

# **The Gaps Report: Understanding viral non-suppression among people living with HIV in Australia**

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## **Background:**

Supporting people with HIV to achieve and maintain an undetectable viral load is critical to improving quality of life and eliminating HIV transmission. However, in Australia, the characteristics of people diagnosed with HIV that have a detectable viral load (at least one VL>200 copies/mL annually), despite access to antiretroviral therapy (ART), remain understudied.

## **Methods:**

The Gaps Report is a community-led mixed-methods study that examines sentinel clinical surveillance data from ACCESS and microdata from the National HIV Linkage Study to describe clinical and demographic characteristics of people diagnosed with HIV in Australia who were not prescribed ART, or were prescribed ART but had a detectable viral load between 2021–2023. Survey data from HIV Futures was layered to explore psychosocial factors associated with detectability.

## **Results:**

Clinical data from ~10,500 individuals indicate that between 2021–2023 in Australia, most people who were engaged in HIV care that had a detectable viral load were aged 35–64 years, male, homosexual, and Australian-born. Nearly all (98.6%) individuals newly diagnosed with HIV initiated ART within 12 months, and among those engaged in care beyond their first calendar year, 98% (n=10,414) had ART prescriptions. Among people prescribed ART with a detectable viral load (n=484–503), 39.6–49.8% were in their first calendar year of treatment. Of those with a detectable viral load after the first year of treatment (n=246–304), one in four recorded viral loads of 10,000–100,000 copies/mL and one in six exceeded 100,000 copies/mL. The median time since diagnosis for people with a detectable viral load on ART in 2023 was 11 years; one in six experienced sustained non-suppression across 2021–2022. Survey data indicates people with detectable VL experience financial distress, poorer quality of life, and elevated mental health diagnoses and suicidality.

## **Conclusion:**

Viral suppression may be shaped by structural and biomedical factors, reflecting stigma and economic marginalisation.

## **Disclosure of Interest Statement:**

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