5 May 2017

Mr Martin Rocks
Social and Cultural Determinants of Indigenous Health
Department of Health
GPO Box 9848,
Canberra ACT 2601, Australia

Dear Mr Rocks,

Re: Social and Cultural Determinants of Indigenous Health and the Implementation Plan for the *National Aboriginal and Torres Strait Islander Health Plan 2018-2023*

AFAO is the national federation leading the HIV community response. AFAO's members are the AIDS Councils in each state and territory, the National Association of People Living with HIV Australia, the Australian Injecting and Illicit Drug Users League, the Anwernekenhe National HIV/AIDS Alliance and Scarlet Alliance, Australian Sex Workers Association. AFAO advocates for its member organisations, promotes medical and social research into HIV and its effects, develops and formulates policy on HIV issues, and provides policy advice to Commonwealth, State and Territory governments.

While data on HIV positive and lesbian, gay, bisexual, transgender and intersex Aboriginal and Torres Strait Islander people remains limited relative to need, it is reasonable to conclude from the available evidence indicates that a combination of homophobia, transphobia and racism exacerbates general social and cultural determinants of health such as housing, poverty and incarceration, leading to poorer health outcomes.

In consulting on the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2018-2023, we strongly encourage you to engage directly with Aboriginal and Torres Strait Islander people who have HIV and/or who are lesbian, gay, bisexual, transgender and intersex, and their organisations.

The Social Determinants of Health

It is universally accepted that we must empower people to influence their health, including people who are Aboriginal and Torres Strait Islander people. We must also recognise that people and communities experience barriers that limit their ability to positively protect and promote their health. We therefore welcome the Australian Government's initiative in undertaking this consultation.

As the Department has noted, factors influencing health include connection to family, community and country, racism, education, employment and income, housing and law and justice among many others. Many of the factors that cause health inequities therefore exist well beyond the health system.

In understanding the contribution of these factors to poorer health, we must accordingly recognise that improvements in health will occur in tandem with improvements in the wider social determinants of health.

HIV and STIs, Aboriginal and Torres Strait Islander People, and the Social Determinants of Health

AFAO is deeply concerned about sustained increases in HIV among Aboriginal and Torres Strait Islander communities. HIV rates in these communities are now trending above the rate for non-Aboriginal people for the first time in Australia's HIV epidemic. This vulnerability results from younger age, poorer access to primary health care, very high background rates of STIs and higher mobility, incarceration and drug use. For

these same reasons, HIV will be extremely difficult to manage in Aboriginal and Torres Strait Islander communities once established at any scale, despite the availability of very effective HIV treatments, and prevention strategies.

Additionally, STI rates are at unacceptably high levels and have failed to attract the attention and effort required from governments. The emergence since 2011 of a now entrenched epidemic of infectious syphilis in Aboriginal and Torres Strait Islander communities across northern Australia provides evidence that our systems are not responding effectively to HIV and STIs in these communities.

In Australia, the situation is compounded by our Federal/State division of responsibilities that sees the Commonwealth funding primary health care and Aboriginal and Torres Strait Islander community controlled organisations, and States and Territories responsible for public health management and HIV and STI programs. The collective failure of governments to arrest the slow-moving epidemic of infectious syphilis in Aboriginal and Torres Strait Islander communities across northern Australia in recent years provides ample evidence that our systems are not equipped to respond effectively to HIV increases in these communities.

Options for improvement

AFAO's view is that a clear and detailed plan, and adequate, sustained funding, is required for an effective response to HIV and STIs among Aboriginal and Torres Strait Islander communities. Such a response would include capacity for rapid action on HIV outbreaks as well as generalised prevention, screening and treatment in areas of vulnerability. An effective approach must pragmatically identify stakeholders, identify the protocols under which action would occur, describe how responses are to be mobilised and establish accountabilities.

At the centre of such efforts must be a recognition of the role of Aboriginal and Torres Strait Islander community control in shaping and delivering these efforts. At present, we are seeing strong interest and engagement by Aboriginal and Torres Strait Islander community controlled organisations in responding to HIV and STIs. This must be encouraged, fostered and resourced.

We should also not err in believing that Aboriginal and Torres Strait Islander organisations alone should bear the burden of responding. The articulation of the expected contribution of non-Indigenous organisations in efforts to reduce Aboriginal and Torres Strait Islander health inequity and disadvantage must also form part of any approach.

Responses to HIV and STIs in both Indigenous and non-Indigenous communities will be most effective when there is balance between the need for sufficient specialisation to allow for competent and effective efforts, and those efforts being as integrated as possible within existing health system arrangements that are acceptable to communities. They must also, of course, recognise and be responsive to the lived experience of individuals and communities with respect to the determinants of health.

We look forward to further engagement in the development of the *National Aboriginal and Torres Strait Islander Health Plan 2018-2023*. Please do not hesitate to contact me on 02 9557 9399 should you wish to discuss our submission.

Yours sincerely,

Adj A/Prof Darryl O'Donnell
Chief Executive Officer