# A guide on how your HIV information is managed

Published Date : 21 November, 2019

## What’s The Difference?

#### Electronic Medical Record (eMR):

Your HIV information is now available to all clinicians and other NSW Health staff involved in providing care for you and who access your electronic medical record (called an eMR). Often, there is a need for doctors, nurses and other NSW Health staff to know about your HIV status when managing conditions that may not be directly related to HIV.
Before September 2017 this was only available to staff directly involved in your HIV treatment and counselling.
The confidentiality of your HIV information remains unchanged and your privacy is still strictly protected. NSW Health staff members can only view, access or use your health information when it is directly relevant to your treatment and care. Anyone who is not directly involved in your care and inappropriately accesses your record will face serious disciplinary action and potentially criminal charges.
If you have any questions about this change, do not hesitate to contact a Pozhet team member.
If you have privacy concerns, please contact the Privacy Contact Officer in your Local Health District.

#### My Health Record (MHR):

MHR is a national database which has the health information of all Australians, including people living with HIV. It has information like prescriptions, allergies, doctors’ visits and test results. It means that all your medical records and prescription information will be in one central online location managed by you and accessible to authorised health professionals and non-clinical administrators who are looking after your health.
You can [control](https://www.myhealthrecord.gov.au/about/privacy-policy) what goes into your MHR and who sees it. If you don’t want information or records from a particular doctor or hospital visit to be included, you need to tell the doctor, nurse or staff member at the beginning of your appointment.
You can cancel your MHR at any time, and your record will be permanently deleted.
If you are eligible to access Medicare services, you will continue to have access to these services and receive Medicare benefits, whether you have a MHR or not.
For more information or manage your record at: [www.myhealthrecord.gov.au/](http://www.myhealthrecord.gov.au/)

|  |
| --- |
|   |
|  | **eMR** | **MHR** |
| I can control what goes into this record and which health workers can see this information | NO | YES |
| I can cancel or delete this medical record | NO | YES |
| My information is still confidential | YES | YES |
| Any health care worker I see will know my HIV status and the medications I am on | YES | YES |

# About us

Published Date : 23 August, 2012

We began in 1993 as a small, volunteer-run organisation. As a result of the commitment and dedication of key members and staff, Pozhet is now a state-wide service funded by the NSW Ministry of Health and hosted by Sydney Local Health District. It is located at the Royal Prince Alfred Hospital campus and managed by the HIV and Related Programs (HARP) Unit, Population Health.

Pozhet works with:

* Heterosexual people at risk of HIV
* Heterosexual people living with HIV (PLHIV)
* Health professionals

For heterosexual people at risk of HIV, Pozhet offers news and information about HIV, including the latest on testing and prevention. We also deliver campaigns encouraging people to consider their risk of HIV and how they can reduce the chance of acquisition.

For heterosexual people living with HIV, Pozhet offers information, support and referral to key services. We also create opportunities for heterosexual people living with HIV to meet each other and share their stories and experiences.

For health professionals, Pozhet offers advocacy, advice and training to support services to work better with heterosexual PLHIV.

### Pozhet Consumer Group

To ensure our work reflects the needs of heterosexual people living with HIV, we regularly meet with a small group of dedicated consumers who provide feedback and suggestions on what we do. The group is made up from our clients – heterosexual men and women living with HIV in NSW as well as their partners. The group always includes at least one member from a rural or regional area, so the needs from those communities are represented.

We are currently looking for more people to join the Pozhet Consumer Group. It is a great way to help improve services for heterosexual people living with HIV and meet new people. If you are interested, please contact us.

# Contact us

Published Date : 23 August, 2012

## Contact Pozhet

Email Pozhet  pozhet@pozhet.org.au

### Or use this online form

Your Name (required)

Your Email (required)

Subject

Your Message

# Our structure

Published Date : 23 August, 2012

Pozhet is funded by the NSW Ministry of Health to promote the health and wellbeing of heterosexuals with HIV, their partners and family across NSW.

Pozhet is located and managed day-to-day through the Community HIV Service in the Sydney Local Health District.

Pozhet has an Advisory Committee and a Consumer Group to guide its programs.

## Advisory Group

The Advisory Group draws membership from the following bodies:

* Aboriginal Health and Medical Research Council
* ACON
* Albion Centre
* Community Health, Sydney Local Health District
* Pozhet Consumer Group
* Family Planning, New South Wales
* HIV and Related Programs Unit, South East Sydney Local Health District
* HIV and Related Programs Unit, Sydney Local Health District
* HIV and Related Programs Unit, Western Sydney Local Health District
* HIV/AIDS Paediatric Service, Sydney Children’s Hospital
* National Association of People Living with HIV Australia
* Centre for Social Research in Health, UNSW
* Positive Life NSW

## Pozhet Consumer Group

Pozhet’s Consumer Group is drawn from its members. Members may include men and women living heterosexually with HIV and their partners who live in NSW. At least one member must be from a regional area.

The Pozhet Consumer Group guides Pozhet’s projects and priorities through consultation, suggestion and feedback. The Group meets at least three times a year.

To enquire about joining the Pozhet Consumer Group, [contact Pozhet.](https://pozhet.org.au/contact-us/)

# Staff

Published Date : 23 August, 2012

### Senior Health Promotion Officer – Jean-Marie

Jean Marie joined Pozhet August 2016, works Wednesday to Friday  as one of health education officers.

She is a clinician with medical and midwifery background. International public health is her passion. She has experience in HIV testing and monitoring.

### Health Promotion Officer – Susan

Susan has over 15 years experience working at community based organisations such as ACON and NUAA and has been at Pozhet since 2010. She has experience and qualifications in adult education, information management and community development and has facilitated and developed peer education and advocacy programs with people who inject drugs at NUAA. Susan currently project manages the website and social media, provides client support and education, coordinates Pozhet events and develops resources alongside other staff.

### Health Promotion Officer – Maxine

Max has worked in community health and welfare for most of her working life. She has experience and qualifications  in education, care and support for people with disabilities, aged care, drug and alcohol and HIV.  She is involved in designing and running our events and workshops, developing resources, educating our members and other organisations and providing client support.

### Website and Database Administrator – Peter

Peter has been with Pozhet for a number of years, and has been HIV positive since the early 1980’s. Peter is our web administrator and database manager.

# Connect

Published Date : 12 June, 2012

[ccf\_form id=”2766″]

# Social Connections

Published Date : 22 October, 2012

## Pozhet events

See the [events sections](https://pozhet.org.au/events/) on the website page or ring Pozhet for more information call 1800 812 404.

### Pozhet Drop in

To Be Advised

### Pozhet Connect Secret Facebook group

Pozhet has a secret Facebook group called Pozhet Connect.
This group is currently restricted to people known to Pozhet.
The guidelines are available for you to read.
If you want more information about this group ring 1800 812 404 or email pozhet@pozhet.org.au

## The Social Club

The Social Club is a Sydney based independent social group, it is run for and by people living with HIV who identify as heterosexual and their partners.

The Social Club provides a safe, friendly, understanding and accepting environment to meet and socialise  with other people living with HIV. This includes partners and family members. It organises get-togethers, including film evenings, dinners at members’ homes or restaurants, picnics, bowling, concerts and gallery visits (to name a few).
More information is available here on the [Social Club flyer](https://pozhet.org.au/wp-content/uploads/2015/03/06-March-2015-Summer-Twilight.pdf). For more information and to RSVP email  phsocialclub@gmail.com

If you need referral to the Social Club please [contact Pozhet](https://pozhet.org.au/contact-us/).

## [+ Connect]

Positive Life NSW runs regular social events, usually every third month of the year.
[+ Connect] is an inclusive social event for all people living with HIV, their families, friends and significant others to get together and socialise in a safe, accessible and friendly environment. All Pozhet members are welcome.

For more information about the next event, please call Positive Life on (02) 9206 2172 or email contact@positivelife.org.au. You can also visit the Positive Life website and visit the [+ Connect] webpage to see the dates for this event at [Plus-Connect.](http://www.positivelife.org.au/living-with-hiv/plus-connect.html)

If you join the Pozhet email list you will receive regular updates send an email to pozhet@pozhet.org.au.

## Western Suburbs Haven

The Haven is in Blacktown and runs a pantry and lunch and other activities for people with HIV. To contact [the Haven](http://thewesternsuburbshaven.com.au/services/) call (02) 9672 3600 if interested in visiting or volunteering your time. You can read the latest  [Haven Newsletter](https://thewesternsuburbshaven.com.au/newsletters/) here or [event information](https://karumah.com.au/events/).

## Tree of Hope

The Tree of Hope runs regular social events.

Please contact Tree of Hope for information about social events in Surry Hills, Lewisham and Liverpool. Email: . The events are for all people with HIV and their partners and support networks. Each Tuesday there is a meditation group, which meets at 12.30pm. For [more information](https://www.catholiccare.org/community-services/social-supportliving-with-hiv/) or phone (02) 9509 1240

## Karumah

Karumah is a community based support service which currently runs a variety of events and services for people in the Hunter area. If you would like more information contact Catherine or Machele on 4940 8393 or 0490 094 268 or email Karumah, or to view the [newsletters.](https://karumah.com.au/category/newsletters/)

### Pozhet Message

*Have an idea about a social event and want to let others know?* *Contact Pozhet for advice*

# Social media

Published Date : 22 October, 2012

In addition to this website, Pozhet uses social networking (social media) to share information, thoughts and ideas. Social networking sites allow you to upload videos, photos, create a blog, post events, join groups and send messages.

There are many different types of social networking sites. Two of the most common are Facebook and Twitter.

**Join our Secret Facebook group**

Our Facebook group is a secret and confidential space you can join to view comments, videos or pictures and have discussions with us or other Pozhet members. You will need to contact Pozhet to join. We will only authorise you if you are a member of Pozhet. This means the Pozhet Facebook group cannot be viewed by non-members, nor can anyone see that you are a member – even if they are your Facebook ‘friend’ (unless they are also in the same secret group). You can read [Facebook’s policy on secret groups](http://www.facebook.com/help/?faq=220336891328465) for more information.

**Follow and like our Facebook page**

[Friends and Supporters of Pozhet](https://www.facebook.com/pozhet/) is a public Facebook page that aims to raise awareness, reduce stigma about HIV in the community and to keep people informed about  heterosexual people and HIV.

**Follow us on Twitter**

Twitter is a website where you can subscribe to people or organizations of interest and get short updates, messages and breaking news from them. See what we’ve been saying [@pozhet](https://twitter.com/pozhet).

You’ll need an email address and a ‘handle’ (a user name) to join. Search for your hobbies, interests or favourite celebrities to find some people to ‘follow’.

You can also send short messages, called ‘tweets’, of your own. Your Twitter account can be set up as public or private.

**Social media and HIV**

For information on social media activity in the international HIV sector, you can visit the [US AIDS](http://www.aids.gov/using-new-media/)  or [UNAIDS](http://www.unaids.org/en/resources/presscentre/socialmedia/) websites.

**Staying safe online**

The name and photo you use on your profile on social media sites can be seen by others. Make sure you set your privacy settings so that only those who you want to can see your profile.
You can comment anonymously on this website but we do need your email address for security purposes. It will not be published. Pozhet will never share your information with anyone external to the service without your permission.

**Not confident with computers or social media?**

[Contact us](https://pozhet.org.au/contact-us/) for a list of free or cheap courses in your area to improve your computer skills or to learn more about using the internet and social media.

# Disclaimer

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# for health professionals

Published Date : 12 November, 2012

Pozhet works with service providers in NSW to improve access and support for heterosexual people living with HIV and to contribute to awareness, prevention and testing campaigns. This includes working with health professionals and services to:

* overcome the invisibility of HIV stigma and stereo-typing in the wider, non-gay male identifying community.
* build awareness of psycho-social issues for heterosexual men and women living with HIV.
* contribute to strategies to increase the number of heterosexual men and women diagnosed early by identifying individuals and communities at risk and encouraging testing.
* ensure the perspectives and experiences of heterosexual men and women are included in any policy response, program and resource development and research.
* ensure that all heterosexual men and women living with HIV and their partners have access to up-to-date information about HIV treatments, transmission, prevention and conception.

In 2017 in NSW, there were 67 new diagnoses reported from heterosexual exposure, 29% greater that the annual average for the period 2011-2016 (n=52). For more data from NSW go to the [NSW Health Ending HIV](http://www.health.nsw.gov.au/endinghiv/Publications/q4-2017-and-annual-hiv-data-report.pdf) website

# Audio Visual Resources

Published Date : 21 May, 2014

# HIV Test Campaign

Watch GP, Dr Bill Kefalas explain how HIV testing, diagnosis and treatment has changed and how to make HIV testing part of routine patient care. For more information go to NSW Government Health [Ending HIV Page](http://www.health.nsw.gov.au/endinghiv/Pages/health-professionals.aspx).

# NSW HIV Support Program

Every person diagnosed with HIV has the right to and should be offered 5 Key Support Services:

1. Effective clinical management, including access to treatment
2. Psychosocial support
3. Counselling about prevention of transmission of HIV to others, including the role of treatment in reducing the risk of transmission
4. Support to ensure that all at risk partners are identified and tested for HIV
5. Linkage to relevant specialist, community and peer support services

The NSW HIV Support Program ensures that expert advice, support and resources needed by doctors to deliver the 5 Key Support Services are available at the time of making an HIV diagnosis.

# HIV Testing Week 2016

HIV Testing Week aims to encourage people to test more often. Testing week will be held 1 -7 June 2016.

# Pozhet Resource and Website launch

Pozhet launched their website, social media and health promotion resources for people living with HIV at Redfern Health Centre on 22nd October 2014.

Dr. Roger Garcia HIV specialist and the Director of HIV from RPA Hospital who has been involved with Pozhet since its early years, opened the Pozhet launch by talking about the history of Pozhet, the new resources and the website.

He spoke about the importance of having a service for heterosexual men and women living with HIV.

The resources [*Having a Baby* and *Life Loving and HIV*](https://pozhet.org.au/pozhet-resources/) can be accessed on the Pozhet website. Hard copies can be ordered by emailing pozhet@pozhet.org.au.

Dianne Nyoni from Positive Speakers shared her personal story as a woman who was diagnosed late, and is now one of the public faces of women living with HIV in NSW.

At the Pozhet launch in October 2014, she spoke eloquently about her journey and addressed the value of having a service like Pozhet which provided support, education and information for heterosexual men and women who often feel stigmatised and socially isolated.

Rachel Katterl, the Pozhet Coordinator also addressed the attendees, made up of representatives from HIV services, including ACON, Positive Life, Bobby Goldsmith Service, Sydney Local Health District and many other services.

Rachel spoke about the website and all the resources and their focus on man and women in sero-discordant relationships.

# Let’s Go Hetero November 2012

In late 2012 Pozhet held a forum for workers, volunteers and community members in the HIV sector called ‘Let’s Go Hetero’

The full day event featured:

* Current data and research about heterosexual people with HIV
* Updates from recent studies about treatment, transmission and prevention
* Reproductive options for people with HIV
* Presentations by people with HIV, researchers, clinicians and health workers

Introduction by Dr Roger Garsia (Royal Prince Alfred Hospital) Dr Garsia introduces the Pozhet ‘Let’s Go Hetero’ Forum held in December 2012. He outlines the profile of heterosexuals with HIV within the wider context of HIV in Australia, showing that there are no stereotypes for heterosexuals with HIV, and that they acquire HIV in a variety of ways.

Asha Persson (Centre for Social Research in Health) Asha speaks about sex and perceptions of risk in heterosexual serodiscordant relationships (couples where one person has HIV and the other doesn’t)

Adrian Ogier (National Association of People with HIV Australia, NAPWHA) Adrian speaks about current Treatments for HIV and the evidence that HIV treatment prevents transmission. He outlines current HIV prevention strategies and looks at case studies of people starting HIV treatment.

Dr Virginia Furner (Albion Centre) Dr Furner talks about conception and pregnancy in couples with HIV, particularly serodiscordant couples (where one person has HIV and the other doesn’t)

Dianne’s Story

-recorded at Redfern Health Centre at Let’s Go Hetro, Workforce Development Day 27th November 2014.

Tim Duck (NSW Ministry of Health)

Tim outlines the current statistics and data for heterosexual HIV transmission and acquisition in NSW.

HIV affects people of different ages, cultures, religions and ways of life. HIV does affect heterosexual people in Australia. HIV does not discriminate. The Heterosexual HIV/AIDS Service (Pozhet) made this video in partnership with Family Planning New South Wales. Thank you to all those involved. For further information on HIV or for sexual health concerns, contact your local HIV service, sexual health centre or Family Planning.

# Discussion Topics

Published Date : 18 February, 2016

The following posts will provide links to important topics, articles and opinion pieces about HIV transmission, prevention and related issues. We encourage you to provide comments and discussion after your reading. If you have information or articles which you would like to share please send it to pozhet@pozhet.org.au.

# Interesting Articles and Resources

Published Date : 7 September, 2017

## Articles, research, and resources for and about heterosexual PLHIV and partners

### TRANSMISSION

#### Risk of sexual transmission of HIV from a person living with HIV who has an undetectable viral load: Messaging Primer & Consensus Statement

[http://preventionaccess.org/](http://www.preventionaccess.org/consensus)

The consensus statement below, addressing HIV transmission risk from PLHIV who have an undetectable viral load, is endorsed by principal investigators from each of the leading studies that examined this issue. It is important that PLHIV, their intimate partners and their healthcare providers have accurate information about risks of sexual transmission of HIV from those successfully on ART.

#### Sexual transmission of HIV and the law: an Australian medical consensus statement

<https://www.ashm.org.au/>

The consensus statement was written nine leading HIV clinicians and scientists, and published in the Medical Journal of Australia in November 2016.The context of the rapidly evolving science of HIV transmission and diagnosis require the courts to be informed using current evidence. The statement provides current scientific evidence to facilitate just outcomes in Australian criminal cases involving HIV.

#### Publication of HPTN 052 Final Results: HIV Treatment Offers Durable Prevention of HIV Transmission in Sero-discordant Couples

Ground breaking research about treatment and prevention of transmission

[https://hptn.org/](https://www.hptn.org/news-and-events/press-releases/publication-of-hptn-052-final-results-hiv-treatment-offers-durable)

#### PARTNER Study

Published in 2016, the Partner study measured risk using people who were not using condoms (both heterosexual and gay male serodiscordant couples) shows evidence that the risk of transmission when the positive partner is undetectable is effectively zero.

[http://i-base.info/](http://i-base.info/htb/30108)

#### Preventing secondary transmission of HIV

[http://arv.ashm.org.au/](http://arv.ashm.org.au/arv-guidelines/)
Despite substantial advances in prevention and treatment of HIV infection in the United States, the rate of new infections has remained stable. Although earlier prevention interventions mainly were behavioural, recent data demonstrate the strong impact of antiretroviral therapy (ART) on secondary HIV transmission. The most effective strategy to stem the spread of HIV will probably be a combination of behavioural, biological, and pharmacological interventions.

### TREATMENT

The international START study is one of the most important studies about treatment and changed treatment guidelines around the world. It proved that treatment was beneficial to all people with HIV whatever their CD4 count

<http://i-base.info/start/>

#### HIV cure research: seeking an end to HIV through partnerships (pp. 32-34)

[afao.org.au/](https://www.afao.org.au/library/topic/hiv-prevention/HIVA-14-2-ONLINE.pdf)
Timothy Rae Brown was a man who had been ‘cured’ of HIV through a bone marrow transplant conducted as part of his treatment for leukaemia. Brown is now widely known as the only person to have been cured of HIV, and his case is recognised as a ‘game changer’ in clinical research for a HIV cure. However, the success of Brown’s treatment did raise the theoretical possibility that HIV could be curable, opening new space for clinical and social debate about potential research directions. An increase in scientific attention and funding for HIV cure research has followed.

#### HIV Cure: Stay up to date with the latest research

<http://hivcure.com.au/>
Developed by NAPWHA in association with the Doherty Institute and the Alfred Hospital, HIV Cure will collate all the latest research news and scientific developments as they happen so that people living with HIV in Australia can be educated, engaged and gain access to the successes being made.

#### Australian HIV service providers on TasP for serodiscordant couples

Persson, A., (2014). ‘Significant ambivalence: perspectives of Australian HIV service providers on universal treatment-as-prevention (TasP) for serodiscordant couples’, Critical Public Health, vol. 17 February, pp. 1 – 12, [http://dx.doi.org/](http://dx.doi.org/10.1080/09581596.2014.886005)

In Australia, ‘treatment-as-prevention’ (TasP) is currently being rolled out across New South Wales (NSW) as part of the state government’s new HIV strategy. Following the promising results of recent clinical trials, antiretroviral treatments have been reframed as a global HIV prevention tool and imbued with great hopes of radically reducing sexual transmissions and even ending the pandemic.

### HEALTH PROMOTION AND CARE

#### StraightMSM Study: Heterosexually-Identified Men Who Have Sex With Men

Newman, C., Persson, A., de Wit, J., Holt, M., Callander, D., Schmidt, H.-M., … Ooi, C. (2016). BRISE StraightMSM study: Understanding expert views on defining and reaching heterosexually-identified men who have sex with men for health promotion and care (short report). Sydney: Centre for Social Research in Health, UNSW Australia.
[https://csrh.arts.unsw.edu.au/](https://csrh.arts.unsw.edu.au/media/CSRHFile/BRISE_StraightMSM_Study_short_report.pdf)

Almost no published research exists specifically on heterosexually-identified men who have sex with men in Australia, and the international literature is also scant. Very little is known about the sexual practices, risk perceptions, or information and service needs of these men more broadly. Funded by BRISE, the Centre for Social Research in Health, in collaboration with Pozhet and representatives of NSW Health sexual health services, conducted exploratory research to investigate the sexual practices, sexual spaces, sexual health knowledge and sexual health needs of these men, and to consider opportunities to better engage them with health promotion and care. This report summarises the key outcomes of this pilot research, which comprised reviewing the literature, analysing existing survey data, appraising the terminology and activities evident in online personal ads posted by straight men who have sex with men, and conducting qualitative interviews with 30 professionals employed in health services, health promotion and other relevant roles in New South Wales

### STATISTICS

#### HIV Statistics in Australia using recent data from the 2016 Annual Surveillance Report

[hivmediaguide.org.au/](http://www.hivmediaguide.org.au/hiv-in-australia/hiv-statistics-australia/)

#### Annual Surveillance Report 2016 – HIV, viral hepatitis and sexually transmissible infections in Australia (pp. 24-65):

[kirby.unsw.edu.au/](https://kirby.unsw.edu.au/report/annual-surveillance-report-hiv-viral-hepatitis-stis-2016)

#### Transmission and prevention of HIV among heterosexual populations in Australia (2014):

[http://guilfordjournals.com/](http://guilfordjournals.com/doi/abs/10.1521/aeap.2014.26.3.245)

### HETEROSEXUAL MEN

#### Cultural politics of the waiting room: Straight men, gay-friendly clinics and ‘inclusive’ HIV care

Newman C.E., Persson A.,  Paquette D.M., & Kidd MR, 2013, ‘The new cultural politics of the waiting room: Straight men, gay-friendly clinics and ‘inclusive’ HIV care’, Sexuality Research and Social Policy, vol. 10, pp. 87 – 96, [http://dx.doi.org/](http://dx.doi.org/10.1007/s13178-013-0111-z)

#### The undoing and doing of sexual identity among HIV-positive heterosexual men

Persson AS, 2012, ‘The undoing and doing of sexual identity among HIV-positive heterosexual men in Australia’, Men and Masculinities, vol. 15, pp. 311-328, [journals.sagepub.com/](https://journals.sagepub.com/doi/abs/10.1177/1097184X12450015)

### WOMEN

#### Positive Women: Support and advocacy for women living with HIV

www.positivewomen.org.au/

In Australia, women represent a small proportion of the total population of people living with HIV. As of 31 December 2010, a total of 21,391 people were estimated to be living with a diagnosed HIV infection in Australia, of whom 1,984 (9.3%) were women. Due to Australia’s large size and moderate population, the small number of women living with HIV are widely dispersed, often isolated and almost invisible within the epidemic.

The HIV Futures studies, comprising six national cross-sectional surveys of people living with HIV in Australia, have been conducted every two to three years since 1997; the surveys are a key resource that sheds light on the experiences of women living with HIV in Australia. This article describes some of the main features of the experiences of women living with HIV in Australia, based on the HIV Futures studies and in-depth interviews with HIV-positive women conducted by Dr Karalyn McDonald. The article focuses on areas in which women have been found to have a different experience of living with HIV, when compared with the predominant group of HIV-positive people in Australia – homosexually active men.

### CULTURAL AND LINGUISTIC DIVERSITY

#### Living with HIV and cultural diversity in Sydney:

[https://csrh.arts.unsw.edu.au/](https://csrh.arts.unsw.edu.au/media/CSRHFile/2_Living_with_HIV_and_cultural_diversity_in_Sydney__migration_gender_and_sexuality.pdf)

#### HIV and sub-Saharan African communities in Australia: Briefing Paper #9 Stigma (October 2015):

[https://www.afao.org.au/](https://www.afao.org.au/library/topic/living-with-hiv/AFAO-African-Briefing-Paper-stigma-2015.pdf)

### Aboriginal Torres Strait Islander

#### Aboriginal and Torres Strait Islander community input and the Australian HIV response (May 2015):

[https://www.afao.org.au/](https://www.afao.org.au/library/topic/injecting-and-illicit-drug-users/Background-briefing-HIV-and-ATSI-communities_May-2015.pdf)

Key points:

The Anwernekenhe National HIV Alliance (ANA) is an aboriginal and Torres Strait Islander community-based organisation

### LIVING WITH HIV

#### Ahead of time: A practical guide to growing older with HIV

[napwha.org.au/](http://napwha.org.au/publications/ahead-time-practical-guide-growing-older-hiv)
The impact of HIV on our bodies and on the immune system as we get older is greatly affected by ageing. HIV affects each of us differently. Some people progress to symptoms very quickly, while others live for 20-plus years without any signs of immune suppression or symptoms.

Each of us ages differently as well. How well we age and how the ageing of our bodies impacts upon our health is unique to each of us. Therefore, HIV infection —coupled with natural ageing— creates added challenges for maintaining good health.

# Referrals and Information

Published Date : 24 November, 2015

# Telephone

Call Pozhet on fFreecall 1800 812 404 Monday to Friday 9-5 pm

# Client Referral Form

Refer a client to Pozhet by using our simple form, send it to Pozhet via email and keep a copy for your records.

[Click here to fill out our client referral form](https://pozhet.org.au/wp-content/uploads/2019/09/referral_form2.pdf)

# Training and Resources

Published Date : 24 November, 2015

## Training and Resources in NSW

[The Australian Society of HIV Medicine](http://www.ashm.org.au/hiv) provides clinical training, education and resources to support all levels of the HIV workforce, including material for non-medical professions, such as the police and emergency services. [STIPU (NSW STI Programs Unit)](http://stipu.nsw.gov.au/) provides on-line learning, tools and resources for health professionals around sexually transmitted infections.

[Albion Education and Development](http://thealbioncentre.org.au/education-and-information/)offers a wide range of training and education opportunities in the areas of HIV, Hepatitis and Infection Control. This includes an introduction to HIV course. [The HIV Support Program](http://www.health.nsw.gov.au/Infectious/hiv/Pages/default.aspx) provides enhanced advice and support for doctors and their patients at the time of a new diagnosis of HIV. The Program is based on the principle that every person newly diagnosed with HIV has the right to five Key Support Services. Resources and information sheets are available on the [HIV Support Program](http://www.health.nsw.gov.au/Infectious/hiv/Pages/default.aspx)site.,

[Australian Indigenous Health Infonet](http://www.healthinfonet.ecu.edu.au/). Courses relevant to Aboriginal and Torres Strait Islander’s Health. [The Health Education and Training Institute](https://www.heti.nsw.gov.au)(HETI) supports education and training for excellent healthcare across the NSW Health system.

Examples of on-line HETI courses include:

[Normalise HIV in your practice](http://www.heti.nsw.gov.au/Courses/Normalise-HIV-in-your-practice/)  explores how health workers can identify opportunities to offer testing in non traditional settings.

[**Stigma, discrimination and injecting drug use**](http://www.heti.nsw.gov.au/Courses/Stigma-Discrimination-Injecting-Drug-use/) which assists health workers to identify strategies to help reduce stigma and discrimination directed at people who inject drugs.

**Fact sheets for health professionals:**

[**Open your mouth: an assessment and referral tool for healthcare professionals working with PLHIV**](http://thealbioncentre.org.au/wp-content/uploads/2018/05/NSWH_Oral-Health-Fact-Sheet-A4-Final-2015-HR.pdf)**.  An oral health fact sheet.**

**Overseas Links**

NAM [**AIDSMap HIV and AIDS news**](http://www.aidsmap.com/latest-news) Stay up to date by subscribing to news from this site in England. [**AIDS Source**](https://aids.nlm.nih.gov/resources-for/1671/health-professionals) An information site in the US from the US National Library of Medicine

# Glossary

Published Date : 23 October, 2012

### ART or ARV

ART stands for Anti Retroviral Treatment. HIV is a retrovirus so it is treated with anti-retroviral medications. They suppress HIV. Sometimes referred to as ARV, HIV treatment, HIV drugs, HIV meds, antivirals, combination therapy (CART) or Highly Active Antiretroviral Therapy (HAART).

There are different classes or types of drugs that make up anti-retroviral treatment, such as *nucleoside analogue reverse transcriptase inhibitors,* protease inhibitors and *non-nucleoside analogue reverse transcriptase inhibitors*. NAPWA has comprehensive information on the [different types of HIV medication](http://napwa.org.au/rx).

### CD4 count

CD4 cells are immune cells that assist in fighting infection in the body.  Over time, untreated HIV usually causes a reduction in the number of CD4 cells, therefore doctors conduct a blood test to count them (per cubic millilitre of blood) to:

* Monitor your immune system
* Decide when you should start treatment
* Assess how well your current treatment is working

CD4 are sometimes called ‘helper T cells’ or ‘T cells’.

Aidsmap has more information on [understanding CD4](http://www.aidsmap.com/CD4-cell-counts/page/1044596/)

### Diagnosis

Diagnosis refers to a decision made by a doctor about whether or not someone has an illness. An HIV diagnosis is confirmed with blood tests.

### Inflammation

Inflammation refers to the body’s natural response to injury or infection. The body sends its fluids to the site of injury of infection in an effort to heal itself. While we typically think of inflammation as the swelling that occurs at the site of an injury, HIV can cause a more subtle cellular level of chronic inflammation that may, over time, lead to symptoms of premature ageing and damage to the heart, liver and kidneys.

There are blood tests that can show markers of inflammation.

### Lube

Lube or lubricant is liquid that prevents drying and reduces friction between surfaces. Water-based lube is an important part of safe sex, as it prevents small breaches in the skin or tears in condoms through which HIV can pass. You can buy lube at any chemist or supermarket.

### Medication

See [ART](#ART)

### Post Exposure Prophylaxis (PEP)

PEP is a special combination of the HIV medications  that are given to people who may have been exposed to HIV. It may prevent [seroconversion](http://www.pozhet.org.au/glossary/#Seroconversion).

To be effective PEP must be started within 72 hours of exposure to HIV, and the sooner PEP is started, the more chance it has to work.

PEP is available at [sexual health clinics or your Emergency Department](http://www.pozhet.org.au/just-diagnosed/where-can-i-go-for-support/)

### Resistance

HIV can become resistant to treatment, which means it stops working effectively against the virus. Resistance usually occurs when HIV medication is not taken exactly as prescribed, e.g. by missing doses.

Aidsmap has an online booklet including [detailed information on resistance](http://www.aidsmap.com/Adherence-amp-resistance/page/1327017/).

### Seroconcordant

Serconcordant refers to a couple who have the same HIV status.  That is, both partners are HIV negative or both are HIV positive.

### Serodiscordant

Serodiscordant or serodiscordance is the term used to describe a couple in which one partner is HIV positive and the other is HIV negative.

### Seroconversion and serconversion illness

Seroconversion refers to the time after exposure to HIV that the body produces anti-bodies to the virus, making the HIV detectable in the blood.

It usually occurs a few weeks after exposure to HIV.

Seroconversion is often accompanied by a bout of sickness, called ‘seroconversion illness’. Common features of seroconversion illness are much like the flu: fever, rash, swollen lymph nodes and aches and pains.

A person is highly infectious during serconversion illness.

### T cells

See [CD4](#CD4)

### Treatment

See [ART](#ART)

### Viral load

Viral load refers to the amount of HIV in the blood. A viral load test counts the copies of HIV RNA per millilitre of blood. The more virus that exists in the blood, the greater the risk it is that you will develop HIV illnesses.

Viral load testing enables you to determine how quickly HIV is progressing or how well your HIV treatments are working.

### Undetectable viral load

All viral-load tests have a cut-off point below which they cannot detect HIV. The lower limit of detection is usually 40 or 50 copies/ml. Until recently, this was the lowest detectable level for tests most commonly used in routine viral load monitoring. There are now some ultra-sensitive tests that can measure below 20 copies/ml. If your viral load is below 50 it is said to be undetectable.

It doesn’t mean that HIV has disappeared from your blood, and the virus may be detectable in other body fluids (like lymph fluid, semen or vaginal fluids).

An undetectable viral load often indicates your medications are working very well, that you are unlikely to become ill and you are less likely to be able to pass the virus to anybody else.

Aidsmap has more information on understanding your viral load

### Virus

A virus is a small infective organism which can only replicate inside the cells of another living organism. HIV replicates in the  CD4 cells, among others.

# Glossary

Published Date : 22 June, 2016

# HIV Prevention

Published Date : 17 June, 2018

HIV Prevention

Did you know?
HIV is the virus that causes AIDS
HIV/AIDS affects everyone regardless of age, gender, race, cultural background or religion
Worldwide
There are more than 34 million people living with HIV/AIDS. More than half of these are women and children
Sex between men and women is the most common way HIV is passed on (transmitted)
In Australia
There are more than 24,000 people living with HIV/AIDS.
HIV is mainly transmitted through sex between men, but transmission through sex between men and women is increasing.
There are effective treatments for HIV and people can live long and healthy lives.

Using condoms during vaginal and anal sex, and not sharing needles or other injecting equipment remain the most effective ways to protect yourself from HIV.

What’s the difference between HIV and AIDS?
HIV/AIDS is often written as one word with one meaning. However, HIV and AIDS are different things.

HIV stands for Human Immunodeficiency Virus. A person becomes infected with HIV (HIV positive) when the virus enters their blood stream.

HIV attacks the immune system, which is the body’s defence against disease. If a person’s immune system is severely damaged by the virus, they will develop AIDS (Acquired Immune Deficiency Syndrome). This means they are likely to get infections and illnesses that their body would normally fight off.

Being diagnosed with HIV does not mean a person has AIDS or that they are going to die. Treatments slow down damage to the immune system so that people with HIV can remain well, and live healthy and fulfilling lives.

How is HIV transmitted?
HIV is found in body fluids such as blood, semen, vaginal fluids and breast milk. Infection only occurs when body fluids from an infected person enter the blood stream of another person.

HIV can be transmitted by:
Unsafe sex (sex without a condom)
Sharing needles, syringes and other equipment for injecting drugs
Unsterile body piercing or tattooing
Mother-to-child during pregnancy, childbirth or breastfeeding
Blood transfusion and/or blood products in some other countries. In Australia, blood transfusions and blood products are safe.

# GENERAL PREVENTION FAQ

Published Date : 17 June, 2018

# GENERAL PREVENTION FAQ

# PEP

Published Date : 8 August, 2018

## What is PEP?

PEP (Post exposure prophylaxis) is a 4 week course of medication which prevents HIV. A prophylaxis is something which prevents the spread of an infection or disease.

PEP needs to be taken 72 hours after the potential exposure to HIV. PEP stops HIV from replicating and establishing itself in your body.

## Who can take PEP?

Anyone can take PEP who thinks they may have been exposed to HIV.

For example:

* you may have sex without condoms with someone who has HIV or may have HIV
* the condom breaks when having sex with someone who has or may have HIV
* You share needles with someone who has or may have HIV

You can talk to someone on the PEP line about what happened and they will provide you with advice about any level of risk.

If you are not sure whether you have been at risk you can also call Sexual Health InfoLink (SHIL) on 1800 451 624 and talk to a clinician.

## How do I get PEP?

You can get PEP by contacting the NSW Post Exposure Prophylaxis (PEP) hotline on 1800 737 669 or the local sexual health clinic.

If the hotline is not open you can contact your local hospital accident and emergency department.

For more detailed information see [GetPEP website.](http://getpep.info/) It provides details about PEP for all Australian states.

It is important to remember that PEP is for emergency and one-off situations such as a condom breaking.

Most people who know they are living with HIV are on treatment and are probably undetectable. This means they have no detectable amounts of HIV in their blood. If your partner is undetectable there is no risk that HIV can be transmitted. However if your partner has not been taking their treatment they may not be undetectable and you may have been at risk.

If you are having condomless sex and your partner is HIV positive and not taking their treatments consistently then it is important to talk to your doctor about how to prevent transmission. One possibility is that you take PrEP.

PrEP (Pre-exposure prophylaxis). can be taken before a potential exposure available from your GP. People who do not have HIV can take a pill daily to prevent getting HIV. For example, a couple may be attempting to conceive a baby and the negative partner can take a course of PrEP to reduce anxiety and any potential risk of transmission. For more information about PrEP see [PrEP page]