



THE UNIVERSITY  
OF QUEENSLAND  
AUSTRALIA

CREATE CHANGE

# Eliminate Hepatitis C Australia Partnership: EC Australia

## Aboriginal Health Strategy

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# Acknowledgment of **Country**

The University of Queensland (UQ) acknowledges the Traditional Owners and their custodianship of the lands on which we meet.

We pay our respects to their Ancestors and their descendants, who continue cultural and spiritual connections to Country.

We recognise their valuable contributions to Australian and global society.



# Global efforts to eliminate Hepatitis C

- WHO: The Global Health Sector Strategy on Viral Hepatitis, 2016 -2021
  - Vision to eliminate viral hepatitis (VH) as a public health by 2030
    - 90% reduction in new hepatitis infections
    - Reduce VH related deaths by 65%
    - Provision of treatment to 80% of those living with HCV
- 2<sup>nd</sup> World indigenous peoples Conference on Viral Hepatitis: Anchorage Consensus Statement 2017
  - We SEEK the ELIMINATION of avoidable mortality from people living with viral hepatitis, and the ELIMINATION of viral hepatitis from Indigenous Peoples and Tribal Communities WORLDWIDE by 2030.
  - We REQUIRE OUR nation-states and governments to make special provision in health and funding policies to achieve elimination of viral hepatitis from Indigenous Peoples and Tribal Communities by 2030.
  - We RECOGNISE and SUPPORT the desire of Indigenous Peoples and Tribal Communities to determine our futures and to receive culturally effective services which reduce the impact and eliminate viral hepatitis.

# Australia's efforts to Eliminate Hepatitis C

- Australian government endorsed the WHO's, The Global Health Sector Strategy on Viral Hepatitis, 2016-2021
  - 2016 Aus. Gov DAA on PBS complimented by changes to prescribing rules to support broadest possible access
  - Fifth National Hepatitis C Strategy 2018-2022
    - Supported by State and Territory Strategies
- Burnet Institute: Eliminate Hepatitis C Australia Partnership: EC Australia
  - EC Australia a multi disciplinary, cohesive approach and appropriately targeted nationwide approach
  - Brings together researchers, implementation scientist, gov., health service and community organisations
  - State and Territory leads (e.g. UQ for Qld)

# Overview of Eliminate Hepatitis C (EC) Australia

- Funded by the Paul Ramsay Foundation to support and facilitate a national coordinated response to ensure we meet our elimination targets.
- This work will focus on:
  - People who inject drugs, Aboriginal and Torres Strait Islander Peoples, people in prison and men who have sex with men co-infected with HIV
  - People living with hepatitis C that are at risk of progressing to severe liver disease and HCC
- Through a systems-wide approach to increase hepatitis C awareness, testing and treatment, this work will use an iterative evaluation response to inform refinements to models of care and optimal responses.
- All work underpinned by EC Australia Advocacy Strategy

# EC Australia Goals

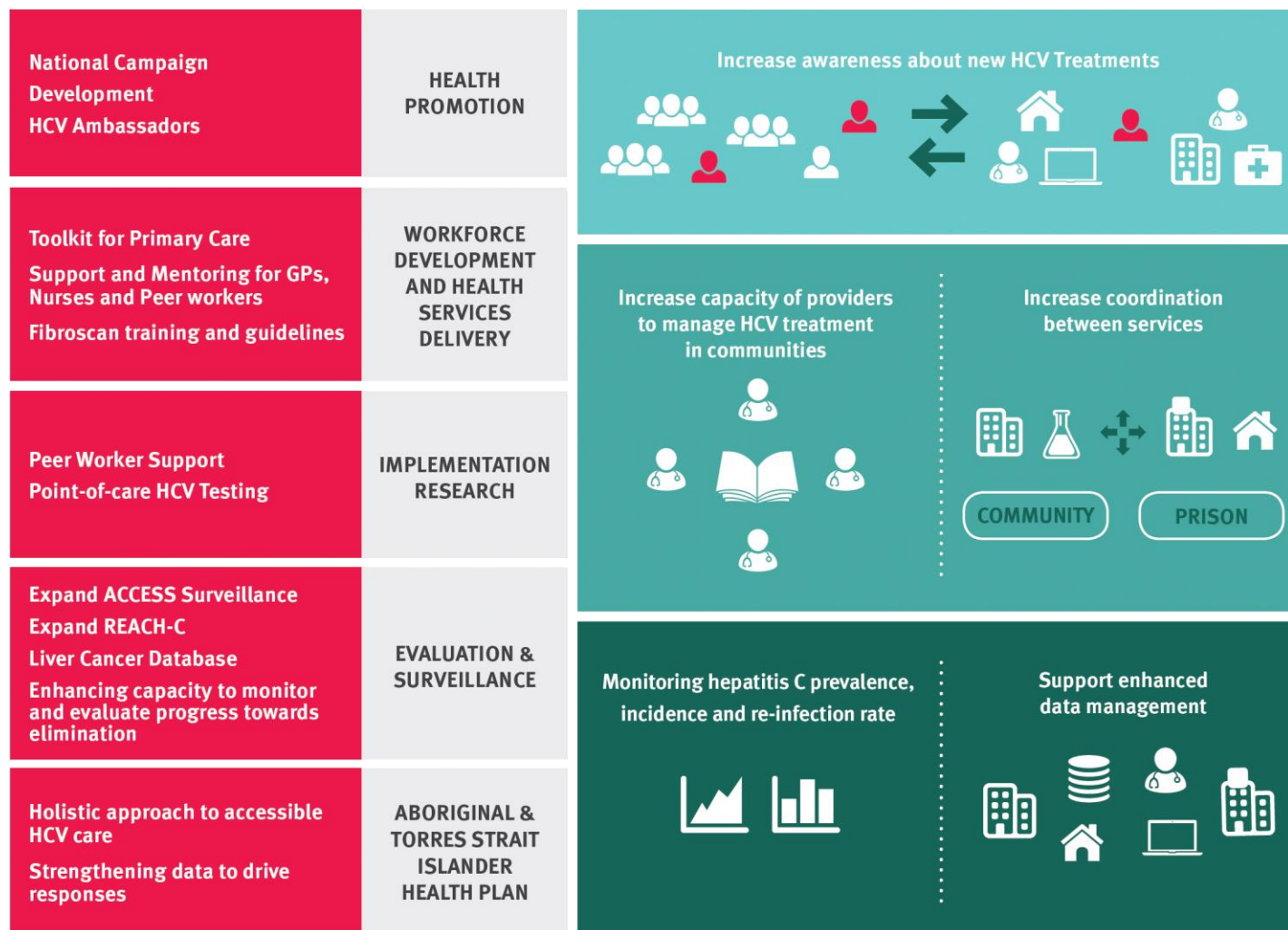
**Vision: The elimination of hepatitis C as a public health threat by 2030**

- Ensure at least **15,000** Australians with chronic hepatitis C are treated and **cured of their infection annually**
- Ensure people identified with **hepatitis C related cirrhosis are treated** and cured, and **regularly monitored** for liver failure and liver cancer consistent with National Guidelines
- Establish a **national collaborative framework** to facilitate a coordinated response for the elimination of hepatitis C as a public health threat from Australia by 2030\*
- Advocate for the **integration of EC Australia into the National Strategy action plan** to ensure long-term sustainability and funding for key activities

\* Which aligns with National Hepatitis C Strategy 2018-2022 and integrates with existing jurisdictional working groups and/or committees responsible for implementing elimination strategies targeting key risk populations



# EC Australia Components



# EC Australia Health Promotion Campaign

The National Health Promotion campaign aims to increase treatment amongst people who inject drugs

- The National Health Promotion campaign will roll out late May 2021 and will be
  - co-designed using a peer led approach;
  - will identify core messages, approaches and channels that support EC Australia's aims and objectives;
  - designed by a national reference group (AIVL, National Peer Network, NUAA, Peer Based Harm Reduction WA, Hepatitis NSW, Harm Reduction Vic, Centre for Social Research in Health (UNSW), Burnet Institute.
- The campaign will support other jurisdictional & national activities
- Aboriginal specific campaign to be designed and developed



# Workforce Development and Health Service Delivery (WDHSD) Projects

- 20 projects are funded through the WDHSD component
- Projects are grouped into three themes:
  - Workforce development
  - Models of care
  - Linkage to care
- Projects are being implemented across Australia
  - 6 funded in QLD

# QLD WDHSD Projects

Project	Partner	Overview
Community Corrections Hepatitis C Clinic Project	Hepatitis QLD	Establishment of hepatitis C testing, work up (including fibroscan) and treatment model of care at Redlands Community Corrections Centre to support mandatory offender requirements and provide a hep C care pathway.
Prison Transition Support	Queensland Injectors Health Network (QuIHN)	Project provides hepatitis C and treatment support/linkage for people with confirmed infection in prison and immediately upon release from prison.
Hepatitis C Community Peer Support Project	QuIHN	Two peer outreach positions based at the Brisbane QuIHN office, provide face to face contact and phone support to people who inject drugs seeking and/or on hepatitis C treatment in south east QLD.
Notification follow up	UQ and QLD Department of Health	This project will re-engage individuals who are the subject of HCV notifications to the Notifiable Conditions System (NoCS), by contacting the notifying clinicians of all newly acquired and unspecified hepatitis C notifications in order to encourage further testing, linkage to care and treatment.

# QLD WDHSD Projects

Project	Partner	Overview
Incentives for People Who Inject Drugs	University of Queensland	<p>Project planning underway, intervention to improve HCV care cascade. EOI about to be sent to eligible services:</p> <ul style="list-style-type: none"> <li>Needle and Syringe programs</li> <li>Aboriginal Medical Services</li> <li>GP clinics</li> <li>Sexual Health Services</li> <li>Drug and Alcohol Services</li> <li>Community Health Services</li> </ul>
Cairns Hep C Free incentive program for PWID	Cairns Sexual Health Service	<p>This project provides an incentive for hepatitis C testing and receiving the result, script cost, incentive for returning for monthly pills and incentive for testing for SVR.</p>

# Implementation Research

- EC Australia will undertake implementation studies to explore how best to support and increase engagement of people who may be at risk of hepatitis C in care
- Project opportunities may include:
  - Assessing barriers to hepatitis C care in both Community Controlled Organisations and mainstream health services
  - Mini audits of patient information management systems in ACCHS
  - Understanding how to best use the notification data system to develop an effective and acceptable linkage to care model
  - Utilising rapid point of care testing models of test and treat

# Evaluation and Surveillance

- The EC Australia Evaluation and Surveillance Working Group released the first annual report in 2019 titled: Australia's progress towards hepatitis C elimination.
- Second report release has been postponed for 2020.
- Aboriginal & Torres Strait islander health data will be prioritised to ensure a holistic picture of Australia's progress. This may include:
  - Ensuring accurate population data for the Aboriginal community regarding hepatitis C
  - Work with the data custodians to help provide a clearer understanding of progress towards hepatitis C elimination in the Aboriginal and Torres Strait Islander community

# CREASHBBV: ATLAS

## ATLAS

- First national surveillance network of 40-50 Aboriginal Medical Services contributing STI and BBV testing and diagnosis data, supplemented with behavioural data

## Why?

- Enhance current surveillance systems that predominantly collect only notification data
- Provide evidence to guide policy and program responses
- Enable health services to access data in formats that will enhance CQI and reporting





# Australia's progress towards hepatitis C elimination: 2019

## Data Contributors

- Australian Collaboration for Coordinated Enhanced Sentinel Surveillance of sexually transmitted infections and bloodborne viruses (ACCESS)
- Australian Needle Syringe Program Survey
- Enhancing Treatment of Hepatitis C in Opioid Substitution Settings Engage study
- Monitoring hepatitis C treatment uptake in Australia
- Real world Efficacy of Antiviral therapy in Chronic Hepatitis C in Australia project
- Stigma Indicators Monitoring Project
- Gay Community Periodic Survey
- Viral Hepatitis Mapping Project
- Mathematical modelling; on behalf of the HCV Estimates and Projections Reference Group

# Australia's progress towards hepatitis C elimination: Annual Report 2019

- 70000 people received new DAA therapy by end of 2018
  - However rates have declined in past two years
- Tx has been relatively high in some priority populations;
  - Efforts seem to support declining HCV rates among, PWID & HIV+ gay, bisexual and MSM
  - Declining incidence in these two groups suggest early evidence of a Tx as prevention benefit
- Appears to be a decline in advanced liver disease complications and liver-related deaths
  - People who may no longer pose current transmission risk are accessing Tx.

## Challenges:

- Gaps in knowledge and limited data to accurately assess progress of some priority populations:
  - Aboriginal & Torres Strait Islander
  - prisoners &
  - People living in rural & remote areas
- Urgent action is required to identify their needs.



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# Thank you

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