A COMMUNITY COLLABORATION FOR AN IMPROVED POLICY RESPONSE TO BBVS IN AUSTRALIAN PRISONS

Marriott K¹, Bresnan A, Duvnjak A², Forbes L³, Farmer F⁴, Maynard, A⁵, Stoove M, Tatz S.

Introduction: For many years, establishing an effective response to the prevention and management of blood borne viruses in Australian correctional settings has been challenging. Contributing to this is the fact that Australian prisons are the responsibility of individual state and territory governments and are managed in differing ways across the country. At the same time, key evidence-based strategies remain controversial to some. Recently, there has been significant change occurring in the treatment of BBV's with implications for the approach to the prevention of BBVs. In 2015, a Parliamentary Inquiry into Hepatitis C in Australia highlighted the need to establish a framework for a national approach to BBVs in prisons.

Methods: A literature review of Australian and international guidelines, implemented projects, research and policy relating to the prevention, management and treatment of BBVs in correctional settings was undertaken. The data was analysed by a national working group of representatives of peak community and peer based BBV organisations and relevant experts, initiated by Hepatitis Australia. A resultant document outlining the policy position of Australia's community peak bodies, including recommendations, is being developed for release in September.

Results: There are significant inconsistencies between jurisdictions in the use of prevention strategies and the general management and treatment of BBVs in prisons. In particular, the use of internationally proven prevention strategies have not been introduced (eg. NSPs) or not implemented to sufficient levels.

Conclusion: Australia has historically been a world leader in its response to BBVs. However, Australia's response to BBVs in prisons has been slow, disjointed and in most cases does not address BBVs through effective strategies.

Disclosure of Interest Statement: The collaborators for this presentation recognise the considerable contribution that industry partners make to professional and research activities. We also recognise the need for transparency of disclosure of potential conflicts of interest by acknowledging these relationships in publications and presentations.

¹ Hepatitis Australia, ² AIVL, ³ AFAO, ⁴ Hepatitis WA, ⁵ NAPWHA