



HIV AND MOBILITY IN AUSTRALIA: CREATING A COALITION FOR ACTION

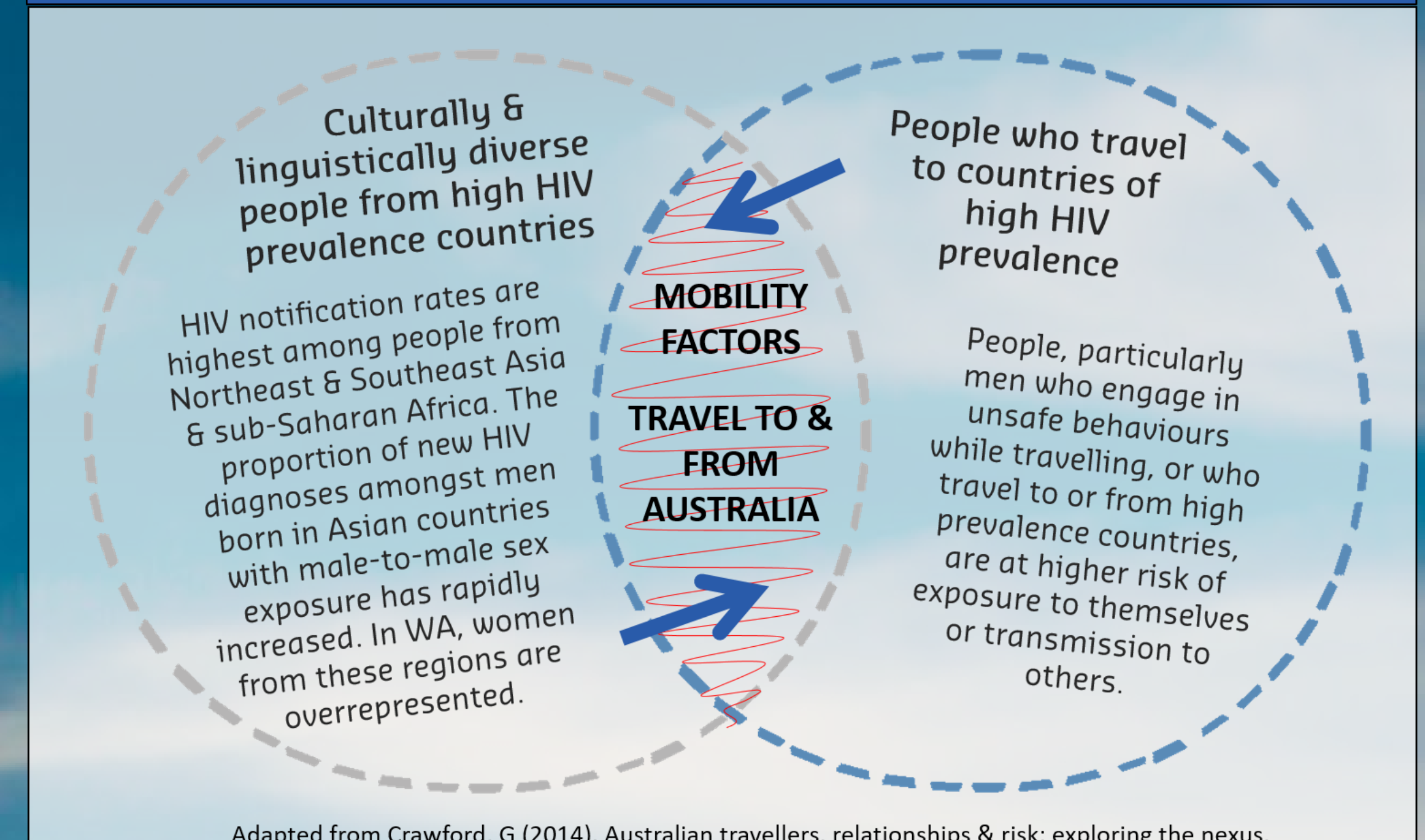
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HIV AND MOBILITY

With more than one billion people moving across the world in 2018, mobility is an increasingly important threat to Australia's HIV response. Australia has seen an increase in HIV notifications among people born overseas and people who travel to and from countries of high HIV prevalence. Australia has a target of reaching zero new HIV infections by 2022, but achieving this will require a more nuanced understanding of HIV among migrant and other mobile populations.

The **HIV and Mobility in Australia: Road Map for Action** (2014) was the first attempt to capture what was known about HIV and mobility in Australia. The **Road Map** identified 5 action areas with 71 locally, nationally and internationally focused strategies to guide related activity outlined in *Australia's National HIV Strategy*. A national **Community of Practice for Action on HIV and Mobility (CoPAHM)** was established in 2015 that now has over 80 members from government, non-government, research & community to keep HIV and mobility on the agenda.

HIV & MOBILITY: WHAT ARE WE TALKING ABOUT?



AUSTRALIA'S SUCCESSES

Five years on from the release of the **Road Map**, action has been seen across a range of strategies. So what does our success look like?

- Forming jurisdictional CoPAHMs in Western Australia, South Australia, Victoria and Queensland. These jurisdictional CoPAHMs work as vehicles to progress local action and respond to specific community needs.
- Multi-jurisdictional research in WA, SA, Vic and New South Wales to explore barriers to HIV testing among migrants from sub-Saharan African and South East Asia; informing practice and policy.
- Funding the **Migrant Blood-borne Virus and Sexual Health Survey** to develop and test a behavioural surveillance survey for culturally and linguistically diverse communities (CALD) population and to implement the survey periodically. This will work towards improving policy and practice in responding to sexual health and blood borne viruses among migrants.

CoPAHM continues to advocate for a focus on HIV and mobility in Australia's HIV response.

AUSTRALIA'S CHALLENGES

Despite our successes, there remains ongoing challenges in the HIV response including:

INCONSISTENCIES IN TERMINOLOGY

- Language used to describe mobile populations is often inconsistent.
- Consistent terminology and definitions would better allow for comparison and clear understanding of risk factors and vulnerability for specific populations.

LACK OF DATA GRANULARITY

- Currently, data collection is inconsistent, with data such as country of birth or country of acquisition not always collected or specified in jurisdictional reporting.
- Where it does exist data are at times not reported on in a timely manner or data are not available online.

HARMONISING APPROACHES ACROSS JURISDICTIONS WHILE REMAINING RESPONSIVE TO LOCAL NEEDS

- There are ongoing difficulties in securing appropriate resourcing to respond to the needs of mobile populations, whilst also allowing for the flexibility to respond to local needs.

TAKE ONE BELOW



WHERE TO NEXT?

We now require momentum and uptake from relevant stakeholders to achieve Australia's goal of zero new transmission by 2022, with particular reference to mobile and migrant populations.

This is a shared challenge. It is essential that there is a commitment from the Australian Government and state and territory governments, community-led organisations, peak bodies, clinical services, research groups, and affected communities to work together to provide informed leadership, policy and coordinated support.

Progress towards these addressing HIV and mobility issues requires coordination and collaboration across jurisdictions. We need a national collective to drive action, supported by local champions in each jurisdiction. A whole of government approach is critical.