

Stigma and fear continue to kill our community

An AIVL Position Statement

World Hepatitis Day 2023

Hepatitis C (HCV) deeply affects our community of people who inject drugs (PWID) almost exclusively. This 28 July 2023, the World Hepatitis Day theme of “We can’t wait” is a call to action. AIVL, the Australian peak body representing people who use drugs (PWUD), believe this call is not enough. When we say, “we can’t wait”, we literally mean PWID are dying from HCV-related cancer, a lack of access to treatment, and most of all, from stigma. We will only reach the World Health Organisation’s and Australia’s 2030 HCV elimination targets by actively investing in supporting PWID through evidence-based peer-led organisations, adequately resourcing effective peer-led services, and implementing the right model of Needle and Syringes Programs (NSPs) in prisons across Australia.

Australia's history of harm reduction

Hepatitis C is a blood borne virus transmitted by blood-to-blood contact such as when people share injecting equipment. The valiant PWID community-led response of the mid-1980s HIV crisis saw the creation of Drug Users Organisations (DUOs) in our states and territories. DUOs were integral to the successful implementation of NSPs across the country, and the uptake of these services by PWID played a crucial role in preventing an HIV epidemic among PWID and in the general community. Unfortunately, they were not implemented early enough to prevent and respond to an HCV epidemic that was likely already entrenched in our community.

Evidence for harm reduction and its ability to save lives continues to grow. Every dollar invested in NSP saves \$27 in health care costs yet investment in harm reduction services has been inadequate and inconsistent. A survey conducted in NSPs around Australia in 2022 found that 26% of people surveyed re-used a syringe and 31% shared other equipment in the injecting process, mainly spoons and water, two items known for their capacity to transmit HCV. Unfortunately, this type of equipment remains unavailable in most NSPs in Australia due to the lack of funding. Where they are available, it is often at a cost or in severely restricted amounts.

In 2001, Australia implemented its first Medically Supervised Injecting Room in Sydney and its second in Melbourne in 2018, almost 20 years later. We are still waiting for the third when more facilities such as these, implemented wherever they are needed, could be actively preventing overdose, HIV and HCV transmissions, and other harms associated with injecting alone and in public. The two medical models already implemented in Australia have other serious restrictions that prevent some of our most marginalised people, including young people, pregnant women, and people who need assistance to inject, from accessing them.²

In 2023, while drugs are available within prisons, new needles and syringes are not. Prisons and custodial settings are the primary remaining setting where HCV transmissions occur. Prevalence of hepatitis C is estimated at 20% of prisoners while around 50% of prison entrants report illicit drug use in the previous year³. Despite decades of calling for them, there continues to be no NSP in any Australian prison.

Leading for our community

Finally, Australia needs to be proud of its PWID leadership that powered a long history of providing harm reduction services and needs to increase its support of peer-led DUOs and other innovative evidence-based services like prison NSPs, drug consumption rooms, and drug testing. AIVL CEO, John Gobeil, reaffirms: “Stigma and fear keep our community from being allowed to lead responses that affect us. Until we move away from clinical services and punitive approaches and let our community care for each other in practical and evidence-informed ways, this country will not achieve its 2030 HCV elimination goals.”

Citations

1. Heard, S; Zolala, F & Maher, L. (2023). Australian Needle Syringe Program Survey National Data Report 2018–2022: Prevalence of HIV, HCV and injecting and sexual behaviour among NSP attendees. Sydney: Kirby Institute, UNSW Sydney.
2. Ryan, J. (2023). Review of the Medically Supervised Injecting Room, Final Report: Key findings and recommendations. Department of Health, Melbourne, February 2023.
3. Australian Injecting and Illicit Drug Users League (July 2019). Missing Connections: Service user experiences of people living with hepatitis C exiting custodial settings. Accessed from internet: <https://aivl.org.au/missing-connections-service-user-experiences-of-people-living-with-hepatitis-c-exiting-custodial-settings/>