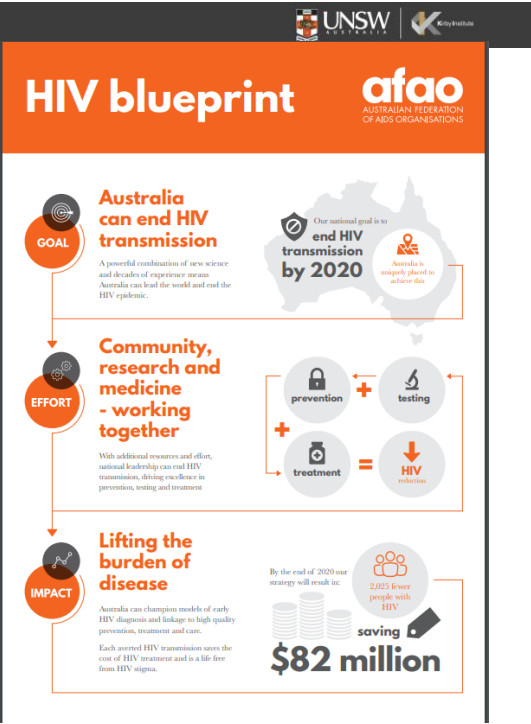





HIV in Australia; the gains, the gaps and the next steps

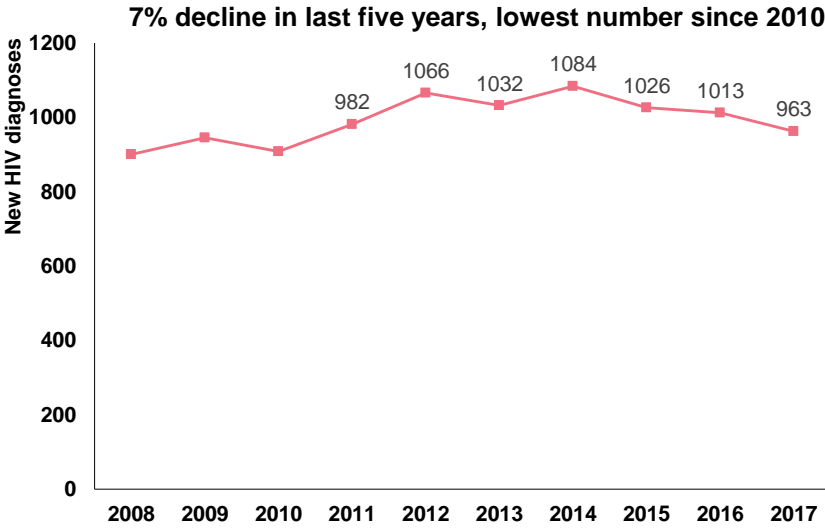
Professor Rebecca Guy
The Kirby Institute, UNSW Sydney

The gains





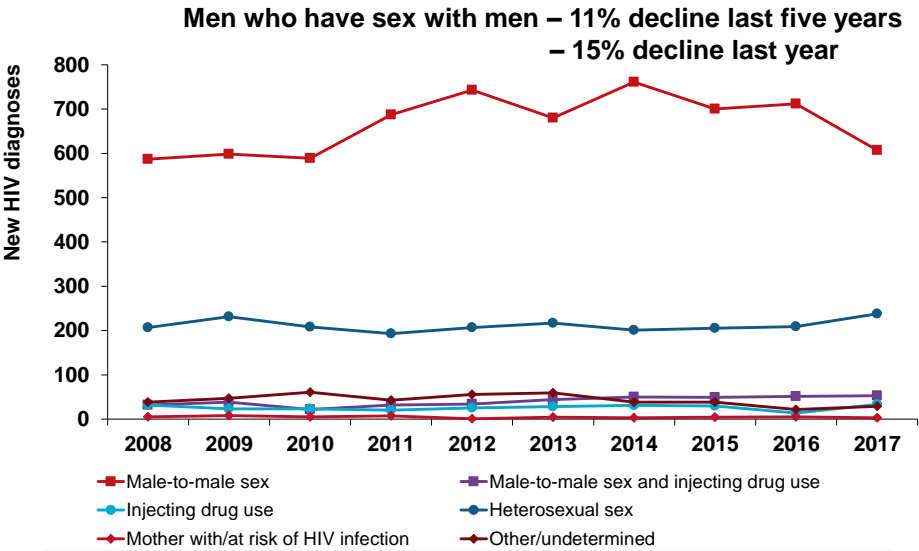
New HIV diagnoses in Australia



3 Source: State and territory health authorities



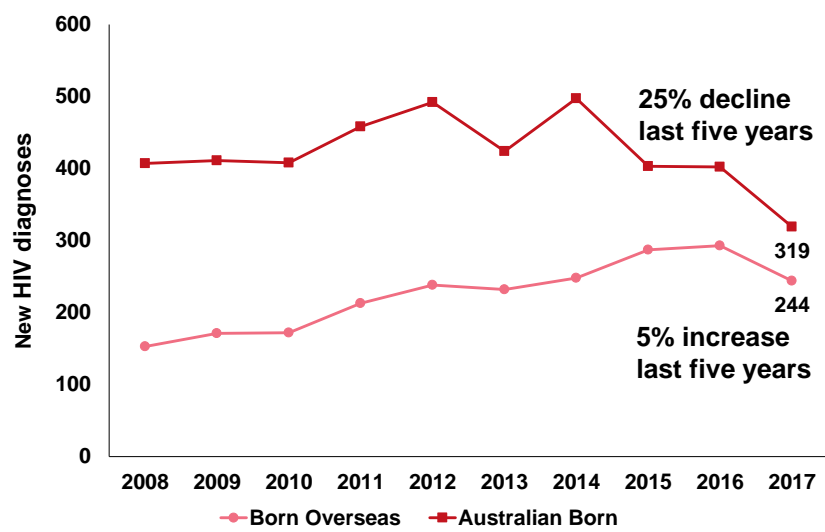
New HIV diagnoses



4 Source: State and territory health authorities

UNSW AUSTRALIA | Key findings

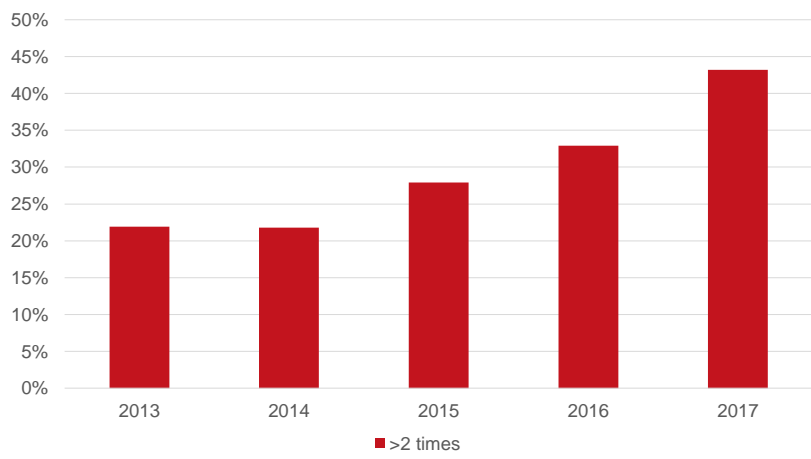
Men who have sex with men



5 Source: State and territory health authorities

UNSW AUSTRALIA | Key findings

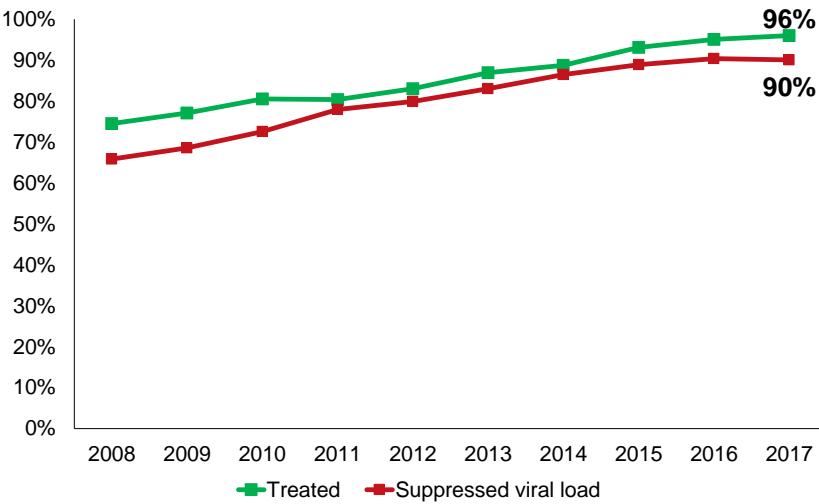
Frequent HIV testing



6 Source: Centre for Social Research and Health

UNSW AUSTRALIA Kolling Institute

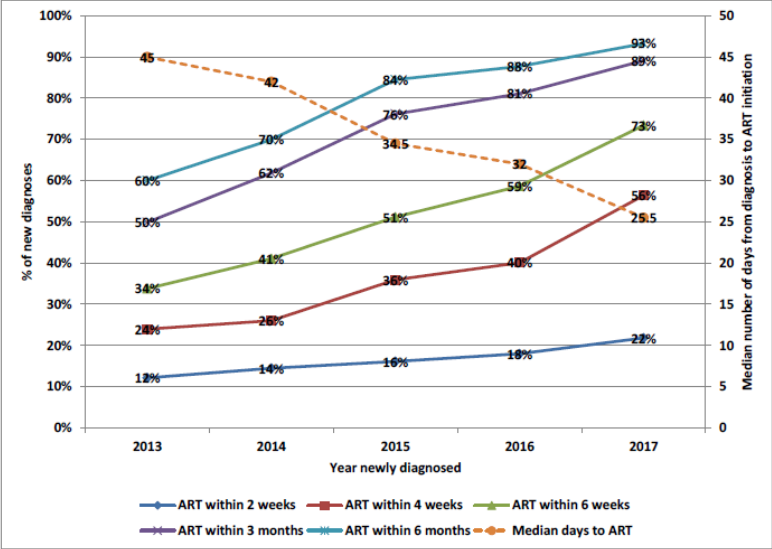
Treatment and suppressed viral load



7 Source: ACCESS

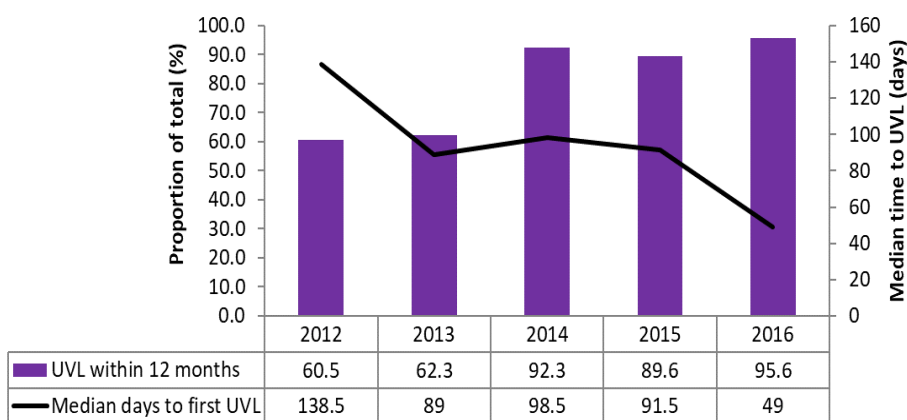
UNSW AUSTRALIA Kolling Institute

Earlier time to treatment



8 Source: NSW health HIV data report

Earlier time to treatment and UVL

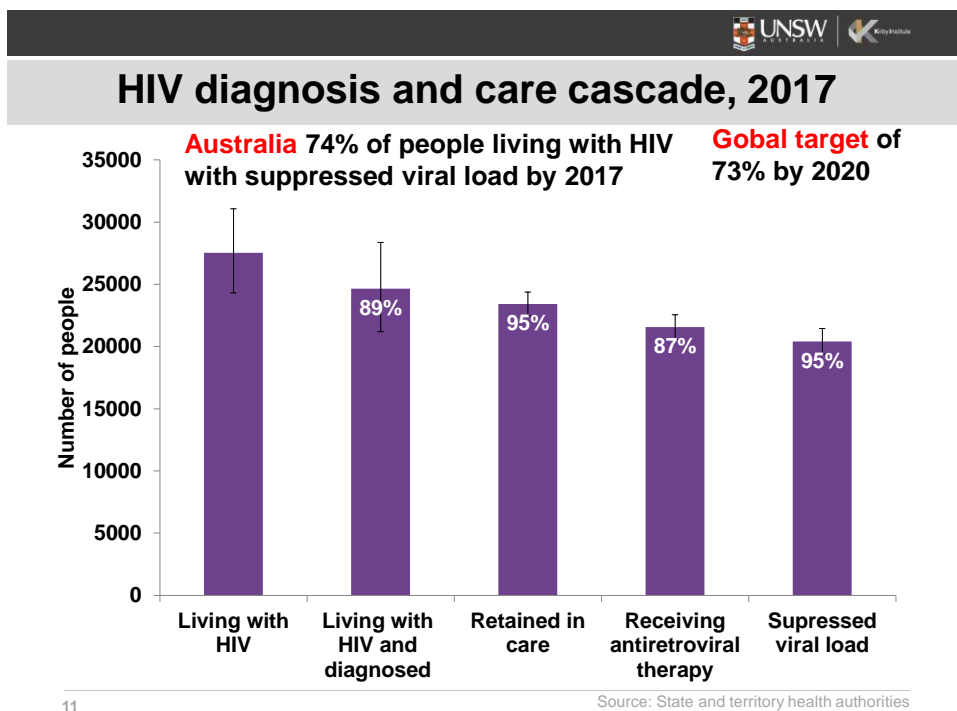


9

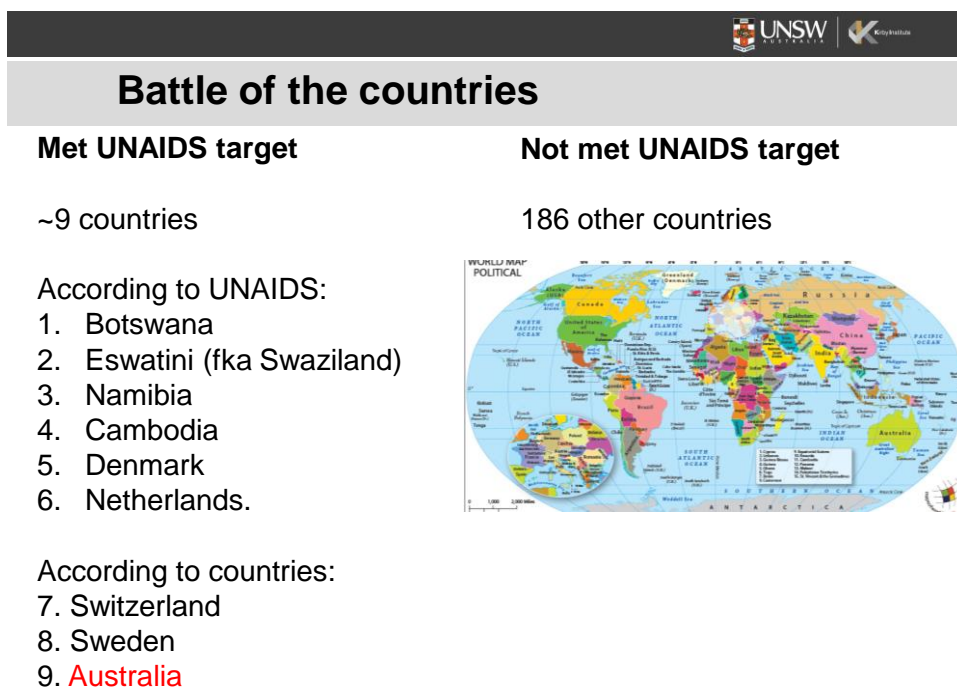
Source: The ACCESS (Australian Collaboration for Coordinated Enhanced Sentinel Surveillance) network

Benefits of UVL

- Partner 2 study and Opposites Attract
- Heterosexual and homosexual couples, pos partner had UVL and the neg partner not on PrEP
- No transmissions in about 125,000 sex acts
- No transmissions in ~90,000 anal sex acts
- Undetectable = Untransmittable, U=U or UVL is form of safe sex
- Modelling predicts without high treatment coverage in Australia, **HIV diagnoses would have increased**



11

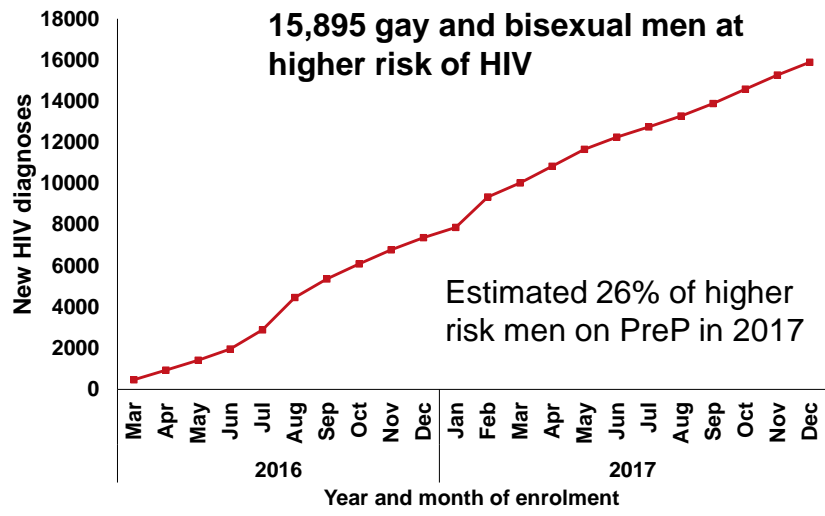


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Gay and bisexual enrolled in PrEP programs



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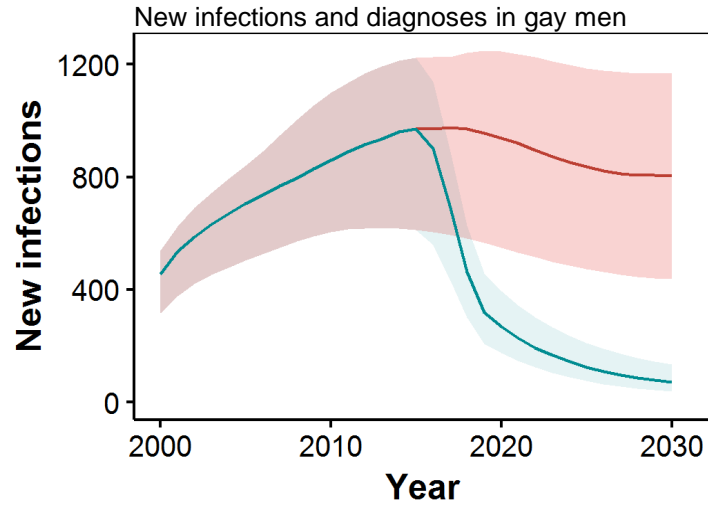
Source: State and territory health authorities

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What is the potential impact of PrEP?

- 90% coverage high-risk men, 3-year scale-up

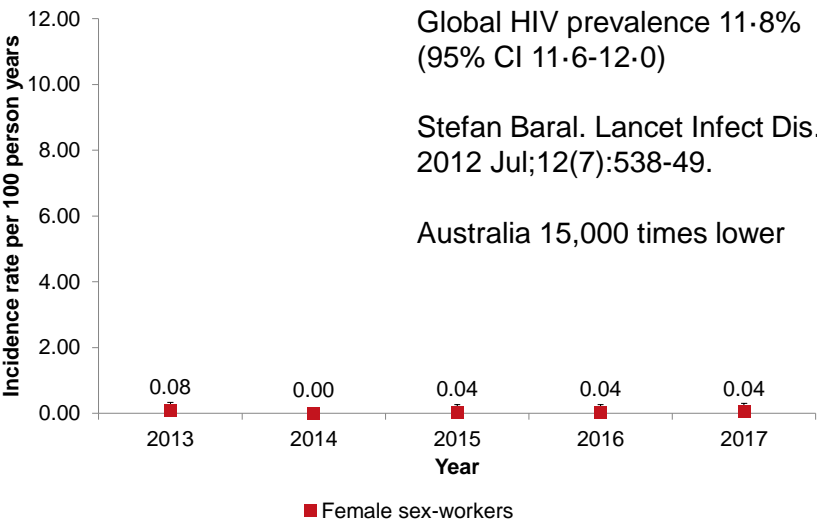


Other benefits of PrEP?


I feel that I'm finally fully **enjoying sex for the first time** in my life. I don't go through the **anxiety** all the time. I will, now normally I wouldn't go to an HIV test thinking, "Maybe this is the time, maybe I've got it now." Now I'm not worried about HIV, to be honest. I, **I feel quite safe**. And, and then also associating sex with **full pleasure** and not just physical but also the full connection that you have, especially with a regular partner where **using condoms feels like you are taking some of that intimacy and pleasure, physical pleasure away**.

Source: Brigitte Haire, interviews with gay men

HIV incidence in female sex workers

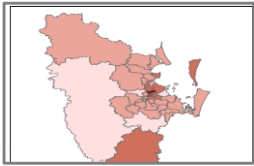


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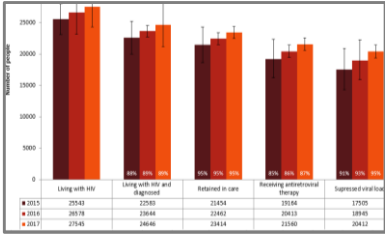


Enhanced surveillance and systems

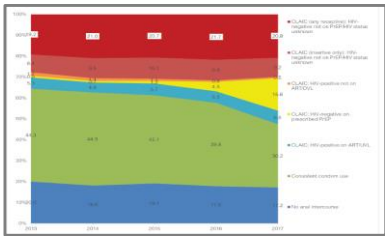
Geographic mapping



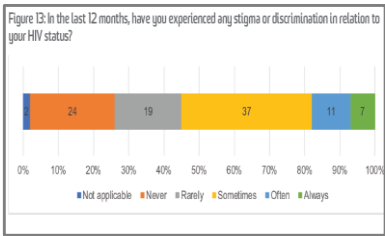
HIV diagnosis and care cascade




Detailed prevention information



Stigma indicators

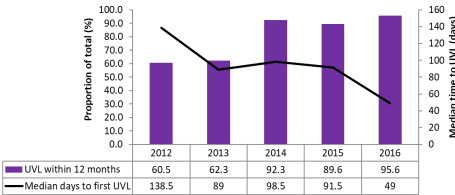


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Enhanced surveillance and systems

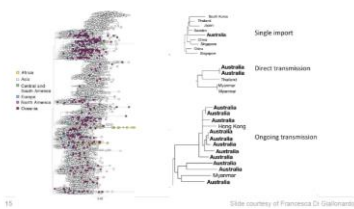
Detailed clinical data - ACCESS



Detailed state reports



HIV drug resistance and genotyping



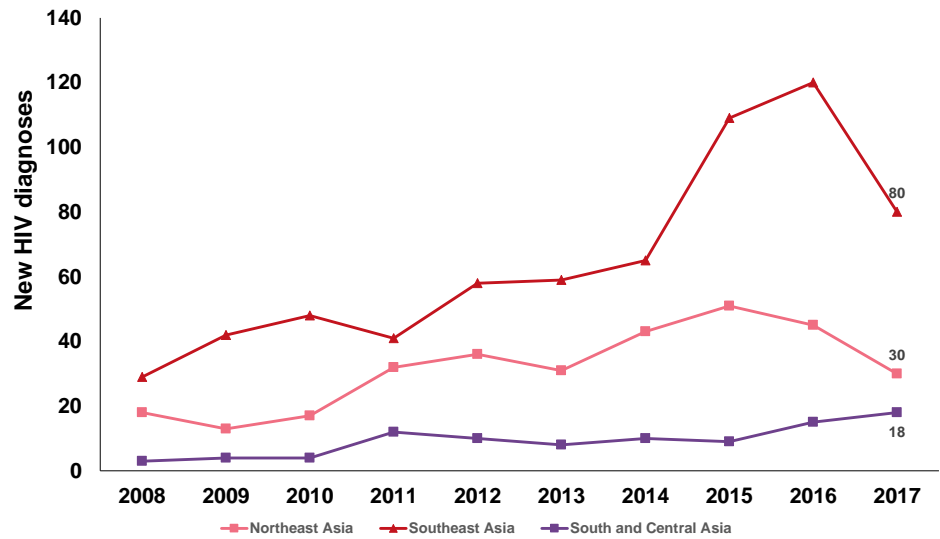
Quality of life data - Futures

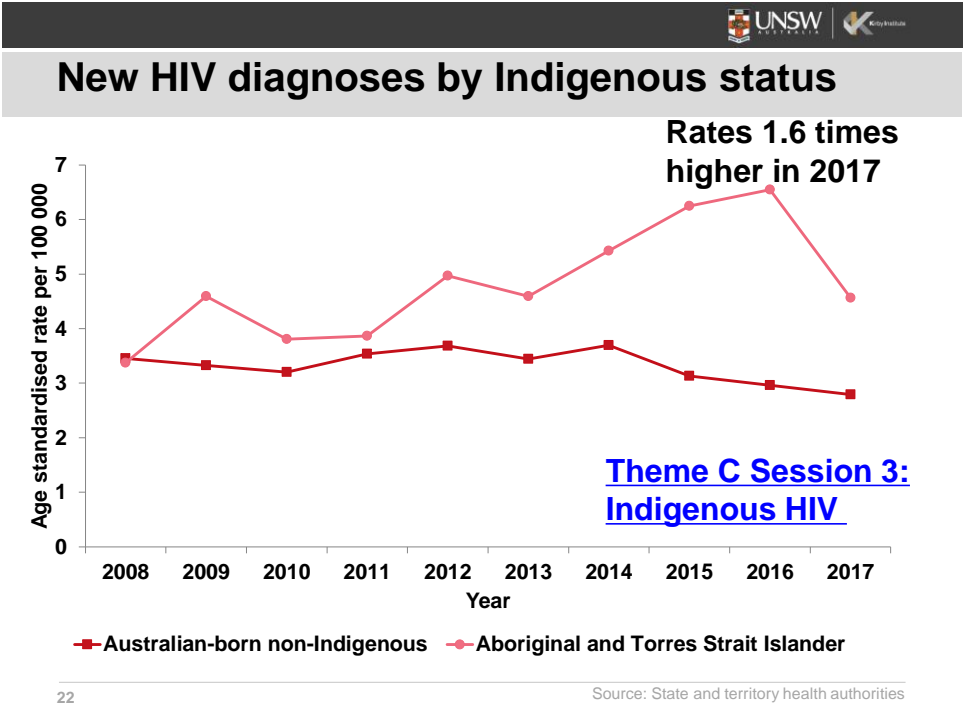
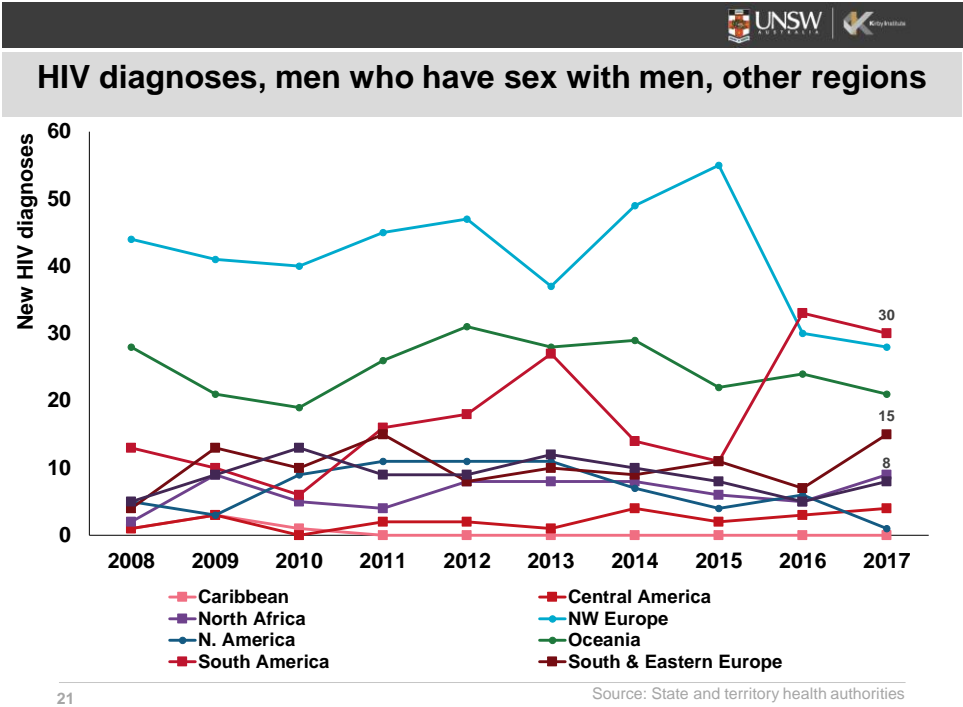


The gaps



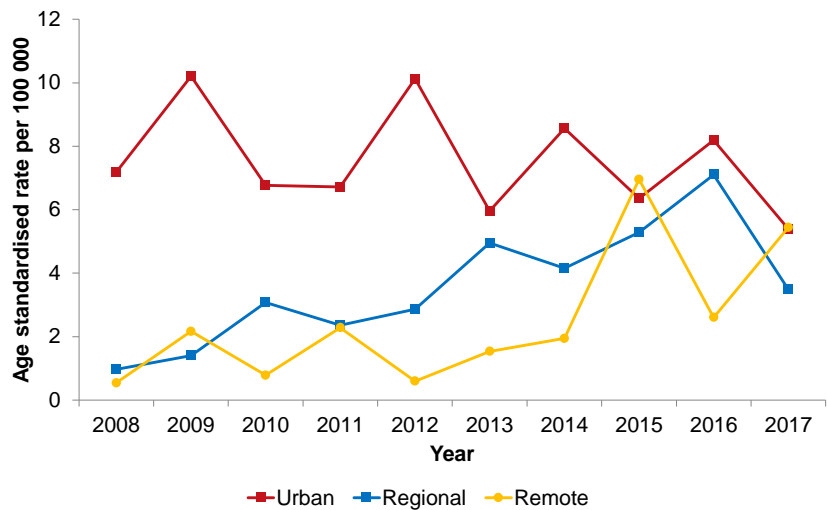
HIV diagnoses, men who have sex with men, born in Asia





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HIV diagnosis rates, Indigenous people, area of residence



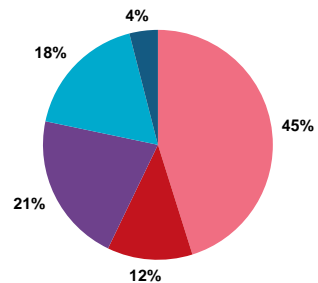
23

Source: State and territory health authorities

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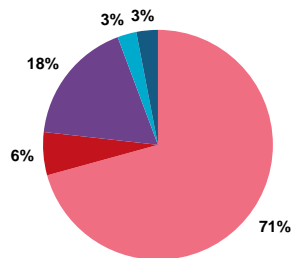
Exposure category by Indigenous status

Aboriginal and Torres Strait Islander



- Male-to-male sex
- Male-to-male sex and injecting drug use
- Heterosexual sex
- Injecting drug use
- Other/undetermined

Australian born non-Indigenous



- Male-to-male sex
- Male-to-male sex and injecting drug use
- Heterosexual sex
- Injecting drug use
- Other/undetermined

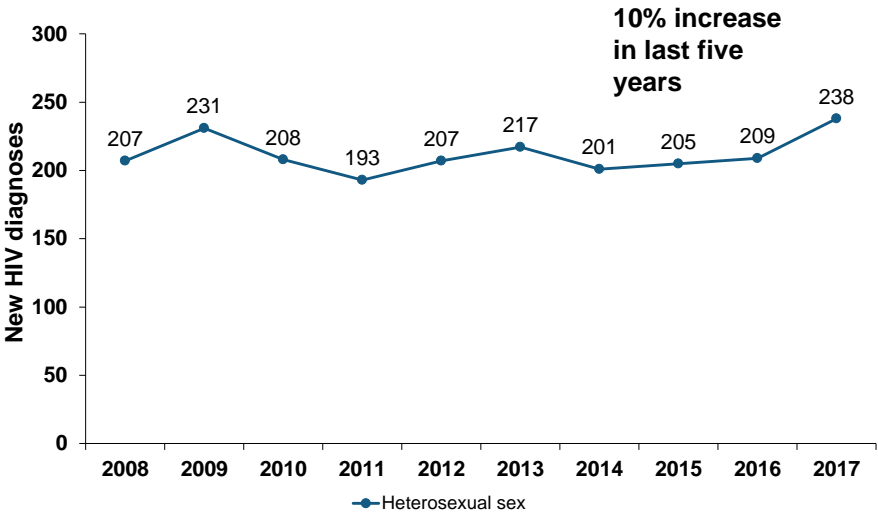
24

Source: State and territory health authorities

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HIV diagnoses, heterosexuals



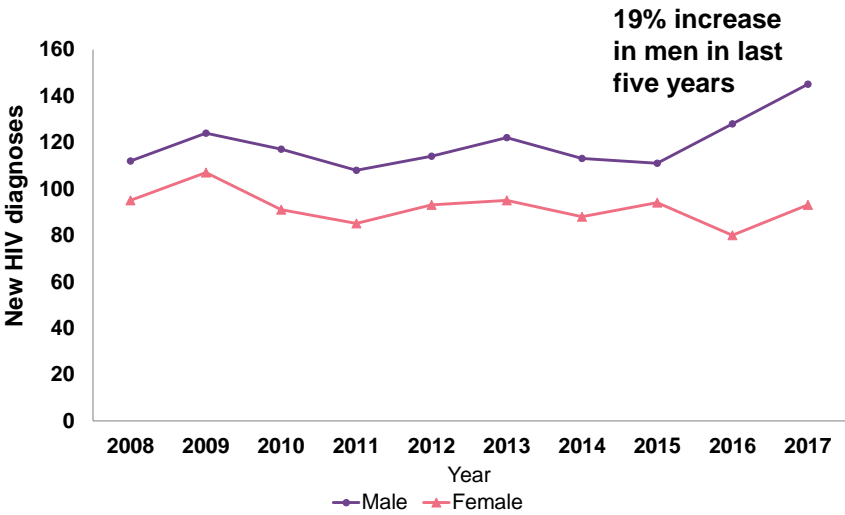
25

Source: State and territory health authorities

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HIV diagnoses, heterosexual men and women

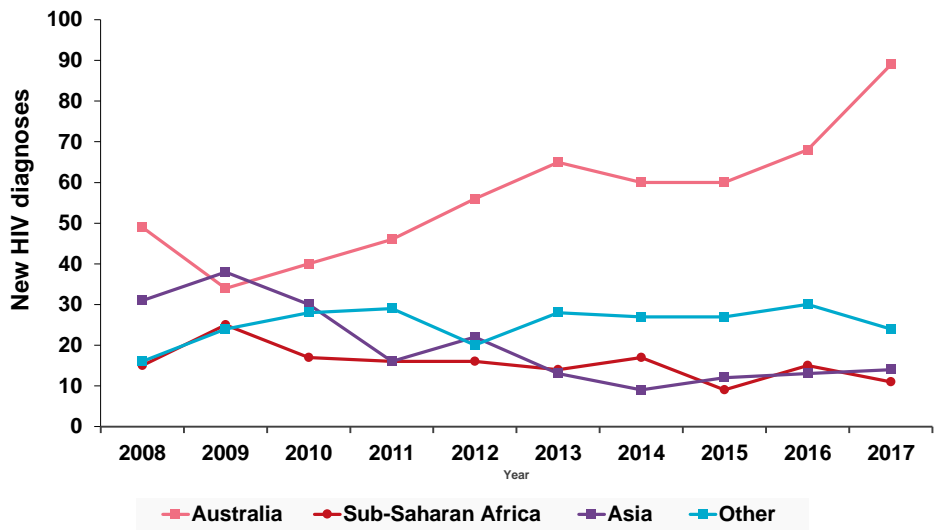


26

Source: State and territory health authorities

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HIV diagnoses, heterosexual men, region/country of birth

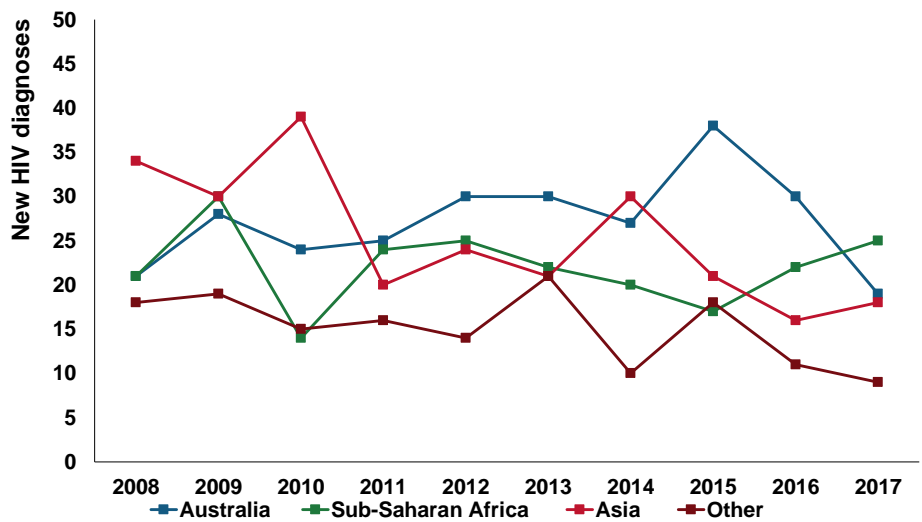


27

Source: State and territory health authorities

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HIV diagnoses, heterosexual women, region/country of birth



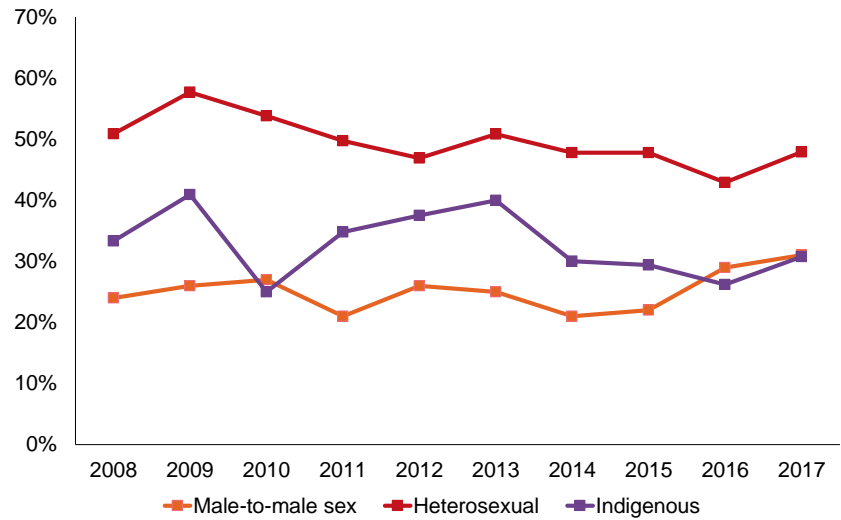
28

Source: State and territory health authorities

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Late diagnoses, CD4 count <350



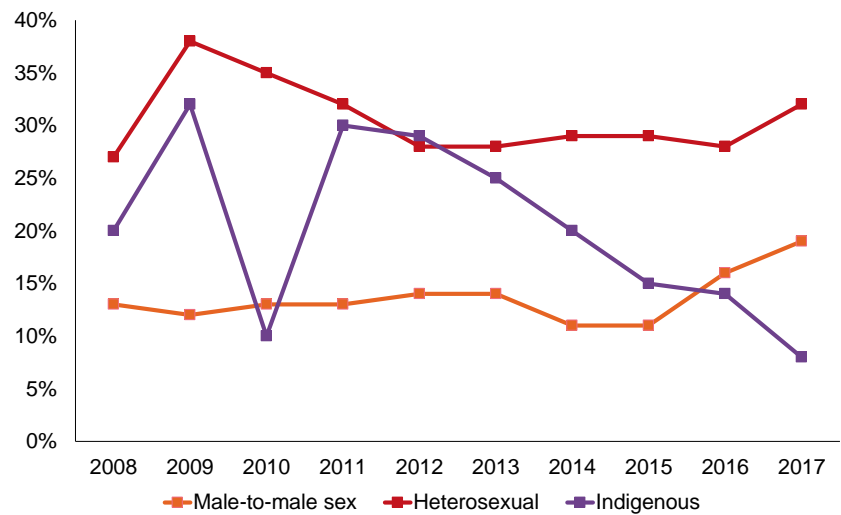
29

Source: State/territory health authorities

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Advanced diagnoses, CD4 count <200

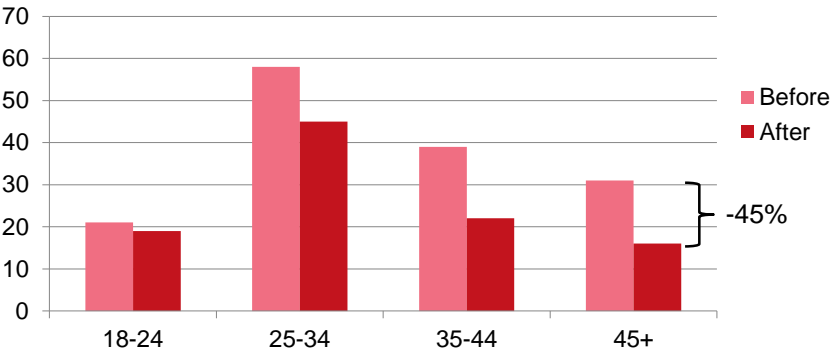


30



Source: State/territory health authorities



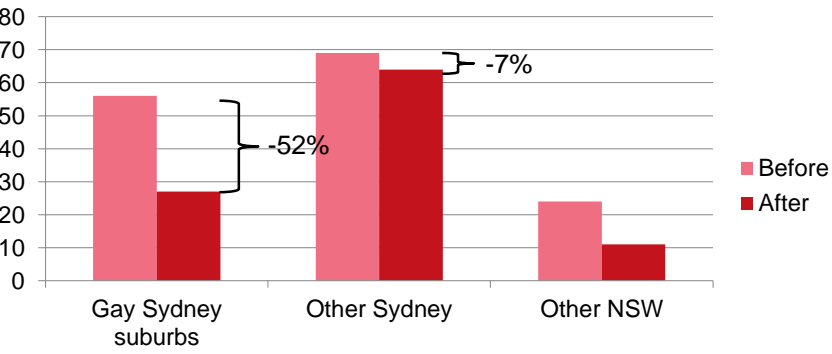
Recent HIV infections in MSM in NSW, before and after PrEP, by age in years



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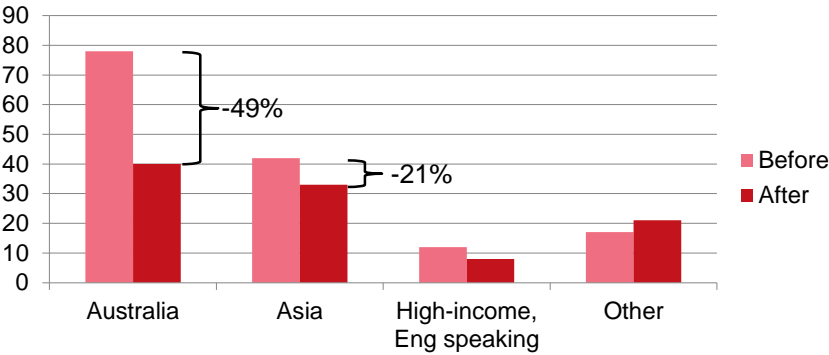
Recent HIV infections in MSM in NSW, before and after PrEP, by area of residence



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Recent HIV infections in MSM in NSW, before and after PrEP, by region of birth

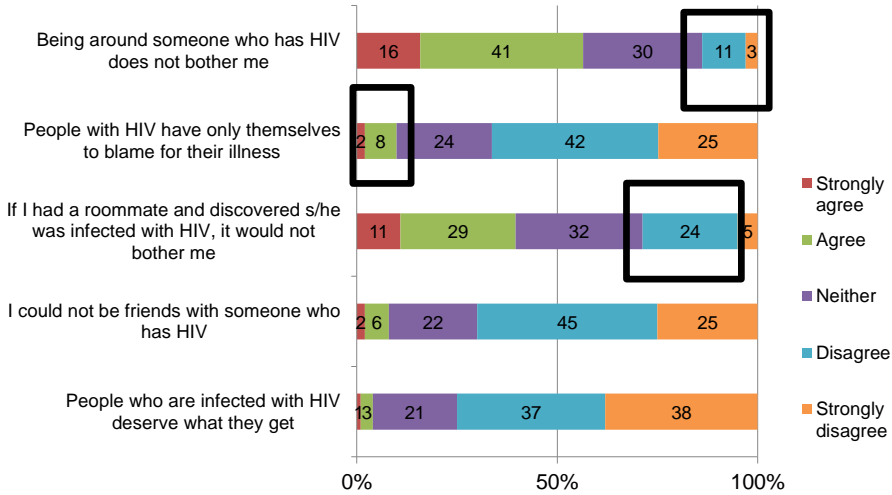


Day 3: [Theme C Proffered Paper Session 6: Impact of Public PrEP Programs](#)

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HIV stigma: general population



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Source: Centre for Social Research and Health 2017 Australian Survey of Social Attitudes (N=1,001)



Positive speakers bureau, NSW





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Source: Positive Life NSW's positive Speakers Bureau



The next steps

Next steps

- Cautiously optimistic about reductions
- Maintain current efforts and focus
- UNAIDS targets of 95:95:95 by 2022
- PrEP coverage to 90% ideally in 3 years
- Sustain and enhance peer-led prevention responses for sex workers and people who inject drugs

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Next steps

- Strategies to address persistent late diagnoses
- Tailored strategies to address:
 - Increases in Indigenous people
 - Increases in Asian GBM
 - No declines in heterosexuals
 - Community-led, multiple-faceted, cover regional and remote areas
 - Led by Indigenous people and overseas born communities
- Support the Asia-Pacific region

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Next steps – research and surveillance

- Subpopulations
 - More behavioural and contextual data
 - HIV diagnoses and care cascades
- Cascade for PrEP
- Targets for quality of life and reducing stigma and discrimination
- Improve data collection for transgender people

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Acknowledgements

- Skye McGregor, Jonathan King, Jane Costello, Garrett Prestage, Phillip Keen, Nick Medland, Brigitte Haire, Ben Bavinton – Kirby Institute
- Kirby team, state/territory surveillance officers, and Christine Selvey
- James Ward - SAHMRI
- Mark Stoove – Burnet
- Limin Mao - CSRH
- Darryl O'Donnell - AFAO

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Quote from David Cooper

"It's unusual in a medical career to see the evolution of a disease from its beginnings – to a disease that emerged as a global health catastrophe – to this point now, where medical research is bringing it under control," he says. "I feel valued to be involved in this work and to have been able to make a difference for so many people."

'The advocacy from the gay community—they really pushed government hard to do something... If it wasn't for the gay community I don't really think we'd be where we are.'

