New HIV notifications have stabilised over the years 2012–2016. In Australia, 26,444 people are estimated to be HIV-positive at the end of 2016. 2,796 (11%) were unaware of their HIV status.

**Aboriginal and Torres Strait Islander People**

- **Australian born non-Indigenous**
- **Aboriginal and Torres Straight Islander**

The rate of HIV diagnosis is 2.2 times higher among the Aboriginal and Torres Strait Islander people than Australian born non-Indigenous people (6.4 v 2.9 per 100,000). Between 2012-2016, there has been a 33% increase in HIV diagnosis among Aboriginal and Torres Strait Islander people compared to a 22% decline among Australian born non-Indigenous people.

**ABORIGINAL AND TORRES STRAIT ISLANDER PEOPLE**

The stabilisation of new diagnoses comes after years of increased HIV testing, earlier access to HIV treatment, and increased availability of PrEP through clinical trials.

- **PrEP access needs to be affordable and equitable across Australia.**
- **Late diagnosis and undiagnosed HIV remains a concern.**
- **HIV transmission among Aboriginal and Torres Strait Islanders continues to rise.**

**Innovations in HIV Technology**

- **PrEP (Pre-Exposure Prophylaxis):** The use of HIV medication by HIV negative people at risk of HIV to prevent HIV acquisition.
  - **PrEP is accessible to gay and bisexual men at high risk of HIV in NSW through the EPIC trial.**
  - In the first half of 2017 there was a 31% reduction in HIV notifications among gay and bisexual men in NSW.
- **PEP (Post-Exposure Prophylaxis):** Month-long daily treatment to prevent HIV acquisition following exposure to risk.
- **TasP (Treatment as Prevention):** There is zero risk of HIV transmission from someone on HIV treatment with an undetectable viral load.
- **HIV self-testing:** HIV test device that enables HIV tests at home.
- **Australian research shows HIV self-testing devices increase testing among infrequent testers and non-testers.**
  - In Australia, 11% of people with HIV are undiagnosed and 33% are diagnosed late.
- **PEP**
- **Post-Exposure Prophylaxis**
  - Month-long daily treatment to prevent HIV acquisition following exposure to risk.
- **TasP**
  - Treatment as Prevention: There is zero risk of HIV transmission from someone on HIV treatment with an undetectable viral load.

**HIV Prevalence in Australia**

- **Gay and Bisexual Men:** 7.3%
- **People Who Inject Drugs:** 1.4%
- **Aboriginal & Torres Strait Islander People:** 0.11%
- **All Adults in Australia:** 0.13%

The risk of HIV acquisition among female sex workers is <0.1% per year.
The Australian Federation of AIDS Organisations (AFAO) is the national federation for the HIV community response in Australia. AFAO works to end HIV transmission and reduce its impact on communities in Australia, Asia and the Pacific. AFAO's members are the AIDS Councils in each state and territory; the National Association of People with HIV Australia (NAPWHA); the Australian Injecting & Illicit Drug Users League (AIVL); Anwernekenhe National HIV Alliance (ANA); and Scarlet Alliance, Australian Sex Workers Association. AFAO's affiliate member organisations – spanning community, research and clinical workforce – share AFAO's values and support the work we do.

Contact AFAO at: +61 (2) 9557 9399 enquiries@afao.org.au afao.org.au

GLOBAL TARGETS

95% of people living with HIV are aware of their status.

93% of those people diagnosed and on treatment have an undetectable viral load.

28% OF PEOPLE LIVING WITH HIV IN AUSTRALIA HAVE A DETECTABLE VIRAL LOAD

HIV TRANSMISSION IN AUSTRALIA: 2016 DATA

1% INJECTING DRUG USE
3% OTHER/UNSPECIFIED
5% MSM AND INJECTING DRUG USE
21% HETEROSEXUAL SEX
70% MEN WHO HAVE SEX WITH MEN (MSM)

IMPACT
Measuring the impact of HIV prevention.

Modelling shows that investment in HIV prevention can save billions of dollars through averted infections.

Every $1 spent on NSPs saves the community $27 in healthcare costs.

The annual lifetime costs of treatment and care for someone living with HIV is $1 million.

HIV STRATEGY
Why is Australia’s HIV response one of the best in the world?

PEER EDUCATION
Involving key populations in the response.
Community-led HIV prevention.
Peer-based rapid HIV testing.

HARM REDUCTION
Needle and syringe program.

PREVENTION
Health promotion programs reinforcing condom use, Undetectable=Untransmittable, widespread availability of HIV testing; community-based rapid HIV testing, PEP, advocacy to improve PrEP access.

WHAT IS NEEDED
Fund the community-based, peer-led responses of AFAO and its national members
Make PrEP available on the PBS immediately
The TGA must approve an HIV self-testing device immediately
Fund a sustained response to HIV and STIs among Aboriginal and Torres Strait Islander people
Resource specialised training for frontline workers in the community-led response

WHAT AFAO AND ITS MEMBERS BRING TO THE RESPONSE
Initiated by the community
Designed by the community
Implemented by the community
Responsive to the evolving needs of the community
Often enacted through partnership with mainstream
Dependent on community for authority

AFAO and its members
The Australian Federation of AIDS Organisations (AFAC) is the national federation for the HIV community response in Australia. AFAO works to end HIV transmission and reduce its impact on communities in Australia, Asia and the Pacific. AFAO’s members are the AIDS Councils in each state and territory; the National Association of People with HIV Australia (NAPWHA); the Australian Injecting & Illicit Drug Users League (AIVL); Anwernekenhe National HIV Alliance (ANA); and Scarlet Alliance, Australian Sex Workers Association. AFAO’s affiliate member organisations – spanning community, research and clinical workforce – share AFAO’s values and support the work we do.

Contact AFAO at: +61 (2) 9557 9399 enquiries@afao.org.au afao.org.au