Finalist: Open call for increasing awareness and uptake of PrEP in Asian-born MSM in Australia

The first prize

To increase uptake of PrEP among GBMSM, it is important to first identify potential barriers that GBMSM face in taking up PrEP. Evidence shows that dominant thematic barriers include stigma, inaccessibility of health systems as well as low HIV risk perception, amongst others. Such barriers are highly pertinent to the population of Asian-born GBMSM who arrived in Australia in the last 5 years. Besides unfamiliarity with the Australian healthcare system contributing to upstream barriers that keep health systems inaccessible to this population, a cultural background of conservativism feeds strongly into stigma as well. Furthermore, many individuals from this particular background come from home countries where HIV and/or sexual health is heavily stigmatized As such, it is clear that outside of raising awareness to combat low HIV risk perception amongst this population, a key barrier preventing uptake of PrEP in this population is also stigma. The duality of this issue is supported by the evidence base where a qualitative study of newly arrived Asian-born gay men by Phillips et al. highlighted the dual-pronged issues of stigma and lack of knowledge.

I propose an anonymous, online service where Asian-born GBMSM can both educated themselves on PrEP and it's applications, while at the same time being a safe portal for obtaining PrEP for themselves.

In terms of addressing the issue of a poor knowledge background towards PrEP and perhaps Australian sexual healthcare / healthcare in general, the online service would provide information and education on this topic. In order to increase uptake, the online service should be accessible both on smartphones, laptops and other devices. By addressing inadequacies in the knowledge base of the population, the online service serves to tackle more upstream barriers preventing uptake of PrEP in this population.

Crucially, it is also important to tackle downstream barriers in uptake of PrEP. Asian-born GBMSM face a myriad of factors such as stigmatization of HIV, poor experiences with healthcare in Australia and/or their home country, the need for individuals to maintain privacy and/or shame stemming from background, amongst many others. Besides long-term challenging of stigmatization towards sexual health, it is important to offer Asian-born GBMSM with a solution to uptake PrEP that preserves privacy, maintains dignity and reduces any potential sources of stigma. As such, an online service where GBMSM can relatively anonymously and safely obtain PrEP. The online service would involve a quick consultation with a physician online who would counsel the individual on side effects, other STIs and provide any medical advice required. PrEP can then be prescribed to the patient and discretion can also be practiced through innovative ways such as using one-time links to send prescriptions which ensures patients don't have to give out their personal emails, if they do not wish to do so. In dealing with multiple cultural backgrounds, it is also pertinent that the physician on the other side of the screen be trained in culturally safe healthcare consulting and hence provide better outcomes for Asian-born GBMSM arriving in Australia within the last 5 years.

The second prize

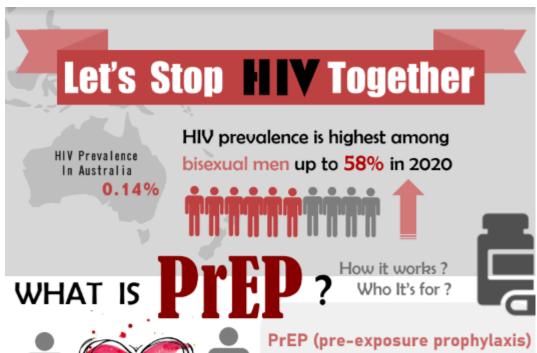
Context: There are gaps between: the reduction in new HIV notifications was smaller for the Australian born men who have ses with men (MSM) 13% versus 33% of overseas-born peers (Aung et al, 2020); higher percentage of later stage in HIV diagnosis and number of people who never had STI test previously in overseas born groups (Aung et al, 2020); increasing proportion of undiagnosed HIV (Patel et al, 2021); and the majority of HIV notifications in 2018 were from men born in Asia (54%, up from 32% in 2009) (Philpot et al, 2021). It is worth considering some initiatives to improve these inequality in overseas-born MSM access to healthcare in general and PREP specifically

Aim: this initiative aims to reach Vietnamese-born MSM, including international students Vietnamese MSM, newly arrival MSM in Sydney. Advocate for their needs to improve access to sexual health care; Increase their HIV testing and; Improve their engagement with local health care services; provide information/knowledge and facilitate their access to PREP/PEP;

Possible perceived barriers: Low risk perceptions about STI/HIV; Cost of STI/HIV testing. Unaware of PREP or perceived barriers to access PREP like PREP purchasing cost as not Medicare card holders, side effects of PREP; Language barriers; Privacy/confidentiality; Fear of stigma/discrimination; Not aware of the services and/or how to navigate Australian healthcare system

Initiatives: Media campaigns about PREP and STI clinics in Vietnamese run in popular Vietnamese social media. Given Facebook the most popular social network in Vietnam and its easily facilitating of any internationally promotional programs versus other domestic popular media which does not support overseas activities, most popular Facebook communities for Vietnamese in Australia, such as Vietnamese in Sydney - 30K members; Dinh Cu & Cuoc Song Uc (Immigration and Life in Australia) - 63K members, Vietnamese Students in Australia - 73K members; Vietnamese Australian Student Association - 70K members, VASA - Vietnamese Australian student Association - Melbourne 86K, Vietnamese Students In Sydney - 72K, SIA - Vietnamese Students In Australia 38K, etc should be considered. These groups are the main sources for any Vietnamese new migrants to exchange information and learn about new lives in Australia. With Vietnamese traditional cultural strait is still dominant, audience targeting Facebook ads would give more reassurance re confidentiality and privacy. Other main features of STI services such as confidential/privacy, free of charge, Vietnamese interpreters, etc should be emphasized in the content of the campaigns. Word by mouth is also a way for Vietnamese people to spread information. By that I meant the number of people knowing about PREP not limited to the members of these Facebook groups

The third prize





is a combine medicine that can reduce your chances of getting HIV from sex or injection drug use. When taken as prescribed, **PrEP** is highly effective for preventing HIV.

How to take PrEP

- Take this medication on a daily basis, once a day.
- 2 Blood tests should be performed to monitor efficacy every 3 months.
- This drug cannot be used to prevent other sexually transmitted infections.

Talk to your health care provider if you think PrEP may be right for you. PrEP can be prescribed by any health care provider who is licensed to write prescriptions. Before beginning PrEP, you must take an HIV test to make sure you don't have HIV.

The fourth prize

Give all the Asian-born homosexual people free access to PREP (a trial so they can see how effective it is) and they can decide if they want to continue using it. This way PREP will get greater exposure and there will be more data also hopefully.