

# Country progress report - Australia

Global AIDS Monitoring 2019





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# Overall

## Fast-track targets

### Progress summary

At the end of 2017, Australia had an estimated 27,545 people living with HIV infection. At 0.1 per cent, the prevalence or overall proportion of people in Australia who have HIV is lower than other comparable high-income countries, and other countries in the region. <sup>^</sup>

There were 963 HIV notifications in Australia in 2017, the lowest number of notification since 2010, with a 7 per cent decline over the last five years, and a 5 per cent decline between 2016 and 2017.

In 2017, 74 per cent of people living with HIV in Australia achieved a suppressed viral load: for the first time Australia reached the UNAIDS 2020 target of 73 per cent.

Australia's HIV epidemic continues to be predominantly in men who have sex with men (MSM) - a key priority population for prevention, testing and treatment - recent declines in HIV notifications have been attributed to fewer new diagnoses in this group. HIV prevalence continues to be very low among people who inject drugs, as a result of highly successful harm reduction strategies. Extremely low rates of maternal transmission have been achieved through comprehensive medical interventions. The incidence of HIV among women involved in sex work is extremely low, due to successful promotion and adoption of safer sex practices.

However, challenges remain. There has not been a corresponding decrease in HIV notifications amongst persons acquiring HIV through heterosexual sex, or in Aboriginal and Torres Strait Islander peoples.

Australia's domestic national response to HIV is guided by the Eighth National HIV Strategy 2018-2022 (the HIV Strategy). The HIV Strategy sets out a framework to support a high-quality, evidence-based and equitable response to HIV with an aim to virtually eliminating HIV transmission in Australia, achieving longer and healthier lives for people with HIV and eliminating stigma and discrimination. The HIV Strategy was developed in partnership with state and territory health departments, community stakeholders, affected communities, research organisations and medical professionals in a cooperative approach to address HIV. This partnership approach has been recognised as a success globally.

# HIV testing and treatment cascade

## **Ensure that 30 million people living with HIV have access to treatment through meeting the 90-90-90 targets by 2020**

### **Progress summary**

The cornerstone of equitable access to treatment in Australia remains its universal healthcare system, including Medicare and the Pharmaceutical Benefits Scheme which provides access to subsidised medication and treatment, to make it more affordable.

It is a Guiding Principle of Australia's HIV Strategy that health and community care in Australia should be accessible to all, based on need. The multiple dimensions of inequality should be addressed, whether related to gender, sexuality, disease status, drug use, occupation, socio-economic status, migration status, language, religion, culture or geographic location, including custodial settings.

'Equitable Access,' including increasing knowledge of and access to, treatment as prevention for individuals with HIV, is also one of Australia's key priority areas for action under the Strategies.

Australia is tracking towards the achievement of the first two 95-95-95 targets, and has attained the third target (95 percent of all people receiving antiretroviral therapy with suppressed viral load).

Of the 27 545 persons estimated to be living with HIV in Australia in 2017, an estimated 24 646 (89 per cent) had been diagnosed, 21 560 (87 per cent of those diagnosed) were receiving antiretroviral therapy, and 20 412 (95 percent of those on antiretroviral therapy) had suppressed viral load. This corresponds to 74 per cent of people living with HIV and diagnosed with suppressed viral load in 2017, exceeding the UN target of 73 per cent for the first time.

# Prevention of mother-to-child transmission

**Eliminate new HIV infections among children by 2020 while ensuring that 1.6 million children have access to HIV treatment by 2018**

## **Progress summary**

Rates of HIV infection among children in Australia remain very low, as a result of effective and comprehensive medical interventions.

Among 246 children born to HIV-positive mothers in the period 2013–2017, the HIV transmission rate from mothers was 1 per cent, compared with 44 per cent in the period 1988–1992 and 27 per cent in 1993–1997. In the past 10 years, the transmission rate was highest in 2015 (4.1 per cent) but has been 0.0% in six of the last 10 years, including 2017.

It is important that high-quality antenatal care and education is provided to all women in order to sustain this achievement.

# HIV prevention; Key populations

**Ensure access to combination prevention options, including pre-exposure prophylaxis, voluntary medical male circumcision, harm reduction and condoms, to at least 90% of people by 2020, especially young women and adolescent girls in high-prevalence countries and key populations—gay men and other men who have sex with men, transgender people, sex workers and their clients, people who inject drugs and prisoners**

## **Progress summary**

HIV prevention through the appropriate combination of multiple evidence-based biomedical, behavioural and social approaches is acknowledged as a Guiding Principle and key areas for action in the HIV Strategy. Australia targets its prevention and health promotion response to the following priority populations identified in the HIV Strategy: people with HIV; gay men and other men who have sex with men (MSM); Aboriginal and Torres Strait Islander people; women; culturally and linguistically diverse people from high HIV prevalence countries, people who travel to these countries, and their partners; sex workers; people who inject drugs; people in custodial settings; and trans and gender diverse people.

National prevention, education and health promotion, including safe sex messaging and condom programs, is principally delivered on behalf of the Australian Government by community based organisations representing the priority populations. State and territory government health services also implement prevention programs within their jurisdictions, some of which are delivered by the state/territory-based community organisations.

The Australian Government subsidises pre-exposure prophylaxis (PrEP) for HIV prevention through its Pharmaceutical Benefits Scheme and has a target to increase the proportion of eligible people who are on PrEP, in combination with STI prevention and testing as part of the HIV Strategy.

# Gender; Stigma and discrimination

## **Eliminate gender inequalities and end all forms of violence and discrimination against women and girls, people living with HIV and key populations by 2020**

### **Progress summary**

Australia has a strong legislative and strategic framework aimed at eliminating violence and discrimination against women and children, and at people on the basis of their health status or gender identity. For example, the Sex Discrimination Act 1984 protects people from unfair treatment on the basis of their sex, sexual orientation, gender identity, intersex status, marital or relationship status, and the National Plan to Reduce Violence Against Women and Their Children 2010-2022 aims to achieve significant and sustained reduction in violence against women and their children.

Australia has a long standing commitment to combatting stigma and discrimination against people living with, or affected by, HIV and ensuring equal access to health services regardless of a person's HIV status, gender, sexuality, drug use or occupation. Australia's health care system provides universal access to HIV prevention, treatment, care and support for all Australians.



# Knowledge of HIV and access to sexual reproductive health services

**Ensure that 90% of young people have the skills, knowledge and capacity to protect themselves from HIV and have access to sexual and reproductive health services by 2020, in order to reduce the number of new HIV infections among adolescent girls and young women to below 100 000 per year**

## **Progress summary**

In the years 2008-2017 there were an estimated 155 notifications of HIV in adolescents (male and female) in the 15-19 year age group, with 11 of these notifications in 2017.

The HIV notification rate in females has remained stable over the past five years (between 0.7 and 0.9 per 100,000) but is low compared with that in males (0.9 vs 7.1 per 100,000 in 2017). Rates have declined by almost half among women aged 20–29 years since 2008, when the rate was 2.5 per 100 000.

HIV incidence remains extremely low among women involved in sex work due to successful promotion of safe sex practices. Based on seroconversions between the years 2013-2017, the overall HIV incidence in 2017 was calculated at 0.04 per 100 person-years (95% CI: 0.02-0.09).

While rates of HIV infection among adolescent girls and young women in Australia remain very low, activities aimed at increasing sexual health literacy and knowledge in all young people are an important part of prevention strategies. Governments and community based organisations undertake and provide awareness and education campaigns to impart the knowledge and capacity for young people to protect themselves from HIV.

The Sex Discrimination Act 1984 gives effect to Australia's international human rights obligations and promotes equality between women and men. The Act protects people from

unfair treatment on the basis of their sex, sexual orientation, gender identity, intersex status, marital or relationship status, pregnancy and breastfeeding.

The national Australian Curriculum: Health and Physical Education, has Relationships and Sexuality as one of 12 focus areas that provide a breadth of learning from the early foundation years through the the 10th year of schooling. As part of this focus area, at appropriate intervals across the continuum of learning, students are supported to develop positive practices in relation to their reproductive and sexual health.

[<https://www.australiancurriculum.edu.au/f-10-curriculum/health-and-physical-education/structure/#focusarea>]

An Australia wide survey conducted in 2018 in students aged between 15 and 18 (enrolled in Years 10, 11 and 12 of their schooling) considers young peoples' knowledge about the human immunodeficiency virus (HIV), sexually transmissible infections (STI) and blood-borne viruses (BBV), and educational initiatives to improve knowledge and minimise behaviours that increase the risk of infection. Key findings from the survey demonstrate that HIV transmission knowledge was generally high, with students, on average, getting 80 per cent of questions asked correct. However there continues to be room to improve young peoples' sexual health knowledge; that students are largely engaging in responsible behaviours, though there is room to increase risk reduction practices; and that students are accessing a diverse array of educational sources to learn about BBV and STI.

# Social protection

## **Ensure that 75% of people living with, at risk of and affected by HIV benefit from HIV-sensitive social protection by 2020**

### **Progress summary**

Australia also has a strong legislative framework and systems in place to provide social protections.

The Australian Government supports individuals, families and communities to achieve greater self sufficiency by providing access to social security, welfare, and health payments. Such payments can cushion the social and economic impact of HIV on households and individuals.

Social protections are also inherent in the following international treaties upheld by Australia:

- International Covenant on Civil and Political Rights
- International Covenant on Economic, Social and Cultural Rights
- Convention on the Elimination of All Forms of Racial Discrimination
- Convention on the Elimination of All Forms of Discrimination against Women
- Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment
- Convention on the Rights of the Child
- Convention on the Rights of Persons with Disabilities.

With regard to HIV, Australia has a long standing commitment to combatting stigma and discrimination against people living with, or affected by, HIV and ensuring equal access to health services regardless of a person's HIV status, gender, sexuality, drug use or occupation. Australia's health care system provides universal access to HIV prevention, treatment, care and support for all Australian residents.

# Community-led service delivery

**Ensure that at least 30% of all service delivery is community-led by 2020**

## **Progress summary**

Implementation of the HIV Strategy is underpinned by a partnership approach between the Australian Government, state and territory governments, people with and affected by HIV, community organisations, researchers and clinicians

In addition to services provided through Australia's publicly funded health system, community based organisations are funded by both the Australian Government and state and territory governments to contribute to the development and implementation of programs and services supporting the HIV strategy. This work includes community-led and peer-based interventions among gay men, sex workers, people living with HIV, people who inject drugs and other important additional programs to priority populations.

Aboriginal Community Controlled Health Services are also funded by national and state and territory governments to deliver community-led care to Aboriginal peoples, particularly in very remote areas of Australia.

# HIV expenditure

**Ensure that HIV investments increase to US\$ 26 billion by 2020, including a quarter for HIV prevention and 6% for social enablers**

## **Progress summary**

Australia's investment into healthcare is principally organised by sector and not specific to disease. The Australian, state and territory, and local governments share responsibility for running Australia's health system. Funding cannot be readily disaggregated across diseases.

# Empowerment and access to justice

**Empower people living with, at risk of and affected by HIV to know their rights and to access justice and legal services to prevent and challenge violations of human rights**

## **Progress summary**

Since the 1980s, Australia's response to HIV has been characterised by the strong engagement of governments with affected people and communities, and recognition of priority populations including gay men and men who have sex with men, transgender people, sex workers and people who inject drugs.

The HIV Strategy acknowledges that the meaningful participation of people living with HIV is essential to the development, implementation, monitoring and evaluation of programs and policies.

The Australian Commonwealth and state and territory governments provide funding to community based non-government organisations representing affected communities to help work towards creating enabling social and legal environments to ensure access to prevention, treatment, care and support.

# AIDS out of isolation

**Commit to taking AIDS out of isolation through people-centred systems to improve universal health coverage, including treatment for tuberculosis, cervical cancer and hepatitis B and C**

## **Progress summary**

Australia's publicly funded universal healthcare system provides integrated people-centred health services, rather than adopting a disease centred approach. This includes access to testing, treatment and management for all Australian residents, regardless of their health condition.

The provision of treatment and care within the community is critical to meeting the needs of people affected by HIV. Both specialist services and publicly funded sexual health services provide care and management for people in the community, and since 2015, HIV antiretroviral medication has been available through community prescribing and dispensing to ensure greater access to treatment.