

**PREP WORKS! EXPLORING BEST PRACTICE ON
PREP ADVOCACY:**

The Australian Experience to Date

Nicolas Parkhill, CEO, ACON



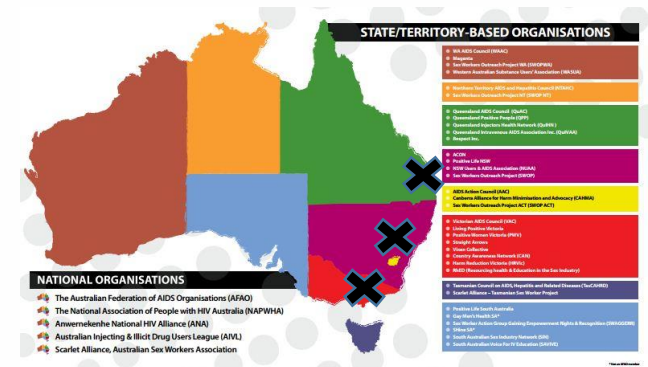
PrEPARING ASIA

A new direction for HIV prevention among MSM in Asia

apcom.org

Where are we at in Australia?

- PrEP is referenced in our national HIV strategy, and stronger in the NSW HIV Strategy
- Truvada for use as PrEP is not currently registered in Australia, though this could happen as early as December this year, more likely early next year
- It will be at least another year after that before we get a decision on the subsidy of PrEP through the Australian Government
- Available to about 600 people through 3 demonstration projects
- Available through personal importation, but cost is prohibitive for most gay men
- National prescribing guidelines have been published by ASHM



What Advocacy Strategies Have We Been Using?

- Prioritised PrEP access for MSM as the leading advocacy issue
- Established national and state PrEP Advocacy Working Groups – a national and local focus required
- Engaging key decision makers – Ministers, policy officers, researchers, doctors, Gilead
 - Letters
 - Policy Roundtables
 - Submissions
 - Media statements
 - Media relations
 - Petitions



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- Built a local evidence base
- Built the profile of the 'early adopters'
- Used international experts for policy and media engagement
- Low-level education activities with the community



PrEP
TALES FROM SAN FRANCISCO

PrEP is a daily pill that HIV negative people can take to prevent HIV infection, and it's the latest weapon in the fight against HIV. It's helping revolutionise HIV prevention in Sydney's sister city San Francisco, with new infections falling to the lowest numbers there since the start of the epidemic.

Professor Robert Grant is a leading San Francisco-based HIV expert who was named one of TIME magazine's 100 most influential people in the world in 2012 for his ground-breaking research into PrEP.

Join Prof. Grant and NSW HIV sector partners to hear about the San Francisco PrEP experience and discuss what may be the lessons for us here in NSW.

Date & Time
Monday 21 September 2015
12pm- 1pm

Location
NSW Ministry of Health
72 Miller St
North Sydney

RSVP
19/9/15
email: rshoesalee@acon.org.au

Prof. Robert Grant

ENGLISHTV NSW Health acon

PRE EXPOSURE PROPHYLAXIS (PrEP) (Position Statement #6)

ACON believes that gay men should have access to the full range of proven prevention technologies in order to reduce HIV transmission and meet the goals contained in the *NSW HIV Strategy*.

ACON supports combination approaches to HIV prevention, which include the use of biomedical technologies, risk reduction strategies, increased access to treatment and testing, and ongoing use of condoms and lubricant.

We believe that pre-exposure prophylaxis (PrEP) is an important addition to the HIV prevention field. We accept there are a number

of unanswered questions about how best to implement PrEP and that the success of PrEP as part of a combination approach depends crucially on its acceptability to those who use it. As such we believe that it is critical to determine how to obtain the greatest benefit from PrEP and to address structural barriers to access and availability.

It is also critical to address social barriers, such as the emergent stigma directed at those considering or using PrEP.

Read our full position statement at: www.acon.org.au/aids2014

What messages have we been using?



- PrEP works
- MSM need access to all of the tools that we know work
- MSM have always taken steps to protect themselves and their partners from HIV transmission – PrEP will not detract those efforts but enhance them
- Failure to rollout PrEP at scale will lead to a failure to reach policy targets (International, National and State)
- MSM are already using PrEP
- We know from international research that those who will benefit most from the use of PrEP are those who are most eager to access PrEP and those most likely to adhere
- PrEP will have a public health impact, reducing new transmissions

Intersection of messages

- Policy messages must be developed to incorporate the local context
- While the policy messages are in some cases different to those directed to community and service providers, they will often be nuanced variations of the same message
- Though sometimes there is conflict between the two
- Strong community and provider messages, when developed appropriately, will support policy messages



What Do We Need To Do?



We need continued advocacy to:

- Expand and enhance access urgently – all states and affordable
- Continue talking to a range of stakeholders – Gilead, national and state governments, clinicians, researchers – and the community
- Better understand and communicate knowledge, attitudes and behaviours regarding PrEP use
- Enhance existing surveillance systems
- Community mobilisation and education
- Peer support models, PrEP Navigators
- Service re-alignment



Thank you!

Any questions?

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