

WA Sexual Health and Blood-borne Virus Strategy 2024–30:

Monitoring framework



Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Childhood vaccination	Virus (HBV)	epatitis B 1. >90% receiving timely birth dose of HBV vaccine as per the schedule		Proportion of WA newborns receiving birth dose of HBV vaccine	N= number that received HBV vaccine birth do D= number of births	Directorate WA Department of Health – Communicable Disease Control Directorate (CDCD) – Immunisation Program data request form
		2. 95% timely com schedule of infant	•	Proportion of WA 12 months olds have completed 3 doses schedule HBV vaccine doses	N= number that have received 3 doses of HBV vaccine by 12 months old in Australian Immunisation Register (AIR) D= population of 12 month olds in AIR	Australian Department of Health and Aged Care – current coverage data tables for all children
Human Papillomavirus (HPV)		3.>80% HPV adole coverage	scent vaccination	Proportion of adolescents turning 15 that year, who have received at least one dose of HPV vaccine before their 15th birthday	N= AIR record of having received at least one dose of HPV vaccine after their 9th birthday (since HPV is registered to be given from 9 years of age) but before their 15th birthday D= number of Medicareregistered adolescents in each year-wide birth cohort	National Centre for Immunisation Research and Surveillance (NCIRS) - annual immunisation coverage report

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Prevention of mother-to- child transmission	HBV	4. >95% of mothers HBV and their infant based care to preve parent-to-child trans pregnancy and birth	ts receive guideline- ent mother/birthing	Number of notifications of HBV in WA infants <1 year old	Single measure= number of notifications for HBV in <1 year old	WA Department of Health – WA Notifiable Infectious Diseases Database (WANIDD) – HBV notifications of those <1 year old
	Chlamydia and gonorrhoea	5. 100% of all pregr screened at bookin		Proportion of pregnant people who had a chlamydia and/or gonorrhoea test before 28 weeks	N= number of pregnant people who had a chlamydia and gonorrhoea test at first antenatal contact and <28 weeks D= number of people giving birth in WA	WA Department of Health – maternity dashboard
	HBV, Hepatitis C virus (HCV) and Human Immunodeficien cy Virus (HIV)	6. 100% of all pregr at booking visit	nant people screened	Proportion of pregnant people who had antenatal serology for HBV, HCV and/or HIV	2 options (1) N= number of people with MBS item numbers 69413 or 69415 D= number of people giving birth in WA	(1) Medicare online statistics
					(2)N= number of pregnant people who had a syphilis test at first antenatal contact and <28 weeks D= number of people giving birth in WA	(2) WA Department of Health - maternity dashboard



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mother- to- child transmission	HIV	7. Sustain the virtu transmission from	nal elimination of HIV mother-to- child	Number of notifications of HIV in WA infants <1 year old	Single measure= number of notifications for HIV in <1 year olds	WANIDD
	Syphilis	8. 100% of all preg screened at booking		Proportion of pregnant people who had a syphilis test before 28 weeks	N= number of pregnant people who had a syphilis test at first antenatal contact and <28 weeks D= number of people giving birth	WA Department of Health – maternity dashboard
		9. 100% of all preg 28 weeks	nant people tested at	Proportion of pregnant people who had a syphilis test between 28 and 35 weeks	N= number of pregnant people who had a syphilis test at 28 weeks D= number of people giving birth at 28 or more weeks gestation	WA Department of Health – maternity dashboard
		10. 100% of all pre at 36 weeks	gnant people tested	Proportion of pregnant people who had a syphilis test at or after 36 weeks	N= number of pregnant people who had a syphilis test at 36 weeks or more gestation D= number of people giving birth at 36 or more weeks gestation	WA Department of Health – maternity dashboard

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Prevention	HPV and HBV	undertake vaccina	11. Test for immunity to and/or undertake vaccination against HPV or HBV infection in adults from priority populations	(HPV) Proportion of Aboriginal adolescents who have received at least one dose of HPV vaccine before their 15th birthday	N= AIR record of an Aboriginal adolescent having received at least one dose of HPV vaccine after their 9th birthday (since HPV is registered to be given from 9 years of age) but before their 15th birthday D= number of Medicareregistered Aboriginal adolescents in each yearwide birth cohort	NCIRS – annual immunisation coverage report
				(HPV) Number of gay, bisexual or men who have sex with men (GBMSM) who have received at least one dose of HPV vaccine at specialist partner clinics	Single measure= comment on the number of HPV vaccines given to GBMSM in the last 12 months at specialist partner clinics	Sexual health and blood-borne virus program (SHBBVP) partner reports – M clinic, Sexual Health Quarters (SHQ) and public sexual health clinics
				(HBV) Programs in place to enhance HBV immunisation amongst Aboriginal adults in WA	Narrative	SHBBVP – to gain description of relevant programs

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Prevention	tion HPV and HBV 11. Test for immunity to and/or undertake vaccination against HPV or HBV infection in adults from priority populations		(HBV) Number of GBMSM who have received HBV vaccination service at specialist partner clinics	Single measure= comment on the number of HBV vaccines given to GBMSM in the last year at specialist partner clinics	SHBBVP partner reports – M clinic and SHQ data	
			(HBV) Programs being offered and/or routinely part of care to promote preventative HBV vaccination and/ or serology testing to GBMSM	Narrative	SHBBVP – to gain description of relevant programs	
		(HBV) Number of sex workers who have visited Magenta who have had HBV vaccination and/or serology testing	Single measure= the number of HBV vaccines given to those attending Magenta clinic	SHBBVP partners reports – Magenta clinic		
				(HBV) Programs being offered and/or routinely part of care to promote preventative HBV vaccination and/or serology testing to sex workers	Narrative	SHBBVP – to gain description of relevant programs

Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Prevention	HPV and HBV		ation against HPV or	(HBV) Number of people who inject drugs (PWID) visiting Peer Based Harm Reduction WA (PBHRWA) clinic and who received HBV vaccination	Single measure= the number of immunisations delivered by the Department of Health to PBHRWA	WA Department of Health – Communicable Disease Control Directorate (CDCD) – Immunisation Program data request form
				(HBV) Programs being offered and/or routinely part of care to promote preventative HBV vaccination and/ or serology testing to PWID	Narrative	SHBBVP – to gain description of relevant programs
				(HBV) Proportion of migrants from endemic countries that have had either HBV 3 dose vaccination and/or serology testing	N/A	TBA

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Prevention	HBV, HCV and HIV 12. Promote and facilitate the use of antiviral therapy for people with HBV, HCV and HIV infection, including HCV re-infection, as a means of providing treatment as prevention for these infections		Health promotion and programs offered that enhance antiviral uptake for HIV, HBV and HCV	Narrative	SHBBVP	
	HIV	_	ctions (STI)	Proportion of eligible GBMSM taking PrEP	N= non-HIV-positive individuals who took PrEP (either regularly or 'on demand') and reported condomless anal intercourse (CAIC) in the last 6/12 D= non-HIV positive GBMSM who reported CAIC in last 6 months	University of New South Wales (UNSW) Gay Bisexual & Queer (GBQ+) Periodic Community Survey (GCPS) Perth results
				Programs offered and/or availability of services to provide transgender individuals with PrEP	Narrative	SHBBVP – to gain description of relevant programs

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Prevention	HIV	13. 95% of eligible p for HIV, in combinat prevention and testi	ion with STI	Programs offered and/ or availability of services to provide sex workers with PrEP	Narrative	SHBBVP – to gain description of relevant programs
Harm reduction	HBV, HCV, HIV	14. 3.0 per capita needle and syringe distribution among the population aged 15 to 64 years is sustained as part of a comprehensive harm reduction program		Per capita needle and syringes distributed	N= number of needle and syringes provided by SHBBVP and partners D= WA population aged 15 to 64 years old	SHBBVP
Testing	STIs	15. 90% of 'priority populations' screened for blood-borne viruses and sexually transmissible infections (BVSTIs) and treated if positive	95% of priority populations screened for BVSTIs and treated if positive	Rate of chlamydia and/ or gonorrhoea testing amongst young people (15 to 24)	N= number of chlamydia and/ or gonorrhoea tests in 15 to 24 year olds processed by WA pathology companies D= WA population aged 15 to 24 years old	Surveillance and Disease Control (SDC) program - quarterly data received from all pathology partners (except Clinipath)

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Testing	STIs	15. 90% of priority populations screened for BVSTIs and treated if positive	95% of priority populations screened for BVSTIs and treated if positive	Rate of syphilis testing amongst young people aged 15 to 24 years old	N= number of syphilis tests processed by WA pathology companies in young people aged 15 to 24 years old D= WA population 15 to 24 years old	SDC program - quarterly data received from all pathology partners (except Clinipath)
				Rate of HIV testing amongst Aboriginal population	N= number of HIV tests in Aboriginal people aged >15 years D= WA Aboriginal population, aged >15 year	
				Narrative information about availability and delivery of STI testing for Aboriginal people in WA	Narrative	SHBBVP – to gain description of relevant programs
				Proportion of people who inject drugs (PWID) who report HCV and HIV tests, respectively, in the last year	N= Respondents in Australian Needle and Syringe Program Survey (ANSPS) reporting HCV and HIV diagnostic tests respectively in the last year D= respondents in the ANSPS	ANSPS National Data Report 2019–2023, State breakdown available in tables

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Testing	STIs	15. 90% of priority populations screened for BVSTIs and treated if positive	95% of priority populations screened for BVSTIs and treated if positive	Narratives around availability and delivery of STI screening and testing for sex workers in WA	Narrative Single measure: the number of BVSTI tests performed in sex workers in WA	SHBBVP – to gain description of relevant programs Australian Collaboration for Coordinated Enhanced Sentinel Surveillance of STIs and BBVs (ACCESS) analytics
			Narrative information about availability of sexual health services for people experiencing homelessness	Narrative	SHBBVP – to gain description of relevant programs	
			Proportion of chlamydia cases treated	N= number of treatments for chlamydia D= number of diagnoses of chlamydia	SHBBVP program: reports from SHQ and Magenta for data on chlamydia diagnoses and treatment proportions for their clients	
				Proportion of gonorrhoea cases treated	N= number of gonorrhoea cases treated D= number of gonorrhoea diagnoses	SDC program: enhanced surveillance for gonorrhoea.
				Proportion of syphilis cases treated	N= number of syphilis cases treated D= number of syphilis diagnoses	SDC program: enhanced surveillance for syphilis

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Incidence	HCV	16. Reduce incidence by 60%: ≤8 cases per 100,000 per year	Reduce the incidence by 90%: ≤5 cases per 100,000 per year	Number of HCV (newly acquired and unspecified) infections per 100,000 population per year	1. Notifications method: N= number of notifications of HCV (both newly acquired and unspecified) infections D= WA population	WANIDD
	HIV	17. Reduce the incic infections by 90%: ≤ year	lence of new 0.29 per 100,000 per	Number of new HIV infections per 100,000	N= number of notifications of HIV infections D= WA population	WANIDD
	HIV	18. Sustain the low i among sex workers through the mainten prevention programs	and PWID nance of effective	Number of new HIV notifications in sex workers	Single measure= number of HIV notifications amongst sex workers	SDC program, WANIDD and enhanced surveillance by SDC HIV team
				Number of new HIV notifications in PWID	Single measure= number of HIV notifications amongst PWID	

Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Incidence	Syphilis	19. Eliminate conge	nital syphilis	Number of notifications of congenital syphilis in WA	Single measure= number of congenital syphilis notifications	WANIDD
	Syphilis	20. Reduce the incide infections by 90%: ≤ year		Number of syphilis notifications per 100,000	N= number of notifications of syphilis (infectious) D= WA population	WANIDD
	Chlamydia	21. Reduce the incid infections by 50%: ≤ per year		Number of chlamydia notifications per 100,000	N= number of notifications of chlamydia (genital) D= WA population	WANIDD
	Gonorrhoea	22. Reduce the incide infections by 90%: ≤ year		Number of gonorrhoea notifications per 100,000	N= number of notifications of gonorrhoea D= WA population	WANIDD
Proportion diagnosed	HBV	23. ≥85% people living with chronic HBV are diagnosed	≥90% people living with chronic HBV are diagnosed	Proportion of people living with HBV who are diagnosed	N= number of people living with chronic HBV in WA who have been diagnosed D= total number of people living with chronic HBV in WA as modelled by the Doherty Institute	Doherty Institute and Victorian Infectious Disease Reference Laboratory (VIDRL) National Surveillance for Hepatitis B Indicators Project - report and dashboard



Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Proportion diagnosed	HBV	24. Reduce to ≤5% the proportion of people living with chronic HBV diagnosed with liver cancer or decompensated cirrhosis, whose HBV was diagnosed within 2 years prior, at the time of, or after admission for liver failure or liver cancer	Reduce to ≤2% the proportion of people living with chronic HBV diagnosed with liver cancer or decompensated cirrhosis, whose HBV was diagnosed within 2 years prior, at the time of, or after admission for, liver failure or liver cancer	Proportion of people living with HBV who have cirrhosis	N= number of people living with chronic HBV in WA who have cirrhosis D= total number of people living with chronic HBV in WA as modelled by Doherty Institute	Doherty Institute and VIDRL National Surveillance for Hepatitis B Indicators Project - report and dashboard
	HIV	25. Increase the prowith HIV (in all prior who are diagnosed	ity populations)	Proportion of people living with HIV who are diagnosed	N= number of people diagnosed with HIV in WA D= number of people living with HIV in WA as modelled by Kirby Institute	Kirby Institute Annual Surveillance Report and dashboard

Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Proportion in care	HBV	26. ≥65% of all people living with chronic HBV are in care	≥80% of all people living with chronic HBV are in care	Proportion of people living with HBV who are in care	(1) Current: N= number of patients who had >= 1 HBV viral load test in the last 2 years at PathWest D= total number of people living with chronic HBV in WA as modelled by the Doherty Institute	(1) PathWest data request
					(2): Future: Doherty Institute and VIDRL modelling: N= number of people with a viral load ('not on treatment') test in year and number on Pharmaceutical Benefit Scheme (PBS) treatment D= total number of people living with chronic HBV in WA as modelled by the Doherty Institute	(2) Doherty Institute and VIDRL National Surveillance for Hepatitis B Indicators Project - report and dashboard
Proportion receiving treatment	HBV	27. 22% of all people living with chronic HBV are receiving treatment	27% of all people living with chronic HBV are receiving treatment	Proportion of people living with HBV who are on treatment	N= number of people dispensed treatment for HBV through the PBS in WA D= total number of people living with CHB in WA as modelled by the Doherty Institute	Doherty Institute and VIDRL National Surveillance for Hepatitis B Indicators Project - report and dashboard

Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Proportion receiving treatment	HIV	V 28. 95% of all people diagnosed with HIV are on treatment		Proportion of people diagnosed with HIV in the last 5 years who are on treatment	2 methods and compare. (1) N= number of people receiving antiretroviral therapy (ART) D= number of people living with HIV	(1) Kirby Annual Surveillance report
					(2) N= number of people receiving ART in the WA ACCESS network D= number of people diagnosed with HIV in WA ACCESS network	(2) ACCESS database
			ple with HIV on I undetectable viral	Proportion of people with HIV who are engaged in care and who have an undetectable viral load	3 methods and compare. (1) N= number of people with a viral load <200 (on the patient's most recent viral load result) during the last year D= number of people who had an HIV viral load test in the last year	(1) SDC Program: enhanced surveillance by HIV team
					(2) N= number of people with suppressed viral load D= number of people received ART	(2) Kirby Annual Surveillance report and dashboard
					(3) N= number of people with a suppressed viral load in the ACCESS database D= number of people receiving ART in the ACCESS database	(3) ACCESS database

Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source	
Proportion receiving treatment	HIV	30. <10% of all people diagnosed with HIV start ART with a CD4 count of below 200 cells/mm3 (or stage III or IV)		with HIV start ART with a CD4 count of below 200 cells/mm3 (or stage III with a CD4 count of		2 options (1) N= number of people with new HIV diagnosis who have a cell count <200cells /mm3/ stage 3/4 at diagnosis D= number of people diagnosed with HIV in last year	(1) SDC Program: enhanced surveillance by HIV team
					(2) N= number of people diagnosed with HIV with an 'advanced HIV diagnosis' (<200 cells/uL) (in year X) D= number of people diagnosed with HIV (in year X)	(2) SDC Program: enhanced surveillance by HIV team	
Proportion cured	HCV	31. 65% of people living with HCV are cured	85% of people living with HCV are cured	Proportion of people who are cured of HCV each year	N= number of people cured of HCV since 2015 D= number of people living with chronic HCV (end of 2015)	Kirby Annual Surveillance Report – hepatitis C and dashboard	

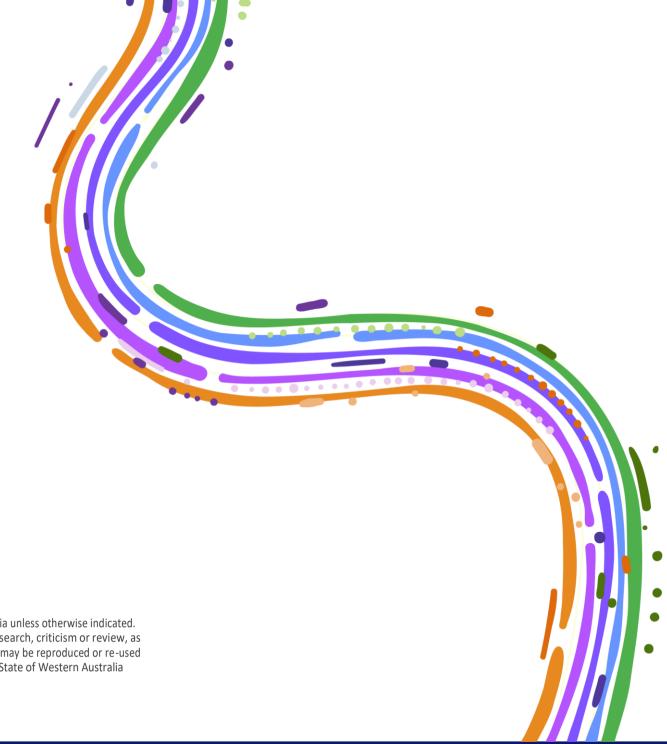
Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Attributable Mortality	HBV	32. Reduce by 15% HBV - attributable mortality, ≤1.2 deaths per 100,000 population	Reduce by 40% HBV – attributable mortality, ≤1.0 deaths per 100,000 population	Proportion of WA deaths attributable to HBV	N= number of deaths attributable to HBV D= total number of deaths in WA per year	Doherty Institute and VIDRL National Surveillance for Hepatitis B Indicators Project - report and dashboard
	HCV	33. Reduce by 40% HCV attributable mortality ≤1.6 deaths per 100 000 population per year	Reduce by 65% HCV attributable mortality. ≤1.0 deaths per 100 000 population per year	Proportion of WA deaths attributable to HCV	N= number of deaths attributable to HCV D= total number of deaths in WA per year	Kirby Annual Surveillance Report: Hepatitis C and dashboard
Stigma reduction	All BVSTIs	34. Reduce to zero stigma and/or discr respect to a person actual BVSTIs statu settings	imination in 's perceived or	Proportion of health professionals who report 'never' or 'rarely' behaving negatively towards patients and/or clients because of their HIV, HBV, HCV, sexual orientation, injecting drug use, sex work or STI	N= number of health professionals in the 'stigma indicators monitoring' survey who report 'never' or 'rarely' D= survey participants	SHBBVP – WA specific reports commissioned from the UNSW National Stigma Monitoring Project.

Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Stigma reduction	All BVSTIs	34. Reduce to zero the expression of stigma and/or discrimination in respect to a person's perceived or actual BVSTIs status in healthcare settings		Narrative of activities by SHBBVP to reduce the stigmatising attitudes, and expression of, by WA health care workers	Narrative	SHBBVP, data from the eLearning module: 'Understanding and Reducing Blood-borne Virus Stigma and Discrimination' which is available via the WA Health Learning Management System (MyLearning). Data includes the number and type of health professionals who have completed or partially completed the course
				Narrative of key policies and/or legislation in WA that contribute to structural stigma within healthcare settings	Narrative	SHBBVP – to gain description of relevant policies
	HBV	35. Establish a baseline of the reported experience of stigma among people living with chronic HBV	Reduce to ≤10% of people living with a BVSTI, or from a priority population, experiencing or reporting stigma and/or discrimination	2025 target indicator: A baseline proportion of people with chronic HBV who report experiencing stigma has been established. 2030 target indicator: proportion of people living with a BVSTI, or from a priority population, who report experiencing stigma	2025 target: TBA	TBA

Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Stigma reduction	HBV	35. Establish a baseline of the reported experience of stigma among people living with chronic HBV	Reduce to ≤10% of people living with a BVSTI, or from a priority population, experiencing or reporting stigma and/or discrimination	2025 target indicator: A baseline proportion of people with chronic HBV who report experiencing stigma has been established. 2030 target indicator: proportion of people living with a BVSTI, or from a priority population, who report experiencing stigma	2030: N= people living with HIV, HCV, PWID, GBMSM, sex workers who took part in the survey* and reported having experienced stigma and/or discrimination 'sometimes,' 'often' or 'always' D= survey participants	*National Stigma Indicators Monitoring Project Summary Report, University of New South Wales
Quality of life	HBV	36. 75% report a good quality of life	95% report a good quality of life	Proportion of those living with chronic HBV reporting a good quality of life	ТВА	ТВА
	HCV	37. 75% report a good quality of life	95% report a good quality of life	Proportion of those affected by HCV reporting a good quality of life	ТВА	TBA
	HIV	38. 75% report a good quality of life	95% report a good quality of life	Proportion of those living with HIV reporting a good quality of life	N= number of people living with HIV reporting a good quality of life responding to Future 10 survey D= number of people living with HIV responding to Future 10 survey	La Trobe's HIV Futures 10, quality of life among people living with HIV in Australia survey



Category	Disease	2025 target	2030 target	Indicator	Numerator and denominator	Source
Legal and human rights	All BVSTIs	39. Reduce the ne legal and human ri people's health an • improving access enabling legal envi affected by BVSTIs • advocating for leg reform that reduce discrimination and and accessibility	ghts issues on d wellbeing by: s to justice and an ronment for people gal and policy s stigma and	Narrative of advocacy and programs undertaken by SHBBVP and key partners that reduce the negative impact of legal and human rights issues on people's health and wellbeing	Narrative	SHBBVP – to gain description of relevant activities



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14919-Sexual Health BBV