

INCLUDING TRANS AND GENDER DIVERSE PEOPLE IN HIV POLICY

Zahra Stardust¹, Teddy Cook^{1, 2}, Laurie Hopkins², James Gray¹, Kimberly Olsen¹

¹*acon*, ²*pash.Tm*

Background/Approach: Trans and gender diverse (TGD) populations are increasingly recognised by international bodies such as UNAIDS and WHO as a priority population facing unique risks in the global HIV response. Despite this, we have inadequate empirical data on the experience of HIV among TGD people in Australia. We are conducting a comprehensive literature review of national HIV data on TGD people in Australia and are in a process of consultation with stakeholders to develop a discussion paper to provide for meaningful inclusion in the HIV response.

Analysis/Argument: Barriers to HIV prevention include methodological barriers (invisibility in research and surveillance systems); legal barriers (legal gender recognition); cultural barriers (lack of cultural competence in health provision); social and system barriers (transphobia, low workforce literacy about gender diversity, and lack of access to transition-related healthcare); geographical barriers (distance to appropriate health care); and underrepresentation in targeted health promotion.

Outcome/Results: Action is required across multiple aspects of the HIV policy response. Appropriate gender indicators in data collection, including amended HIV notifications forms; recognition of TGD people as a priority population; development of clinical guidelines and training for inclusive care; and co-design processes to ensure TGD people are meaningfully engaged and driving decision-making within the HIV response are all areas that require attention.

Conclusions/Applications: The shifting landscape of the HIV sector presents opportunities to revitalise the HIV response. In NSW, a process of collaboration, capacity-building and knowledge exchange is underway between ACON, PASH.tm and community stakeholders to improve understanding of the needs and barriers for this population. To have a broader impact, this knowledge will need to be practically applied to policy work and programming in the HIV sector by a range of stakeholders. This process may provide a model for parallel work in other Australian jurisdictions or among other priority populations.

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