

Bypassing policy inertia: how a collaborative, multi-channel advocacy campaign secured PrEP funding in New Zealand

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Te Tūāpapa Mate Āraikore o Aotearoa



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Background

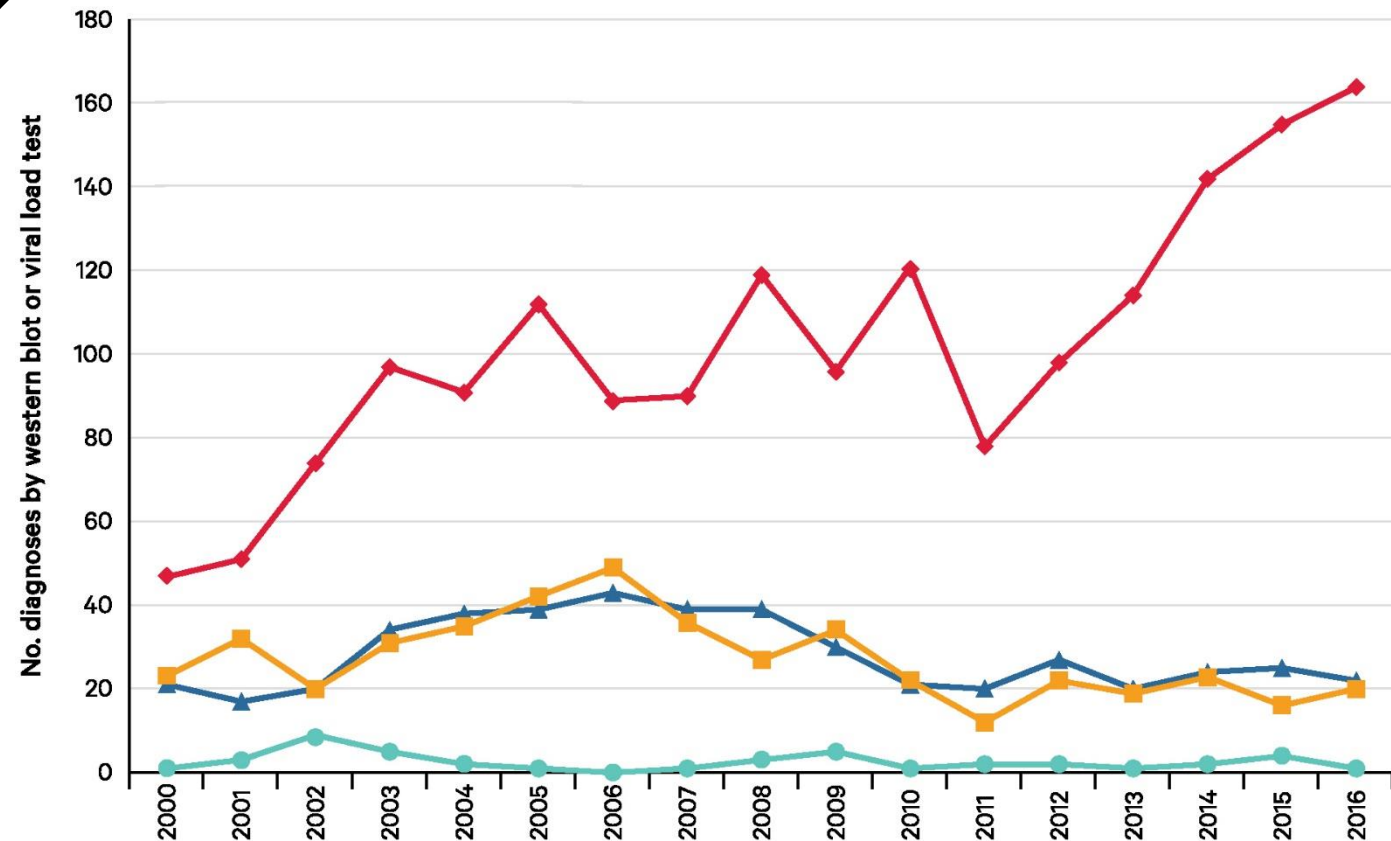
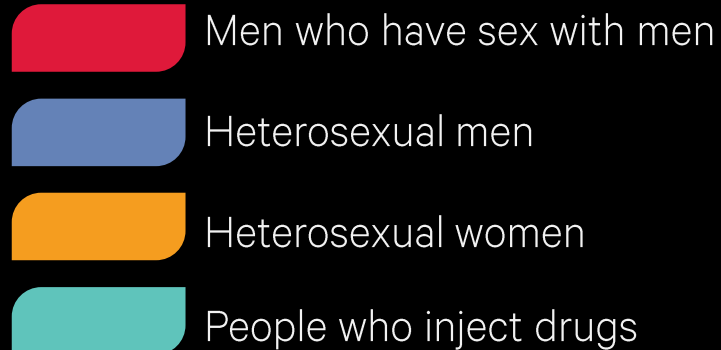
In 2016 New Zealand recorded the fifth consecutive annual increase, and the highest number on record, of HIV diagnoses among gay, bisexual and other men who have sex with men (GBM)¹. Expanded HIV prevention options, including treatment-based prevention, were identified as being urgently needed if this trend was to be reversed².

International guidelines have recommended HIV pre-exposure prophylaxis (PrEP) since 2015 but there is still no official policy in New Zealand. Increasing concern about the lack of Government strategy and action on PrEP, and HIV in general, prompted the New Zealand AIDS Foundation (NZAF), a non-government organisation, to form an alliance with leading community, clinical and research stakeholders to advocate for publicly funded access.

1. McAllister S et al. 2017 AIDS - New Zealand. Dunedin: AIDS Epidemiology Group, University of Otago. 2017; issue 76.

2. Saxton PJ, Hughes AJ, Giola M. HIV prevention today: with coordinated action, we can end transmission. NZ Med J. 2015; 128 (1426): 8-15.

HIV diagnoses in New Zealand 2000-2016



Description

We used a range of strategies to build the case for public funding of PrEP:

- A demonstration project, enrolling 150 GBM, was conducted in Auckland to ascertain the acceptability of PrEP among this most-at-risk group and how it can be delivered in local sexual health clinics;
- A national consensus statement on comprehensive HIV prevention was developed and signed by over 100 clinicians, community organisations and researchers calling for change (<https://hivconsensus.org.nz/>);
- Medicines regulators, border control agencies and legal advisors were engaged to remove barriers to PrEP promotion, prescribing and personal importation;
- An online learning course was developed for general practitioners and clinicians to support prescribing for patients to import PrEP from overseas, resulting in 25 providers developing experience in delivering PrEP and building health sector support;

Description

- The presence of the Prime Minister and Leader of the Opposition at gay pride events was leveraged to secure high-level commitments to publicly fund PrEP during the 2017 election campaign;
- Community forums were held to educate GBM about PrEP and how to access 'grey market' generics through self-importation, and to develop community advocates for change;
- When pharmaceutical companies delayed their applications to New Zealand's medicines purchasing agency PHARMAC for PrEP subsidy, NZAF lodged its own community application;
- A petition was launched calling for an expedited decision on PrEP funding, receiving 2,289 signatures.
- Abstracts were submitted to conferences to prioritise PrEP in the health sector's agenda
- NZAF's strong media profile was leveraged to promote PrEP in front of national public and clinical audiences

Description



Figure 1. Labour Party advertisement on Grindr, a gay hook-up app



Figure 2. Then Prime Minister, Bill English, greeting researchers in the PrEP tent at the Ending HIV Big Gay Out

Description



Figure 3. NZAF booth at the South Island GP Conference, raising awareness of PrEP among the health workforce

Description



Figure 4. A PrEP community forum held in Auckland.

Lessons Learned

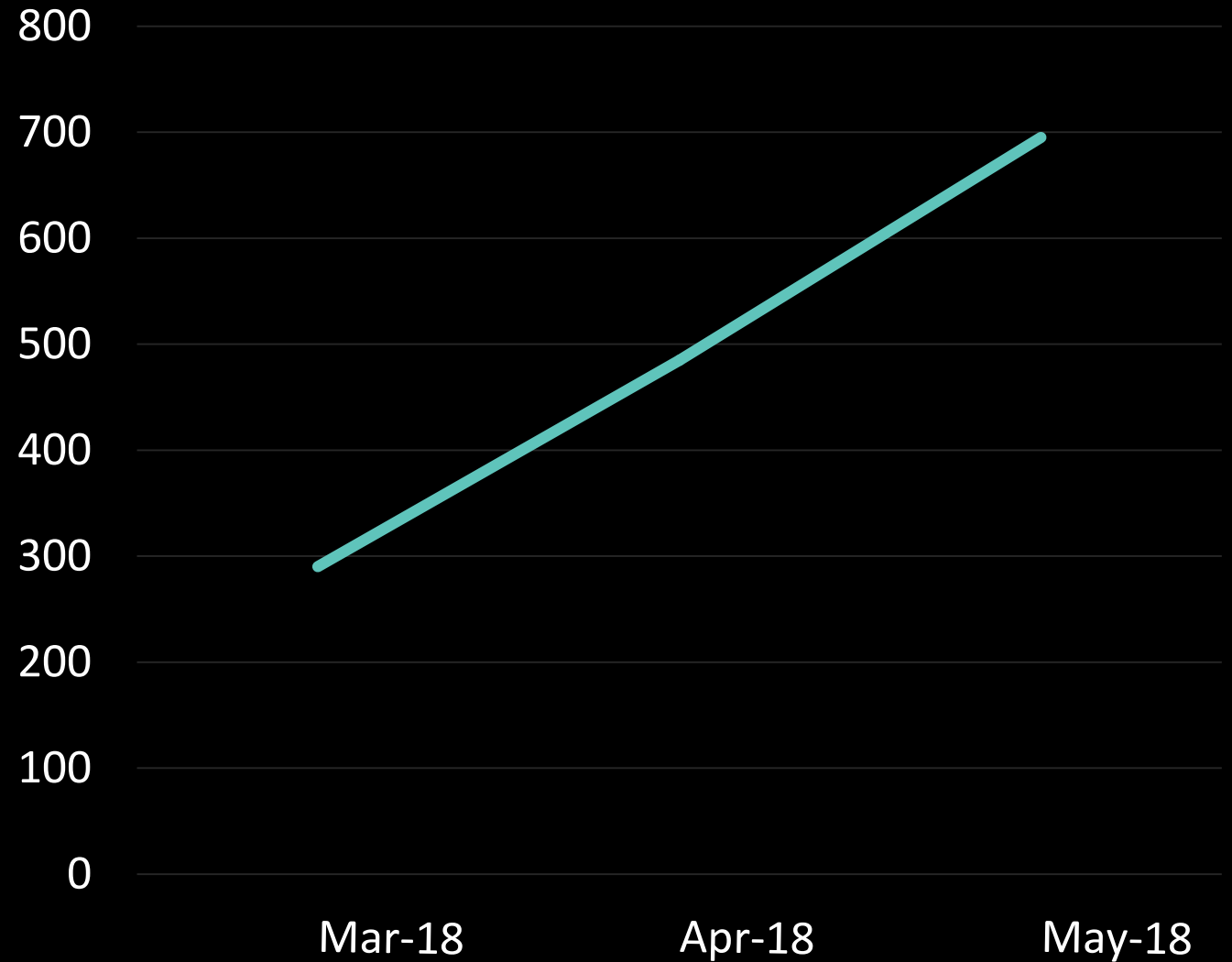
When HIV isn't a priority for government and health departments it can be difficult to make progress. However, we have shown that collaborative and multi-channel non-government advocacy can raise awareness, build coalitions and articulate a credible case for change.

These efforts successfully resulted in New Zealand becoming one of the first countries in the world to fully fund PrEP to individuals most at risk of HIV on 1 March 2018. PHARMAC's subsidy means patients only have to pay an NZD\$5 co-payment per three-month supply.

In the first three months of implementation, 695 special authority applications were granted for individuals to obtain publicly funded PrEP.

Cumulative
number of
patients initiated
on publicly
funded PrEP

Source: PHARMAC special authority initiations.



Conclusions and next steps

Funded access to PrEP is an important milestone however there is no updated national HIV action plan to support implementation. Bottlenecks and delays accessing PrEP are emerging.

Urgent actions include: increasing capacity of sexual health services and increasing GP knowledge to manage patients on PrEP; widening the list of named prescribers who can initiate an individual on PrEP; increasing community education among high risk groups; reducing the product cost so pharmacies are willing to hold stock; and widening surveillance to monitor PrEP uptake.

Thank You

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