

Mob in the Margins:

Hepatitis and Injecting Drug Use in Victorian Aboriginal Communities

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Introduction

- Acknowledgement of Country
- Victorian Aboriginal Community Controlled Health Organisation

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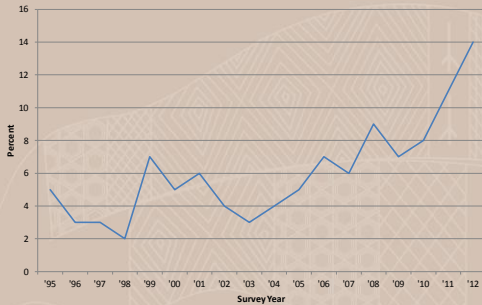
Injecting Drug Use in Victorian Aboriginal Communities

- Annual NSP Survey – 10%
- Victorian NSP data – 14%
- HIV infection attributed to IDU 16% vs 2%
- HCV infection 6 times higher in

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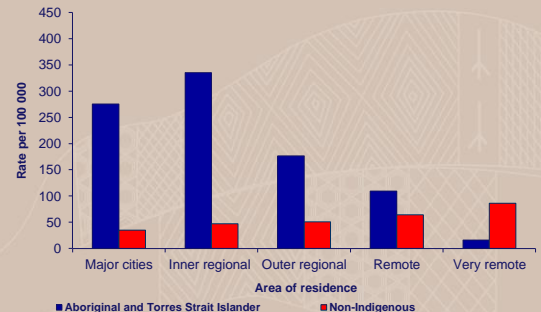
Proportion of Victorian ANSPS respondents self-reporting Indigenous background



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Rate of hepatitis C antibody diagnoses in 2011, by Aboriginal and Torres Strait Islander status¹ and area of residence



¹ Jurisdictions (NT, SA, TAS and WA) in which Aboriginal and Torres Strait Islander status was reported for more than 50% of diagnoses. Source: State/Territory health authorities

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Yiaga ba Wadamba

Woi-wurrung phrase meaning 'Find and Renew'

- 2010 in partnership with ANEX
- Recruited through ACCHOs and NSPs
- Even split between metro and rural areas
- 69 Aboriginal People who have injected drugs in the past 2 years
- Average age 35yrs
- Drug of choice split between Heroin and speed
- Length of injecting career was between 5-10yrs

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"I was embarrassed at first getting them [needles], even would prefer someone else to go in and get them, because you don't want the workers to recognise your face, or to point the finger at you, 'that person is a user'..."

"I'd rather [share] with my partner...Cause I love him"

"I went into the health clinic once [to get injecting equipment] and my auntie was down for a doctor's appointment so I had to come up with another excuse for why I was there...I was so embarrassed...I ended up walking out and I didn't end up getting any [injecting equipment]"

"I shared with my partner. Yeah and I got hep C from him...I just thought I'm sleeping with him and I just thought that whatever he's got, I got. You know what I mean? I didn't know...it was blood to blood contact or anything like that. I've learnt it all afterwards"

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Research Translation

Community reports - posters

- In most ACCHOs
- In some NSPs
- Used in Aboriginal Health Worker training

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The slow burn...

Blood Borne Viruses fall between AOD and Sexual Health.

- Yiaga ba Wadamba presented to the VACCHO members
- Raised awareness and interest in addressing IDU & HCV in their organisations
- Framed NSPs as a Health Promotion activity
- Anecdotal reports of increasing numbers of people living with HCV coming to ACCHOs

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Mob in the Margins

Regional forums on Hepatitis and Injecting Drug Use in Victorian Aboriginal Communities for ACCHOS

- Bust myths about NSPs
- Up to date Hepatitis treatment options
- Drug user perspective
- Share existing ACCHO NSP service models
- How to establish an NSP in an ACCHO
- VACCHO and other organisation support available for NSP implementation

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Where to from here?

- Working with ACCHOs with NSPs to improve service delivery and imbed in their practice
- Support interested ACCHOs to start an NSP service
- Support all ACCHOs to develop health promotion strategies for Aboriginal People who Inject Drugs and Viral Hepatitis.
- The possibility of Vending machines at ACCHOs

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