



WA Aboriginal Sexual Health and Blood-borne Virus (BBV) Strategy 2015–2018



**ABORIGINAL
STIs & BBVs**

The *Western Australian Aboriginal Sexual Health Strategy 2005–2008* recognised the unacceptably high rates of sexually transmissible infections (STIs) among Aboriginal people in WA and set out a coordinated, comprehensive response which called upon service providers and communities to work together to improve sexual health outcomes.

The [second iteration of the strategy \(2008–2014\)](#) (PDF 1.13MB) extended the focus to blood-borne viruses (BBVs) in recognition of the high Aboriginal to non-Aboriginal rate ratio of notifications for hepatitis B (unspecified) and hepatitis C.



**PREVENTION
& EDUCATION**



**TESTING &
DIAGNOSIS**



**DISEASE MANAGEMENT
& CLINICAL CARE**



**WORKFORCE
DEVELOPMENT**



**ENABLING
ENVIRONMENT**



**RESEARCH, EVALUATION
& SURVEILLANCE**

Background

Disparity in notifications between Aboriginal and non-Aboriginal populations

During the life of these strategies, the Aboriginal to non-Aboriginal rate ratio of notifications for a range of STIs decreased.

Specifically:

- chlamydia notifications decreased from 13:1 to 4:1
- gonorrhoea notifications decreased from 75:1 to 31:1
- infectious syphilis notifications decreased from 122:1 to 3:1.

This reflects the fact that the average increase in notification rates in the Aboriginal population was substantially lower than in the non-Aboriginal population. Additionally, notification rates for unspecified hepatitis B among Aboriginal people decreased by an average of 2.3 per cent per year between 2004 and 2013.

By contrast, over the same time period, newly acquired hepatitis C notification rates among Aboriginal people increased by an average of 7.9 per cent per year while rates among non-Aboriginal people decreased by an average of 1.6 per cent per year.

Rates of STI and BBV testing in the Aboriginal population have not historically been reported at a state level.

Stakeholder consultation

Consultations with key stakeholders identified a number of ongoing priorities. These include:

- providing high-quality, culturally appropriate sex education for Aboriginal youth in school and non-school settings
- increasing information and education around BBVs, particularly around the risks of sharing injecting equipment
- ensuring Aboriginal people who inject drugs have greater awareness of, and access to, sterile injecting equipment
- promoting workforce skills and confidence around opportunistic STI and BBV testing
- addressing stigma and shame associated with injecting drug use
- addressing ongoing stigma and shame associated with STIs and BBVs.

The third strategy, the *WA Aboriginal Sexual Health and Blood-borne Virus (BBV) Strategy 2015–2018* sets out WA Health's plan for working with sector partners to address these and other priorities in order to further reduce the rates of STIs and BBVs in the Aboriginal population. The strategy:

- complements, rather than replaces, previous strategies
- builds upon the *Fourth National Aboriginal and Torres Strait Islander Blood-borne Viruses and Sexually Transmissible Infections Strategy 2014–2017*
- is guided by the *WA Aboriginal Health and Wellbeing Framework 2015–2030*.

The effective implementation of this strategy necessitates a partnership approach between:

- government departments and agencies
- Aboriginal medical services and community controlled health services
- non-government organisations
- private service providers

- researchers
- Aboriginal communities.

The success of this strategy is also contingent on meaningful recognition of the importance of cultural protocols, the role of history and the influence of other social determinants on Aboriginal health outcomes.

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WA Aboriginal Sexual Health and BBV Strategy – prevention and education

Strengthen health promotion activities

Activities and preventative education regarding safer sex, condom availability and access, and safer injecting practices is a focus of the strategy.

Specifically, this includes:

- development of Aboriginal-specific and Aboriginal-inclusive social marketing for STI and BBV prevention messages
- supporting and encouraging educators in all schools to deliver developmentally and culturally appropriate sexual health and BBV education to Aboriginal students, including education on risks, protective behaviours, gender issues and respectful relationships
- ensuring collaboration between relevant organisations, services and agencies to deliver key prevention messages to young Aboriginal people outside of school
- improving access to free or affordable condoms.

Increase availability of injecting equipment

Under this strategy, efforts to increase the coverage and accessibility of injecting equipment (needle and syringe programs) to meet community needs will include:

- improving awareness of and engagement with existing needle and syringe programs among Aboriginal people who inject drugs, through promotion and outreach
- increasing needle and syringe program service and safe disposal options, particularly in regional and remote areas.

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WA Aboriginal Sexual Health and BBV Strategy – testing and diagnosis

Explore the feasibility, acceptability and cost-effectiveness of testing methods

The range of existing and emerging testing methods will be examined for feasibility and cost-effectiveness, including rapid testing in non-laboratory settings.

Specifically, this includes:

- supporting the trial of point-of-care testing machines for chlamydia and gonorrhoea in appropriate sites across WA
- investigating and supporting options for testing in non-traditional settings, such as through community outreach
- investigating the feasibility of point-of-care testing for syphilis in appropriate sites across WA.

Increase testing in the primary health care setting

Activities to increase provider-initiated STI and BBV testing in primary health care will include:

- supporting the extended scope of practice for registered nurses and Aboriginal health workers and associated changes to the regulatory environment to enable increased testing in remote areas and outreach settings
- developing and/or supporting training and resources that assist doctors, nurses and Aboriginal Health Workers to embed STI and BBV screening in their practice through opportunistic testing and adult health checks.

Improve accessibility of testing for young people

Activities to improve testing rates in Aboriginal people will include:

- developing and evaluating a targeted social marketing campaign to address 'shame' and normalise testing among Aboriginal people
- supporting and encouraging primary health providers to ensure services are youth-friendly.

Improve testing rates and coverage

The strategy aims to build on successful activities to improve testing rates in Aboriginal people by:

- increasing Aboriginal people's awareness of online testing through the Could I Have It website
- continuing to support regional sexual health teams, including the role of regional sexual health coordinator
- supporting the establishment of dedicated sexual health clinics where appropriate.

Maintain and strengthen links between STI and HIV testing

A key component of the strategy is to educate health professionals that HIV testing is an integral part of any STI assessment.

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WA Aboriginal Sexual Health and BBV Strategy – disease management and clinical care

Improve care and treatment

A range of tools and activities will be implemented to improve care and treatment of STIs and BBVs in Aboriginal people.

Initiatives will include:

- promoting the importance of contact tracing to health providers, Aboriginal people and the community
- supporting the trial of point-of-care testing machines for chlamydia and gonorrhoea across WA and assess impact on access to treatment
- supporting changes to the relevant legislation to enable appropriate treatment to be provided when a doctor is not available
- promoting knowledge of current treatment guidelines for all STIs including gonorrhoea, particularly with respect to the need for antimicrobial surveillance.

Increase treatment rates

Increasing the treatment rates of Aboriginal people with BBVs is a key focus of the strategy.

This can be effected by:

- ensuring the affected community is informed about treatment options
- increasing access to treatment through community-based treatment services in metropolitan and regional areas
- developing culturally appropriate pathways of care for Aboriginal clients with BBVs
- supporting and encouraging Department of Corrective Services and community health staff to maintain continuity of health care for Aboriginal people with BBV during transitions between correctional facilities and the community.

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WA Aboriginal Sexual Health and BBV Strategy – workforce development

Training, education and support programs

Under this strategy, sector partners will work together to ensure delivery of responsive and coordinated training, continued education and professional support programs. These programs will be extended to include regional and remote areas and new workforce entrants.

This will be achieved by:

- ensuring that the health workforce has access to resources and training to increase skills and confidence around opportunistic testing
- supporting the development of a range of training delivery options, including face-to-face, online and video conferencing
- supporting sexual health education training for pre-service teachers.

Provide adequate training and support

Ensuring that STI and BBV testing and treatment providers have adequate training and support to deliver appropriate services is vital.

Specifically this will be achieved by:

- increasing promotion of relevant resources to all health providers, such as the *Silverbook*, *STI Testing and Management Quick Guides*, and *Sexual Health Orientation Manual for Endemic Regions* and resources developed by non-government organisations
- improving skills and confidence in obtaining informed consent and providing test results
- improving skills and systems to maintain client confidentiality
- developing culturally competent workforces.

Aboriginal workforce training

Building the skills of the Aboriginal workforce to help drive health promotion, testing and treatment pathways in local communities is also important.

This will be specifically effected by:

- encouraging students completing Certificates or Diplomas in Aboriginal and/or Torres Strait Islander Primary Health Care to complete relevant sexual health and BBV elective units, with a particular emphasis on encouraging more Aboriginal men to work in the sector
- ensuring the Aboriginal workforce has knowledge of and access to resources and training developed by sector partners
- supporting dedicated Aboriginal sexual health promotion positions.

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WA Aboriginal Sexual Health and BBV Strategy – enabling environment

Reduce stigma and discrimination

Reducing racism, stigma and discrimination in community and healthcare settings is emphasised. Empowering priority populations is important to increase individual and community resilience.

This will be achieved by:

- developing and evaluating a targeted social marketing campaign to address ‘shame’ and normalise STI and BBV testing among Aboriginal people
- promoting greater recognition of injecting drug use as a health issue and social determinants related to this
- encouraging service providers to complete cultural awareness/competency training
- ensuring Aboriginal people are involved in service planning for STI and BBV services.

Remove barriers to equality

A primary focus of the strategy is to reduce institutional, regulatory and systems barriers to equality of care for Aboriginal people infected and affected by STIs and BBVs in the health care sector.

This will include continuing to advocate for Aboriginal people in custodial settings to have access to the same STI and BBV prevention and treatment options as are available to the general community.

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WA Aboriginal Sexual Health and BBV Strategy – research, evaluation and surveillance

Improve reporting

A focus of this strategy is to ensure high levels of reporting Aboriginal identification in all relevant data collections. This will include investigating options for reporting Aboriginal identification in STI and BBV testing data.

Evaluate programs and campaigns to ensure they are effective

Under the strategy, health promotion, testing, management, care, support, education and awareness campaigns will be evaluated to ensure they are effective.

Activities will include:

- developing and evaluating a targeted sexual health and BBV social marketing campaign for Aboriginal people
- supporting the trial of point-of-care testing machines for chlamydia and gonorrhoea across WA
- promoting information on evaluation methods for service providers.

Changing STI issues and concerns

Research and assessment of emergent or changing STI issues and concerns particularly relevant to Aboriginal communities will be undertaken as part of the strategy.

This will include a focus on:

- investigating options for testing in non-traditional settings, such as through community outreach
- investigating ways of improving contact tracing among Aboriginal people.

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This document can be made available in alternative formats on request for a person with a disability.

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