

ACCESS TO HIV TREATMENT FOR PEOPLE NEWLY DIAGNOSED WITH HIV AND ‘POLITICS’ OF MIGRATION.

Authors:

Ellard J¹, Murphy DA^{1,2,3}

¹ Australian Research Centre in Sex, Health and Society, La Trobe University, ² School of Population Health, UNSW Sydney, ³ School of Translational Medicine, Monash University

Background:

In July 2023 the Australian Government began providing free HIV treatment to people ineligible for Medicare. In this paper we explore the experiences of and attitudes toward accessing HIV treatment and care by people newly diagnosed with HIV who were temporary migrants.

Methods:

The *Newly Positive* study comprised people recently diagnosed with HIV [only participants on temporary visas were included in this analysis]. We asked participants about their experiences of accessing health care in Australia, including HIV treatment and care.

Results:

Seventeen people were included in the analysis. Only two participants had access to Medicare at the time of diagnosis. Most participants described being relieved when they learnt that they could access antiretrovirals free of charge. Only a few participants experienced delays starting treatment, with most commencing treatment shortly after diagnosis. Participants were grateful to have access to free treatment, but many also had feelings of guilt and questioned the fairness people receiving free treatment when they were not Australian citizens. Some participants expressed a desire to find ways to give back to the Australian community, including participating in research studies. Most participants in context of receiving treatment did not recognise their own paid work, or in some cases international student fees as contributions to the Australian economy.

Conclusion:

We suggest that these expressions of guilt and reservations about non-citizens accessing free HIV treatment, may be a reflection of the negative ways in which migrants, particularly international students have been portrayed in the Australian media, by right wing commentators and conservative politicians, for example, claims that international students are responsible for the housing and cost of living crisis. The provision of free access to HIV treatment for people without Medicare is a significant step toward health equity, but the ‘politics’ of migration in Australia impedes efforts toward health justice.

Disclosure of Interest Statement:

The Australian Research Centre in Sex, Health and Society received funding for these studies from the Australian Government Department of Health and Aged Care (Blood-Borne Viruses and Sexually Transmissible Infections – Surveillance Program)

and Health Equity Matters. No pharmaceutical grants were received in the development of this research. Dean Murphy has received honoraria and research funding from Gilead Sciences and Viiv Healthcare for other research unrelated to these studies. Jeanne Ellard has received honoraria from Gilead Sciences.