association** is the national peak sex worker organisation in Australia. <http://www.scarletalliance.org.au/>

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