



Joint Australasian HIV&AIDS and Sexual Health Conferences 2022

29 August - 1 September 2022
Sunshine Coast Convention Centre

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We hope you enjoyed the final day of the **Joint Australasian HIV&AIDS and Sexual Health Conferences**. It was a joy to come together face-to-face and comprehensively cover the ever-evolving landscape of our public health response to HIV&AIDS and Sexual Health.

Session Recap

Proffered papers: Clinical Management & Therapeutics

Covering a broad range of topics, including intimate partner violence and abortion, a series of engaging speakers inspired us to advocate for better care in the most vulnerable and stigmatised communities.

[Georgina Doots](#) explained that there is a data gap relating to intimate partner violence (IPV) when it comes to men who have sex with men (MSM), who are often not screened for IPV. Georgina presented the results of a study of IPV experiences in MSM, which found that MSM who reported IV drug use, sexualised drug use, and were unemployed were more likely to experience IPV. Georgina highlighted the need for clinician awareness of IPV in this population.

[Melissa Kelly](#) provided a motivating presentation regarding the experience of The Albion Centre in increasing access to gender-affirming hormone therapy (GAHT). Melissa reported that by offering GAHT in a welcoming and trans-friendly setting, the service served as a meaningful entry point to engage trans and gender diverse (TGD) clients with more holistic health care. Client feedback has been overwhelmingly positive, and Melissa encouraged more centres to pursue such services.

A concerned patient with an intellectual disability asked, ‘...when you are single and got a disability and you are pregnant, like – what do you do?’. Presenting on behalf of Victoria Tucker, Jackie Parsons covered the significant challenging subject of making informed pregnancy decisions in people with intellectual disabilities. In a sobering statistic, people with intellectual disabilities are almost twice as likely to be subject to sexual violence, and most unplanned pregnancies are due to some form of sexual violence. Systematic biases against parenting in this community must be urgently addressed, and patients afforded the opportunity to make informed decisions supported by appropriate communication and engagement.

‘As healthcare providers, we need to shake off the taboo of abortion.’ stated Lucy Cho, who continued, *‘how can we make people feel comfortable asking about abortion if you can’t say the word?’*. Lucy described the admirable work of the Kirketon Road Centre, who work tirelessly to help some of the most at-risk and stigmatised populations access safe and effective early medical abortion (EMA) and break down barriers and stigma regarding access to abortion. In a call to action, Lucy reinforced that any reproductive health without abortion is incomplete and urged providers to ensure this vital service is available.

Leading us through a model of care for safe medical termination of pregnancy (MTOP), [Yen Li Lim](#) highlighted some of the challenges clinics might face and outlined a framework and suggestions to improve MTOP services. A clinical audit at Family Planning NSW Clinics found that a significant proportion of women did not engage with necessary follow-up, with Yen Li highlighting the importance of setting SMART goals considering primary and secondary drivers when selecting strategies with relatively low effort but high impact.

Nurses are capable of providing urgent STI results more efficiently and quickly than medical officers, with Elizabeth Scally reporting the results of a study assessing the time to STI notification over 12 months. In an RN model, 74% of urgent test results were provided on the day they became available, compared with 41% by medical officers. The shift to an RN model in delivering urgent STI results can reduce clinician workload, allow more time to see patients and allow for more prompt intervention for urgent STIs.

Spotlight Session

Can dick jokes help break down stigma and shame? Absolutely yes, as keynote speaker [Heather McCormack](#) demonstrated in a case study of [Take Blacktton](#), where a uniquely Aboriginal sense of humour is used to help diffuse shame and stigma associated with STIs. Highlighting the utilisation of a strength-based approach that avoids language that emphasises deficits and instead embraces strengths of community and culture, Heather shared a series of videos demonstrating how an incredible amount of information can be conveyed in a light-hearted and entertaining video. Check out [Take Blacktton TV](#) for inspiration when taking a strength-based approach when engaging with communities.

[Julie Mooney-Somers](#) detailed the challenges of updating [SWASH](#), a 25-year periodic survey for lesbian, bisexual and queer women, with language appropriately capturing information on gender diversity. Julie outlined that the adage of *gender = genitalia* is no longer appropriate or relevant, and generational differences in understanding of terms like cisgender have caused discrepancies in data from SWASH. During this transition period, Julie explained that we need to acknowledge that we are vernacularly limited, and while new terminology may be uncomfortable, it needs to be considered when creating surveys. This insightful presentation highlighted the difficulty of balancing the needs for people to be seen in surveys with the scientific data we need.

Concern is growing regarding the battle against *Mycoplasma genitalium* as it becomes increasingly resistant to our available antimicrobial agents. Methods that can guide therapy to increase the first-time cure rate and decrease the possibility of developing resistance is an avenue explored by [Emma Sweeney](#), covering the development of a proof-of-concept molecular test to detect fluoroquinolone susceptibility, the method shows considerable potential to direct individualised treatment to overcome barriers of resistance.

Anne Atcheson of [Sexual Health Victoria](#) outlined the details of an initiative centred on youth cyber safety, relationships, and sexuality. No single channel for appropriate education exists, explained Anne, who described the development of materials directed to schools, families, and young people aged 10-14 years. The availability of resources increases accessibility and acceptance, with the [Doin’ IT](#) podcast, developed by Sexual Health Victoria, an inspiring example of a unique educational channel.

Invited Speaker Session: Modern Sexual Health Clinics

With sexual health services at breaking point, [Kit](#) Fairley highlighted the urgent need for innovative approaches for sexual health clinics to direct care. Kit outlined some considerations when weighing up approaches, including prioritising symptomatic STIs, developing scalable systems, and reducing unnecessary waste of resources. Kit also highlighted the need to invest more resources into novel individualised resources, such as intelligent referral tools and AI-powered technology.

One such innovation was covered by [Prital Patel](#) and [Lise Lafferty](#) in their presentation on *MyCheck*, an innovative STI testing service from the Sydney Sexual Health Centre. Utilising a completely digital process from pathology referral to follow-up, MyCheck streamlined the asymptomatic STI testing process for clients and was especially useful during the omicron wave in early 2022. Feedback from clients has been primarily positive, and the service has the potential to break down barriers created by lack of funding and access to services.

What makes a good quality online STI testing service? [Ethan Trey Cardwell](#) presented the outcome of research reviewing the available self-testing STI online services. The results showed inconsistencies in approaches, with 14 different services identified, ranging in cost from free to hundreds of dollars. Trey underlined the importance of an online service needing to balance accessibility, cost, and timeliness, especially considering those who live in regional areas.

Regional areas in Queensland are facing a sustainability crisis and are at a tipping point with retiring clinicians and no one to replace them. [Julian Langton-Lockton](#) highlighted the need for modernising and streamlining service delivery in regional areas, with a focus on priority populations in a description of a Queensland model.

To wrap up the session, we had the pleasure of hearing two separate presentations regarding innovative service delivery methods - in Victoria by [Marcus Chen](#) and [Jason Wu](#), and WA by [Lewis Marshall](#). With aims including breaking down stigma, increasing service coverage and improving accessibility to testing, we were provided ample food for thought as we plan our services.

Time to Celebrate!

We were delighted to celebrate our award winners in our closing session. Congratulations to everyone who took home an award, and a special thanks goes to all authors for their contributions and those who voted!

Join us in congratulating the following people:

People’s Choice SH Poster Award: **Emily Duivesteyn**
‘Respect Me + You. Is Your Syphilis Check Up Due?’ Campaign (2021):Empowering Our Own Health Choices Through Art, Collaboration and Education

Sexual Health Society of Victoria Poster Award: **Nicholas Caldwell**
Client Survey in a Regional Sexual and Reproductive Health Clinic

The Sexual Health Society of Queensland (SHSQ) 2022 Award: **Jo-Anne Tucker**
21st Century Sex Education Program

EARLY CAREER ORAL AWARDS

Clinical Management & Therapeutics Oral: **Emma Sweeney**
Simplifying Molecular Approaches to Detect Mycoplasma Genitalium parC Resistance Mutations, to Facilitate Individualized Fluoroquinolone Treatment

Prevention, Epidemiology & Health Promotion Oral: **Palak Gupta**
Increasing Syphilis Testing Among Women After Switching From an Opt-In to Opt-Out Testing Strategy in an Urban Australian Sexual Health Clinic

Social, Political & Cultural Aspects Oral: **Jacqui Hendriks**
Experiences of Sexual Health Testing: Findings from Qualitative Interviews with Western Australian Young People

We are also pleased to announce the winner of the People’s Choice HIV Poster Award: **Nikki Sullivan**
CONNECT: Engaging CALD Communities in Rapid Testing

Sexual Health Closing Session

In the closing of the Sexual Health conference, we looked to the future with a panel discussion covering the topic *‘Another Pox? In this economy? Mobilising a coherent response to monkeypox in Australia’*.

With 2.5 years of COVID behind us, who was expecting another epidemic so soon? Alas, this is what we are currently facing with the arrival of monkeypox (MPX). Applying learnings from our experiences with HIV and COVID are vitally important, and we must work together to combat stigma, support those who need it most, and promote effective interventions to reduce the spread and potentially eliminate the disease.

Our panel left us inspired to continue shaping our public health response by driving change and innovation in the services we all work hard to provide.

As a final word - don’t forget to save the date for the **2023 Australasian Sexual and Reproductive Health Conference**, scheduled for 18 – 20 September 2023 in Manly, NSW. We hope to see you all there!

Australasian Sexual and Reproductive Health Conference 2023



Save the Date

Australasian Sexual and Reproductive Health Conference
18 – 20 September 2023
Manly Pacific Sydney





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