

## Our combo-prevention future

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In his opening address at the conference<sup>1</sup>, Graeme Brown, AFAO's outgoing President, acknowledged the enormous challenges we are facing in Australia at the moment, midway through our Sixth National HIV Strategy.

He called on Australia to recognise the bold new targets set by the UN declaration endorsed earlier this year, urged us to implement them and highlighted the work we have yet to do in the areas of HIV criminalisation, stigma and sex work laws.

Treatment as prevention should not be seen as a game-changer, he said, but should instead be incorporated into a combination approach to prevention. The concept of 'test and treat' is unethical and expensive, said Dr Brown, and [PLHIV](#) [1] Person (or people) Living with HIV. This term is now preferred over the older PLWHA. should never be placed under undue pressure on go on treatment.

Dr Brown's comments married well with those proposed by NAPWA special representative Bill Whittaker who called on Australia to up its game and reduce our annual incidence of HIV transmissions by 80% by 2015.

In a satellite session on Australia's response to the recent United Nations Declaration on HIV, Bill called on government and health bodies to reorient our National HIV Strategy to better align with those set by the United Nations at the High Level Meeting held in New York in June this year.

At that meeting, the UN set a number of bold targets for the national community to meet by 2015.

These include a scale-up in the provision of treatment to those with HIV (to 15 million people by 2015), to reduce the number of sexual transmissions of HIV by 50% and transmissions through injecting drug use by 50% and to eliminate the incidence of mother to child transmissions totally – all by 2015.

'We have been sitting on roughly 1000 new HIV transmissions per year in Australia for many years now', Mr Whittaker said.

'It is time we upped our game and lowered the number of new cases of HIV we see in this country.'

These cases continue to be mainly amongst gay men.

Mr Whittaker believes it is achievable for us to reduce this incidence by 80% by 2015 through a combination of HIV prevention techniques.

These include a rollout of new biomedical prevention and new testing strategies.

It's also important that everyone with HIV understands the benefits of treatment and is supported to receive [antiretroviral](#) [2]A medication or other substance which is active against retroviruses such as HIV. treatment in this country.

Currently, around 70 percent of people with HIV in Australia are on antiretroviral therapy but Mr Whittaker proposes that our target should be 90% by 2013.

Professor Michael Kidd, who chairs the Ministerial Advisory Committee on Blood Borne [Viruses](#) [3]A small infective organism which is incapable of reproducing outside a host cell. and [STIs](#) [4][Sexually Transmissible (or Transmitted) Infection] Infections spread by the transfer of organisms from person to person during sexual contact. Also called venereal disease (VD) (an older public health term) or sexually transmitted diseases (STDs). , the government body responsible for implementing the Sixth National HIV Strategy, agreed at the meeting that our national targets need serious considerations.

1. [1](#). Scientists, clinicians and community advocates converged on Canberra at the end of September for the annual ASHM Australasian HIV/AIDS conference. David Menadue and Adrian Ogier were amongst them.

- [involvement of positive people](#)
- [positive in prevention](#)

**Links:**

[1] <http://napwa.org.au/glossary/term/689>

[2] <http://napwa.org.au/glossary/term/122>

[3] <http://napwa.org.au/glossary/term/125>

[4] <http://napwa.org.au/glossary/term/188>