

HIV Program at the Royal District Nursing Service (now Bolton Clarke)



1985 – one nurse at Royal District Nursing Service

1990 - integrated with Victorian AIDS Council

2015 – joined Homeless Persons Program

2017 - merged with RSL care and re-named Bolton Clarke

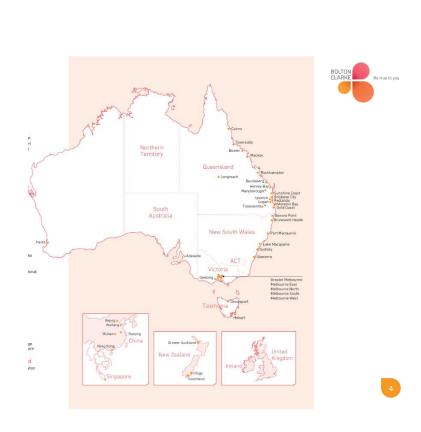
Funded by the Sexual Health and Viral Hepatitis Program
Prevention, Population Health and Place branch
Health and Wellbeing Division
Victorian Department of Health

- 1. Clinical and community-based care and support
- 2. Health promotion

HIV team



- 2 Regional Clinical Nurse Consultants (Grade 4)
- 3 HIV Resource Nurses (Grade 3)
- I HIV Liaison at Alfred Hospital
- 1 Clinical Nurse Consultant at Royal Melbourne Hospital (separate funding)
- Link in with general nursing and other specialties





Who are our clients in 2017?

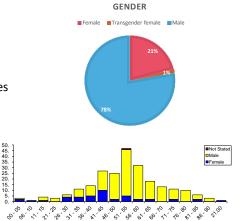


235 clients (3% of PLHIV in Victoria)

- From 38 countries (35 languages)
- Median age 51-55 yrs (range 1-92 years)
- Majority have several comorbidities
 ~20% opportunistic illnesses
 70% mental health,
 25% substance use

35% neurocognitive

- Late HIV presentation
- ~ 40% homeless
- 16% refugees and asylum seekers













Justice



Building the evidence for the effectiveness of HIV community nursing





Justice



Council-supported condom vending machines: are they acceptable to rural communities?

Jane E. Tomnay, and Beth Hatch.

[^]ACentre for Excellence in Rural Sexual Health, Rural Health Academic Centre, University of Melbourne.

49 Graham Street, Shepparton, Vic. 3630, Australia.

BCorresponding author. Email: jtomnay@unimelb.edu.au



Justice



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D01: 10.1111/j.1468-1293.2012.01034.x HIV Medicine (2013), 14, 120-124

SHORT COMMUNICATION

Financial stress is associated with reduced treatment adherence in HIV-infected adults in a resource-rich setting

J McAllister, G Beardsworth, E Lavie, K MacRae and A Carr
HIV, Immunology and Infectious Diseases Unit, and Clinical Research Program, Centre for Applied Medical Research, St
Vincent's Hospital, Sydney, Australia

Politics









Politics



Politics from the Greek 'politika', 'affairs of the cities'

'The most political of diseases' (Altman 1992)

ASSOCIATION OF NURSES IN AIDS CARE



POSITION STATEMENT

The Impact of Political Extremism on HIV-Related Research

Adopted by ANAC Board of Directors, July 2004 Reviewed and Revised by the ANAC Board: January 2008



"ASHM will continue its commitment to advocate for affordable access to HIV PFEP with the ultimate outcome of a PBS listing — allowing people-at-risk of HIV to no longer pay high, unsubsidised prices, nor have to import low-cost generic drugs from overseas using the TGA's Personal Importation Scheme," soil ASHM President, Professor Mark Bovd.

HIV Conference slams spitting laws

ual health physicians, hospital specialists and nurses have already played a EP to those in need through the current PrEP access studies across Australian





Examples of nursing politics and activism



ANMF in early days of epidemic – very active in education and support for nurses, resource development.

Acting locally with Aboriginal Health Workers

Recent work

- · Submissions to PBAC on nurse prescribing
- Support of safe injecting facility in Melbourne
- Access to PrEP



Collaborative leadership





Collaborative leadership



"...if you bring the appropriate people together in constructive ways with good information, they will create authentic visions and strategies for addressing the shared concerns of the organization or community."

Chrislip and Larson 1994



Collaborative leadership in policy



Consersus statement

Sexual transmission of HIV and the law: an Australian medical consensus statement

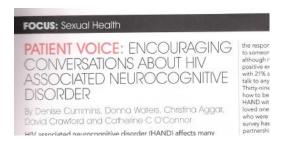
Mark Boyd¹⁷, David Cooper⁸, Elizabeth A.Crock ^{2,4}, Levina Crocks^{2,5}, Michelle L.Giles⁶, Andrew Gnütch⁸, Sharon R.Lewin⁷, David Nober⁷, Trent Yarwood^{20,6}



Collaborative leadership in research



Denise Cummins nurse-led resource development on HIV associated neurocognitive disorder



Collaborative leadership in education









#letsendit



Theme of World AIDS Day 2017 is 'let's end it'

Nurses are integral to that goal – we are the ones who locate, support, engage, treat, provide harm reduction and other prevention education in an informed way and from a nursing perspective – nurses are the linchpin for many members of key populations in the 'treatment cascade'.

Let's act with a focus on justice, politics and collaborative leadership





References



- Altman, D (1992). The Most Political of Diseases. In E Timewell, V Minichiello and D Plummer (Eds). AIDS in Australia. Sydney: Prentice Hall, pp. 55-72.
- Altman D and Buse K (2012). Thinking politically about HIV: political analysis and action in response to AIDS. Contemporary politics, 18: 2, pp. 127-140, June.
- Andersson-Noorgard K and Cummins D (2017). Improving HIV-related biomarkers in complex individuals. ANMJ, 25:3, pp. 26-28, September.
- Chrislip, D., & Carl, E. (1994). Collaborative Leadership: How Citizens and Civic Leaders Can Make a Difference. San Francisco: Jossey-Bass Publishers.
- Crock, E. (2017). Editor. HIV Management for Nurses and Midwives. In HIV Management in Australasia: A Guide for Clinical Care. Sydney: ASHM.
- Cummins D 92017). Patient Voice: Encouraging conversations about HIV associated neurocognitive disorder, ANMJ, 25: 3, p. 36.
- McAllister, J., Beardsworth, G., Lavie, E., MacRae, K. and Carr, A. (2013), Financial stress is associated with reduced treatment adherence in HIV-infected adults in a resource-rich setting. HIV Med, 14: 120–124. doi:10.1111/j.1468-1293.2012.01034.x
- World Health Organization (2014). CONSOLIDATED GUIDELINES ON HIV PREVENTION, DIAGNOSIS, TREATMENT AND CARE FOR KEY POPULATIONS, Geneva, WHO.