

November 2019

Good Liver



Hepatitis Victoria's AGM

Hepatitis Victoria's AGM was held on 15 October where we launched the 2018-19 Annual Report and recognised with awards those who have made a significant contribution to fighting viral hepatitis and liver disease.

Snow Festival

'Snow Fest' is a popular annual event organised by the City of Greater Dandenong. It attracts more than 60,000 people who are there to have a good time in spite of the cold. Our mascot O'Liver attended.

StreetShot

A creative initiative that once again saw a full timetable of education sessions offered across Victoria for youth, encouraging them to raise awareness of viral hepatitis. See who won with some very creative concepts.

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Reader response

Your comments or experiences in regard to any articles in *Good Liver* are welcome.
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- 3 **Communiqué**
From the desk of the CEO
- 4 **De-livering the news**
- 6 **We celebrated LIVERability all over Victoria**
- 8 **Hepatitis Victoria's AGM**
News and annual community awards
- 10 **Community involved**
Our liver health ambassador in the Pakistani community
- 12 **Want to join us?**
Lived-experience speakers are the key to changing perspectives
- 13 **HEPReady® Regional**
Taking the message to Albury Wodonga in the state's north
- 14 **Featured podcast**
Lewis Stieven-Taylor
Alcohol Related Liver Disease
Hot new resource gives the facts
- 15 **What is HepLOGIC?**
Fighting the growing burden of liver cancer
- 16 **Ancient hepatitis B**
What hepatitis B tells us about the migration of ancient humans
- 18 **Australian visa application**
New visa change requirements bring hope
- 19 **Snow Festival**
O'Liver and volunteers melt hearts and teach minds
- 22 **HEP Heroes**
Richard Lim, Simon Clemence, and Sidney Vo
- 23 **Video: Let's talk about hepatitis**
A focus on health workers
- 24 **Adult Migrant English Program**
How 'speaking your language' helps project gain momentum
- 26 **StreetShot**
Super creative ideas from youth take the fight to viral hepatitis
- 28 **Chinese Health Promotion Coalition**
Celebrating its first anniversary
- 30 **Bendigo HEPReady**
- 31 **Services Listing**

Communiqué

From the desk of the Chief Executive Officer



What does it really mean to be involved in community?

Welcome to the Summer *Good Liver*. This one features something that we enjoy doing the most - working with and within communities all over Victoria so that they too are part of the response. They inform what we do, help us do it and make it real.

Most inspiring for me about these stories is the passion they reveal from our staff and especially our wonderful volunteers. You can see in their faces how much they enjoy bringing life-changing health messages to different audiences in creative ways - and doing it in a plethora of languages to boot!

With our network of nearly 80 volunteers, we can reach thousands more people in vulnerable communities than we otherwise would, and our volunteer's skills in language, health and cultural awareness gives our organisation an expertise and impact we would not otherwise have. As proof, read the update on the work we are continuing to do with the Australian Migrant English Program, which is going from strength to strength.

Springvale Snow Fest in July is another example. The pictures in our feature article reveal the fun and learning on a day when we made contact with hundreds of people from many of the groups most severely affected by liver disease. And it is important to remember we attend Snow Fest because of the support we get from the City of Dandenong. Is it no



Where's O'Liver?

Hepatitis Victoria regularly attends the popular Snow Fest in Springvale.

wonder then, that Mayor Cr Roz Blades, along with her predecessors Youhorn Chea and Heang Tak, are HEP Heroes?

Reading other stories of our work with the Chinese, Pakistani, Vietnamese, Indigenous and other communities make it clear why 'community involved' is a very suitable theme for this edition. Despite all the obvious activity however, it would be a big mistake to take it all for granted. It relies not only on our great volunteers, but also our collaborating organisations such as Glenroy Neighbourhood House, Melbourne Polytechnic, TAFE Gippsland, Chisolm TAFE and Bendigo TAFE just to name a few. And of course, it is dependent on health promotion funding mainly from the Department of Health and Human Services, supplemented at times by councils and other community groups.

The work we do to challenge stigma and to give voice to those negatively impacted by discriminatory laws would not be possible either without community involvement. Read about how the strength of people coming forward, supported by the advocacy of ourselves and others, led to some improvement for people with hepatitis B seeking Australian visas.

In October we celebrated our 27th Annual General Meeting, which showcased the breadth of our achievements and activities throughout the year. Our awards ceremony featured community members who have gone above and beyond to raise awareness of viral hepatitis. It was delightful to see Uncle Jack Charles awarded the Mark Farmer Memorial Award. His beaming smile and gracious acceptance speech touched everyone who was there.

De-Livering the news



Community awareness hits the airwaves

A three-week campaign on local radio - supporting Hepatitis Victoria messages about testing, treatment and the effective management of hepatitis C, was broadcast Victoria-wide in late October to mid-November. The campaign focused on those living with the condition who either are unaware or not receiving treatment and recommended people talk to their GP for a test and if appropriate get access to direct acting anti-virals (DAAs). There are almost 50,000 Victorians living with Hepatitis C. *If you're one of them, you could be free from Hep C with a new wonder cure. It's simple. It's easy. It's fast... The 60-day course of tablets only costs \$60. So, if you want to be free from HepC, make an appointment today* said the ads.



New rules for people wanting to migrate to Australia living with viral hepatitis

A change to Commonwealth Government rules in the way people are assessed for visas is bringing a ray of hope to people living with viral hepatitis. Immigration health requirements for Australia are strict. Until the change, the rules prevented any migrant with an illness, disease, or intellectual or physical disability from obtaining a visa if it is deemed their condition will be too costly to the Australian taxpayer or put the general public at risk. From 1 July 2019, significant costs associated with a condition are assessed as those exceeding \$49,000 over ten years. Previously the cost threshold was \$40,000 over a person's lifetime.



Visa changes too late for HEP Hero Sidney Vo and son Billy

Hepatitis Victoria welcomed the changes to migration rules but came too late for Sidney Vo and her 12-year old son Billy. The childcare worker from Canberra is appealing the rejection of her visa based on her hepatitis B status. Instead of remaining silent, she decided to speak up, training as a Hepatitis Victoria HEPspeak, talking to the media and appearing at conferences. Listen to her story on a Hepatitis Victoria podcast.



[Sidney Vo Podcast - Click here](#)



2018-19 Annual Report available

Hepatitis Victoria's Annual Report for 2018-19 is now available online for [download here](#) and hard copies can be ordered from the Hepatitis Victoria website. The Annual Report contains updates on the many activities the organisation has been involved in over the year plus five case studies looking at projects in depth. The Annual Report was launched at the organisation's Annual General Meeting on 15 October, see page 8 for highlights of the event.



[Read the SBS story - click here](#)

Follow-up article - [click here](#).



Kai and O’Liver calling Yarra Trams

Intern Kai Wen Cheong and our mascot O’Liver starred in our video entry for this year’s Yarra Trams community partnerships competition. At stake was the chance to conduct a free Melbourne-wide advertising campaign utilising the extensive network of Yarra Trams. Hepatitis Victoria used the *Love Your Liver* campaign as the story line with Kai and O’Liver making a smart and funny appearance. Unfortunately, we were not selected, but you can view our 45 second video by [clicking here](#). And listen to a podcast interview with Kai about his experiences as an intern.



Kai Wen Podcast - [Click here](#)



Uncle Jack Charles receives Mark Farmer Memorial Award

Aboriginal elder Uncle Jack Charles was the winner of the 2018/19 Mark Farmer Award for advocacy by a lived experience person. Uncle Jack received the award for his ongoing commitment to raising awareness, particularly in the Indigenous community, of viral hepatitis. “You’ve got to be open and admit it to yourself,” Uncle Jack said in a Hepatitis Victoria video.

www

Uncle Jack video - [Click here](#)

New video resources fights stigma “Let’s talk about hep C”

A new anti-stigma video was released in September. “The video features people with lived experience and healthcare workers who know about hepatitis C and highlights the need for workers on the frontline to be equipped and able to talk about hepatitis C in a range of settings,” said Hepatitis Victoria Health Promotion Project Officer Isabelle Purcell who, with Digital and Online Services Officer Shaun Knott, created the video. Watch it here.

www

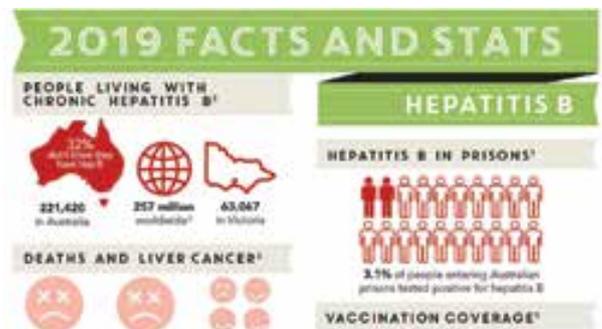
New video - [Click here](#)

Still top app for liver health

ORCHA Health in the UK reviewed our LiverWELL™ app again in October and with a score of 71% we still top the list for best recommended liver health apps. Go LiverWELL™! Download now in Arabic, Chinese, English and Vietnamese.



Download the App - [Click here](#)



Australia is falling behind in hepatitis B

HEP Hero Professor Ben Cowie, director of the World Health Organisation’s Collaborating Centre for Viral Hepatitis at the Doherty Institute, was quoted in an article in the Herald Sun on 26 October saying that despite some progress being made, Australia is falling behind in the national goal to eliminate hepatitis B by 2030, therefore putting hundreds of lives at risk.

The story was based on a recent article Professor Cowie wrote with colleagues in the journal *Hepatology*. [Read the article here](#).

“We really need to get people diagnosed and monitored so we can pick up when they need treatment,” Prof Cowie says in the article.

“(Liver cancer) remains the fastest increasing cause of cancer deaths in this country so we really need to be doing better,” he says.

We celebrated LIVERability all over Victoria



Every year a very important part of Hepatitis Victoria's celebration of World Hepatitis Day (28 July) is the LIVERability Festival, a calendar of activities and events in July through August. To encourage community participation, we offer small grants of up to \$1,000 to community and not-for-profit organisations to conduct activities that raise awareness of viral hepatitis and reduce the stigma and discrimination associated with the disease.

We also encourage those groups focused on improving liver health to apply.

"The grants program has been running for nine years and is very enthusiastically received by organisations across the whole of Victoria and this year was no exception," said Martin Forrest, Health Promotion Programs Manager.

A total of 30 applications were received with 21 grants awarded. Grants were given to various groups including those in the alcohol and other drugs, cultural and linguistically diverse and Indigenous sectors.

"The activities funded by the grants are as various as the groups themselves; they include a 45-minute lecture and quiz in Chinese with catering, a 3-day BBQ and onsite testing campaign, Hep bingo, healthy cooking demonstration or Ilbijerri play and dinner with information session," said Martin.

"What is fantastic is that we reach hundreds of people in the very heart of their communities, providing a platform (and usually lunch or a tea) with the message about taking care of your liver health and getting tested and treated if you are living with viral hepatitis," he said.

Congratulations to all the grant recipients.

Apply for a LIVERability grant in 2020

Grants for 2020 will open early next year and to be eligible you will need to be:

- A community or not for profit organisation based within the Australian state of Victoria
- Agree to have a Hepatitis Victoria staff member attend the event, and conduct an education session
- Advertise your event or activity to your community
- Provide photos and an evaluation report to Hepatitis Victoria following the event.

Contact: Martin@hepvic.org.au for more information

2019 LIVERability Festival Awards and Events

Organisation	Event	Priority group
Austin health – Liver clinic	Talk at the hospital Austin health CEO, gastro specialists	General health
Association of Hazaras in Victoria	Presentations for Dari language students	CALD
Bellarine community health NSP	Info session and afternoon tea for community and health service staff	AOD/NSP
Your community health	Afternoon tea and education presentation	General health
Njernda Aboriginal Cooperation	Lunch aboard paddle steamer with speakers during the lunch Saturday education day with lunch, female and male groups	Indigenous
Hume Afghan Association	Will participate with HV as liver health ambassadors	CALD
Holden St neighbourhood house	Community lunch with liver health theme	General community
Pakistan Welfare Organisation in Australia	Pakistan Independence Day celebration – Hepatitis Victoria stall and talk	CALD
Chinese Association of Monash	Lecture for volunteers and members of the association	CALD
Common Ground Elizabeth Street	Lived experience speaker, onsite testing with info booth and health lunch	AOD/homelessness
Chinese Community Health advisory of Australia	45 min lecture with catering quiz etc in Chinese	CALD
Cohealth Healthworks	Find the missing millions awareness raising day – activities to be chosen in consultation with service users	AOD/NSP
Access health NSP	3-day BBQ and onsite testing campaign	AOD/NSP
SHARPS	Hepatitis awareness week – week of food and special guests onsite	AOD/NSP
NRCH AOD outreach	Mobile lunch and education to outreach clients	AOD/NSP
Cohealth Innerspace	Healthy cooking class and finale day BBQ and guests, talks etc	AOD/NSP
VAHS	Breakfast at VAHS with guest speakers	Indigenous
Salvation Army Flagstaff	Hep Bingo and lunch	Homelessness
Rumbalara	Ilbijeri play and dinner with information session	Indigenous
Barwon Health AOD team	Week-long campaign and raffle	AOD/NSP
Thomas Embling	Cooking demonstration and information session for residents and family	Forensic mental health

Hepatitis Victoria's AGM

News and Annual Community Awards



Hepatitis Victoria's Annual General Meeting (AGM) was held on 15 October where the organisation launched the 2018-19 Annual Report and recognised those who have made a significant contribution to fighting viral hepatitis and liver disease in the community.

Hepatitis Victoria President, Frank Carlus and Chief Executive Officer, Melanie Eagle gave presentations outlining major activities and achievements of note and the structural changes gradually transforming the organisation into LiverWELL™. Treasurer Kieran Donoghue also presented the audited financial statement for the year.

Highlights of the AGM included the appearance of Hepatitis Victoria's former resident dietitian Priscilla Hiromi, who reflected on her pivotal role in the creation of the popular *Eating Well: A LiverWELL™ Lifestyle Guide* the first of four lifestyle-focused approaches to better liver health, launched on World Liver Day (19 April) this year.

Co-author of the Guide Chef Kessavee Lutchmanen sent a message from overseas that was read out at the event.

"Working on the Guide..." she said was a "...great experience."

"It's been such an enriching journey especially working next to Priscilla, and we had lots of fun creating and tasting the dishes."

"I am personally very happy with the recipes that we could come up with, the variety of balanced dishes, be it vegetarian, meat and fish. And if I had the chance to change or add anything in the recipes, it would be more local produce," Kessavee said.

Another highlight were the delicious Indigenous-themed snacks from Nornie Bero, former chef at Ceres Merri Café and now owner of Mabu Mabu Indigenous caterers in Yarraville. Nornie, who was Kessavee's former boss at CERES in East Brunswick, was interviewed by Kay Dufty about why native plants and food are good for your health and most importantly, the liver.

With much fanfare, laughter and emotion, the winners of our annual community awards were also announced.

There were two nominees for the prestigious Mark Farmer Memorial Award for advocacy; Aboriginal elder, actor, musician, potter and activist Uncle Jack Charles and Councillor Youhorn Chea, former Mayor of Dandenong.

Uncle Jack was this year's winner in recognition of his advocacy for people living with hepatitis C, his passion and encouragement of people to be tested and seek treatment.

"I am really honoured to be a significant player in hep C, thank you very much for this award, it's a real privilege," he said on receiving the award.

"There's nothing to be frightened, shy and embarrassed about hep C. You need to get over that in order to move on... Don't care what the rest of the world thinks, because once they see your journey, it will impact on your family's journey, too...and they will pay more respect to you."

There were three nominations for the Organisation Collaboration Award, the Chinese Cancer and Chronic Illness Society of Victoria, Ilbijerri Theatre Company and Forensicare, (the Victorian Institute of Forensic Mental Health).

Forensicare, received the award for its tireless work across the health sector making progress against the unacceptably high levels of hepatitis C inside. Forensicare is the only agency in Victoria that provides clinical forensic mental health services that span all components of the mental health and criminal justice sectors, giving the organisation a unique perspective on mental health and public safety issues.

There were three nominations for the Individual Contribution Award, Cr Lucinda Congreve, Mayor of Brimbank, Marion Lau and Sambath My, all of whom are already HEP Heroes, with Marion Lau receiving the award.

Marion has been very active in the fight against viral hepatitis in the Australian-Chinese community particularly in the development of the *Chinese Health Promotion Coalition* (see separate story page 28). She provides continuous support to activities related to fighting viral hepatitis including health promotion campaigns, community engagement and education programs as well as connecting the Hepatitis Victoria project team with Chinese community leaders and associations through her network.



I am really honoured to be a significant player in hep C, thank you very much for this award, it's a real privilege



Frank Calus with Uncle Jack receiving his award

House-keeping matters at the AGM included the reappointment of Directors Nicole Allard (for three years); Frank Carlus (for three years); Donna Ribton-Turner (for three years); Eddie Micallef (for two years) and Phoebe Trinidad (for two years).

There was also a farewell to outgoing Board members Todd Fernando, Paul Kidd and Ian Gracie. All in all, a very well-organised event, enjoyed by all.

Community involved

Our Liver Health Ambassador in the Pakistani community



Dhanak and Neylan

One of the most effective ways we can reach culturally and linguistically diverse groups with our liver health awareness messages is working with prominent and/or interested individuals within those communities, who have a passion for education and public health.

In August, Health Promotion Officer Neylan Aykut and volunteer Andree Dolby, were involved in an event at Collingwood Town Hall in Melbourne centred around a celebration commemorating Pakistan Independence Day.

"The actual running of this event was organized by the Pakistan Welfare Organisation in Australia and we worked in partnership closely with them to help

us spread the message of liver health awareness," said Neylan.

Pakistan has some of the highest rates of hepatitis B and hepatitis C in the world and the Pakistani authorities are taking an impressive stance to tackle what is a massive health problem for the country and for those living in the Pakistan diaspora.

Hepatitis Victoria had an awareness-raising booth and distributed information in both English and Urdu as well as having a short speech about viral hepatitis and liver health read out by the MC on the central stage.

Hepatitis Victoria also ran a series of activities and educational sessions.

"It was also great for us to learn about the rich history of Pakistan," said Neylan.

In attendance was a very well-known and popular television personality Waseem Badami, who flew in from Pakistan to be a guest speaker.

"Waseem is a television and news anchor who currently hosts a political talk show called '11th Hours' on ARY News, so it was fantastic he was there, our presence filmed and maybe even shown on national television in Pakistan," Neylan said.

Besides brushing shoulders with international stardom, Neylan said the event was 'very meaningful'.



According to estimates, more than 12 million people within Pakistan suffer from hepatitis B or C and each year brings about 150,000 new cases. The disease is called a silent killer because many patients remain undiagnosed and untreated for years before developing complications and dying.

"I think the impact was good as we really launched serious engagement with the Pakistani community," she said.

300 people, families and children came to the event and Hepatitis Victoria distributed all of the resources and educational packs on hand.

"To prepare we stayed in close contact with the president and committee of the Pakistan Welfare Organisation in Australia, so that they could put out word of our agenda and promote our role at their celebration," Neylan said.

One of the most successful aspect of the day and the event was the introduction to the audience our first Liver Health Ambassador for the Pakistani community, Dr Dhanak Abidi.

Dhanak is a medical doctor with extensive experience treating people with viral hepatitis in Pakistan and has generously agreed to help us distribute more information to the Pakistani community about viral hepatitis and the importance of liver health.

Dhanak gave a well-received speech to the community.

"I worked as a doctor in the government sector and am very happy to promote liver health here in Australia," she said.

"Awareness of how to prevent viral hepatitis and to manage the condition for those who have it is vital, and I would like to acknowledge the great work Hepatitis Victoria is doing to raise awareness of the liver health situation," she added.

"Stigma around hepatitis prevents people from coming out, getting treatment and living a normal life, they suffer in loneliness," Dhanak said.

"Stigma is all around the world, but the important things to know are how hepatitis is transmitted, how it can be avoided and what is the cure. People must not avoid it they must seek help as there are many ways they can be helped."



Want to join us?

Lived-experience speakers are key to changing perspectives



You may have heard the term 'lived experience' before, but what does it really mean and why does it matter?

It is a term used in the health care sector, often in relation to a physical or mental health condition and refers to somebody with personal experience of a health issue, usually in the context of participating in research such as focus groups.

Companies and organisations enlist the help of people with lived experience to provide on-the-ground insight into health concerns and their experiences of health systems, health professionals and their personal struggles.

Beyond this and more importantly, people with lived experience become a valuable resource within the sector to educate up-and-coming health professionals, providing their own unique perspectives in ways which cannot be underestimated.

"By speaking publicly on health issues that affect them, including hepatitis B or C, people with lived experience provide first-hand accounts of their condition and bring their personal situation to life in a very real and immediate way," said Stephanie Houghton, Hepatitis Victoria Community Participation Coordinator.

"There is nothing more powerful than a person explaining their stories and experiences with discrimination, it's a way they can influence health professionals and others to be aware that stigma, for example, is a very real problem that has real life consequences," she said.

"Lived experience speakers not only raise awareness and provide insight to health professionals and others, by doing so they build their own resilience, strength and understanding to continue their advocacy," Stephanie said.

Hepatitis Victoria has a long history of engaging people with lived experience in their advocacy campaigns. Whether this has been public speaking to educate health professionals, appearing in videos to fight stigma and answer questions, or writing letters to politicians to galvanise them to act.

"Our lived experience speakers are an invaluable resource not only for the organisation but to the wider public when it comes to raising awareness about viral hepatitis and liver disease," Stephanie said.

Hepatitis Victoria recently conducted another successful training session for public speaking, where new lived experience speakers worked with staff on bedding down their presentations in the hopes of taking the next steps in advocacy.

These new speakers will now get the chance to speak at conferences and workshops, helping and educating others to understand their message and in doing so becoming the very human faces of viral hepatitis and liver disease, conditions which can affect anyone but can be managed and overcome.

"People who do the public speaking training are given professional support and help to develop their skills and confidence and we welcome anyone with lived experience to come forward to tell their story," Stephanie said.

If you want to find out more about becoming a HEPspeaker contact Stephanie directly stephanie@hepvic.org.au



HEPReady® Regional

Taking the message to Albury Wodonga in state's north

Viral hepatitis is present throughout Victoria and bringing awareness to people who might be living with the condition is an important and necessary task wherever they might be.

The Doherty Institute's National Report 2017, says more than 2000 people in the Albury Wodonga area are living with hepatitis B and C, but the vast majority are unaware or not getting treated.

The evidence reveals a familiar and dismal picture; Albury Wodonga has one of the lowest levels of uptake for the treatment and care for hepatitis B in the Murray primary health network (PHN) region. The figures for hepatitis C care in the region are better, but still 83.5% of people in Wodonga and 75.6% of people living with the condition are not accessing treatment.

A free HEPReady® Regional workshop hosted by Hepatitis Victoria was held at The Cube in Wodonga, on 12 September. The event was attended by health and community workers and garnered the support of the local mayor and council.

Wodonga Mayor Cr Anna Speedie said it was time we got serious about what is a very hidden, but debilitating and deadly disease.



"This workshop is an important step towards raising awareness about viral hepatitis in our town and the region as a whole and taking more concrete action towards its elimination.

"Our health and community workers are the ones who must deal with this issue on the front line, and I am so glad there are so many of you here," said Mayor Speedie.

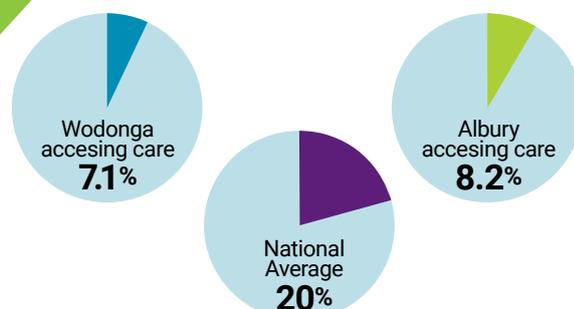
Supported by the Victorian Department of Health and Human Services, the workshop brought a local perspective to the testing, treatment, management, care and prevention of viral hepatitis and overall liver health.

Expert and lived-experience speakers presented on the epidemiology and prevalence of hepatitis B, hepatitis C and liver disease and recent developments in the management of these conditions.

Albury Wodonga viral hepatitis facts

According to the Doherty Institute's National Mapping Project Report 2017, 777 people in Albury and 623 people in Wodonga are living with hepatitis C. Only 16.5% of those in Wodonga and 24.4% in Albury have accessed treatments available through the PBS.

HEP Ready®



Rates of hepatitis B in Albury Wodonga are lower with 344 of people in Albury and 350 in Wodonga living with the condition but only 8.2% in Albury and 7.1% in Wodonga accessing care. The national average of those accessing care is 20%.



Featured podcast

Lewis Stieven-Taylor



“I have come on leaps and bounds in my knowledge...”

Our featured podcast interview is with Lewis, one of our interns working in the Hepatitis B health promotion group.

Hepatitis Victoria has long employed interns giving them a wide variety of work. Like our wonderful volunteers, interns often play a crucial role in our activities, filling skill gaps and bringing to the organisation as much as they will take away in experience. They are involved in research, communications, presentations, report writing, interviewing, translations and much much more.

The fundamental goal, however, is to ensure that Hepatitis Victoria interns get a full and

rounded experience, one that is enjoyable, assists their academic work and helps them with a taste of work life in a ‘real-world’ non-for-profit.

In addition, at the end of their internship, interns have the option and the challenge, of presenting their work – be it research findings or other results- to a Hepatitis Victoria staff meeting.

There is also the option in some cases, of recording a podcast interview with our Communications Manager which gives the intern experience of dealing with a professional communications approach.

Lewis Stieven-Taylor has done both a presentation and a podcast. He is a La Trobe University student studying for a Bachelor of Health Science majoring in rehabilitation counselling. As part of his course, he is required to complete 80-120 hours of a work placement as an intern which he completed focused on health promotion.

Lewis says his internship exceeded his expectations in many different ways.

“For anyone with an interest in health promotion I would highly recommend they look into Hepatitis Victoria because it has been, at every step, fun engaging and extremely educational. I have come on leaps and bounds in my knowledge of health promotion and improved a lot of the related skills that come with it,” says Lewis.

“On top of that, the mentorship here from my supervisor Ali has been phenomenal, he has been at every stage, very open and aware of the tasks he is setting me, making sure I understand what is expected and always available for me to ask questions. He has also tailored the tasks to ensure they are beneficial for my future career, and also to help achieve the academic aims of the university.”

If you have an interest in becoming a Hepatitis Victoria intern, do not hesitate to contact our Community Participation Coordinator Stephanie@hepvic.org.au

Alcohol Related Liver Disease

Hot new resource gives the facts

Alcohol-related Liver Disease (ARLD) occurs when the liver is affected by the excessive drinking of alcohol and can result in a range of changes to the liver, from the development of Fatty Liver Disease (steatosis) to hepatitis (inflammation) or cirrhosis (scarring).

In September, Hepatitis Victoria launched a new resource to help people understand the disease and the potential treatment options.

The resource is a colourful brochure -Alcohol-Related Liver Disease- available in digital and hard copy, that briefly describes the causes, associated risks, treatment options and advice. The brochure also gives guidance on how much alcohol a person is recommended

to drink and what to do in social settings if you are not drinking.

No two people are the same, so working out exactly how much you can drink without damaging your liver is not as simple as you might think, in fact, there is no one-size-fits-all.

The brochure explains that the Australian Alcohol Guidelines recommend not drinking more than 2 standard drinks a day and no more than 4 over several hours. And if your liver is already damaged you should limit your alcohol intake or not drink at all.

When buying alcohol, the number of standard drinks is always shown on the label. If you are drinking by the glass from a licensed venue, check with the server as glass sizes can greatly differ.



What is HepLOGIC?

Fighting the growing burden of liver cancer

Health Promotion Project Officer Isabelle Purcell said the ultimate goal of the HepLOGIC Community Insights research project was to inform health and community workers of the best way to reach and communicate with people living with viral hepatitis.

The acronym HepLOGIC is derived as follows: Hepatitis and Liver cancer in Outcomes in General practice: An Intervention Collaboration.

"HepLOGIC is being done in collaboration with the Doherty Institute, and Hepatitis Victoria's role is to assist with the recruitment and organisation of the community insights research, that's talking to people who have either lived with hepatitis B or hepatitis C, or have been involved in the care and medical care of someone with either of these conditions to find out what strategies and tools would help them engage more effectively in care.

"We also ask them about some of the self-management tools they use and want to use like websites and apps," said Isabelle.

"LOGIC is a nice acronym as our focus is logical; the overall aim is liver cancer prevention and creating tools and strategies that can be put in place to help people manage their condition and reduce as far as possible the growing incidence of liver cancer.

"The incidence of liver cancer is growing fast in Australia and survival rates and knowledge of care and management are quite low compared to other cancers. We also know that viral hepatitis is one of the biggest contributing factors to the condition.

"People living with unmanaged hepatitis B and C have much higher rates of liver cancer than the rest of the population, so being engaged in long-term management and care significantly reduces that risk, so that's why

we are looking at ways to best help people to do that.

"We want to get a representative group of people throughout Victoria, so anyone who is eligible please do the survey," said Isabelle.

**Have hepatitis B?
Ever had hepatitis C?**

We're looking for adults (18 years or older) to take part in our study who:

- are living with hepatitis B or hepatitis C, or
- have previously lived with hepatitis B or hepatitis C, or
- have helped somebody seek care for hepatitis B or hepatitis C.

We want to know about what helps people with hepatitis regularly visit their doctor, and how they manage their health to reduce their risk of liver cancer.

You are invited to participate in an interview, a focus group, or a short online survey.

- Focus group and interview participants will receive a gift card.
- Interpreters are available.
- The survey is available in English, simplified Chinese, Vietnamese, Khmer and Dari.
- Your responses to the study will be anonymous and your participation will be completely confidential.

Questions? Want to get involved?
Contact Isabelle Purcell at Hepatitis Victoria on 03 9385 9112 or research@hepvic.org.au

Visit www.hepvic.org.au/research or scan the QR code for more information, to access the survey, or to register for a focus group or interview.



Ancient hepatitis B

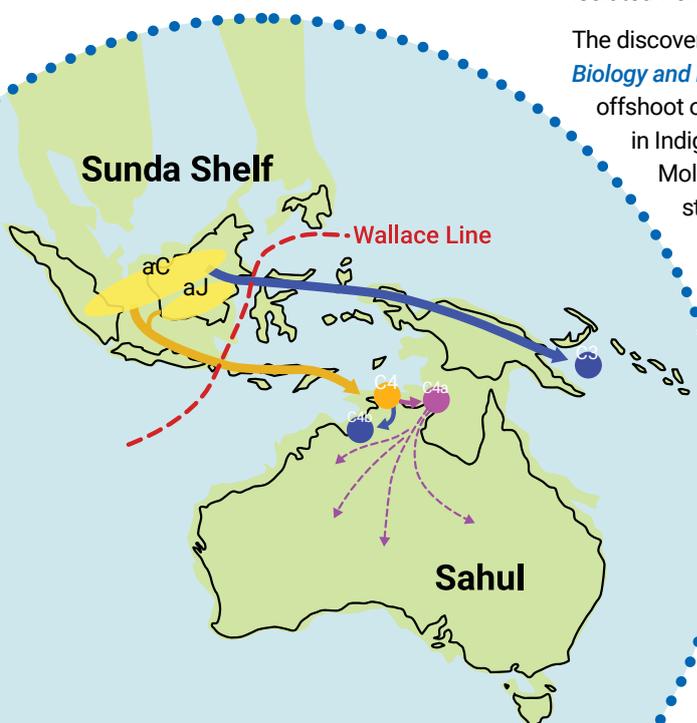
What hepatitis B tells us about the migration of ancient humans

This article was first published on [Pursuit](#). Read the [original article](#).

The viral genetics of Hepatitis B is helping to trace the history and movement of Australia's first people back at least 51 thousand years

By Associate Professor Steven Tong and Dr Margaret Littlejohn, Doherty Institute, University of Melbourne and the Royal Melbourne Hospital

It's now widely accepted that continental Sahul – the combined landmass of Australia, New Guinea and Tasmania – was settled very early in human history, as anatomically modern humans moved from Africa using what archaeologists refer to as the Southern Dispersal Route.



The initial migration route for HBV/C4 into the Tiwi Islands / East Arnhem (orange arrow).

Picture: Dr Lilli Yuen/Doherty

But the exact entry point and timing of this ancient human migration is a question that has plagued scientists and archaeologists.

That is until now. And unexpectedly it's the modern-day hepatitis B virus, known as HBV, providing us with some interesting answers.

In a collaboration between the [Peter Doherty Institute for Infection and Immunity](#) (Doherty Institute) and [Menzies School of Health Research](#), our team of researchers analysed the genome sequences of the virus to deduce that the mainland Aboriginal population separated from other early humans at least 51 thousand years ago and possibly entered the country near the Tiwi Islands in northern Australia, supporting archaeological findings.

This means these humans made their way to our ancient supercontinent, which was eventually split by rising sea levels, and they, together with the virus they carried, were isolated from the rest of the world.

The discovery, published in [Molecular Biology and Evolution](#), was made as an offshoot of the Characterising Hepatitis B in Indigenous Australians through Molecular epidemiology (CHARM) study, which the Menzies began in 2010.

Chronic HBV infection is endemic in the Australian Aboriginal population and is an important cause of morbidity and mortality as a result of liver disease and cancer.

As part of our clinical work in the Northern Territory, we were seeing many Aboriginal patients with Hepatitis B at the Royal Darwin Hospital clinic, often with very advanced disease.

In caring for these patients, we began investigating what type of HBV was causing these infections and collected HBV samples from people living in over 30 communities

across the Northern Territory.

Amazingly, we found that the HBV isolated from these Aboriginal Australians is a unique strain called HBV/C4 - which is not found anywhere else in the world.

Not only was every sample we examined carrying HBV/C4, but when we started looking at the HBV/C4 DNA sequences, we noted that the virus sequences had very strong geographical connections to the communities we visited.

In the same way that human genome sequences are used to trace ancient human migration, we hypothesised that we could use modern-day viral genomes to estimate the movement of the people that have carried these viruses over many generations.

Importantly, HBV is usually transmitted from mother to child around the time of birth, and therefore the ancestry of HBV, is likely to reflect the ancestry of those carrying the virus.

To establish this, our team used cutting-edge evolutionary analyses of the HBV DNA sequences together with archaeological fossil and human genome data.

We found that the precursor of the modern HBV/C4 virus entered Australia more than 51 thousand years ago.

By combining data of evolutionary rates of the virus and the location of communities in which patients now live, our analyses suggested that there was a more than 60 per cent probability that the HBV/C4 virus entered Australia through either the Tiwi Islands or East Arnhem regions in Australia's far north.

HBV/C4 then separated into two groups; one in the northwest region, and the other in the central eastern region of the Northern Territory. Strikingly, the two groups share a similar geographical distribution to the two main divisions of [Aboriginal Australian languages](#) spoken in Australia today.

One of our study's other co-authors, Professor Josh Davis, Senior Principal Research Fellow at Menzies, says the discovery has generated great interest with Aboriginal research partners and patients - raising the profile of Hepatitis B in communities.

Many have asked to find out more about Hepatitis B and how they can be tested and treated.

We also worked with a Senior Aboriginal Health Practitioner, Sarah Bukulatjpi, a co-author on the study, to dispel some of the silence and shame many feel about the virus.

Our study is endorsed by an Indigenous Reference Group made up of members representing six different remote communities

from across the Northern Territory and established by the Menzies Hepatitis B Research Program.

We also ensured that these results were fed back to the main communities where samples came from. In our work, it is best practice to let communities know about the results of any studies they're involved in and to provide opportunities to comment on the findings and their appropriateness to be published.

Our research team is now proceeding with programs to better understand the severity of HBV/C4 infections in Aboriginal Australians, and to drive the elimination of Hepatitis B in the Northern Territory.

Using viral genetics to help tell the story of Australia's first people is a novel approach – and the fact the virus is so old helps to add to the evidence that Aboriginal people have been in Australia for a long, long time.

PODCAST: Ancient secrets revealed



Margaret Littlejohn is a medical scientist at the Victorian Infectious Diseases Reference Laboratory where she does research and diagnostic work into the hepatitis B virus.

Hepatitis Victoria spoke to Margaret in a [short podcast interview](#).

"The viral genetics of Hepatitis B is helping to trace the history and movement of Australia's first people.

We found the precursor of the modern HBV C4 - the strain of hepatitis B that is mostly found in Indigenous Australians - that virus entered Australia 51,000 years ago." Margaret says

During the research "...we sequenced a lot of the viruses from different communities and what we noticed was this amazing geographical clustering...

and from that work we did some computer analysis of the sequences that allowed us to date when the ancestor of that first virus would have arisen... it allowed us to put forward a model of which direction it came into Australia," she says.

Margaret says that endorsement for the research from the Indigenous community has been a critical factor in its success.

"(Our research) has raised the profile of hepatitis B in the communities, which is important because there are a lot of people out there who do not know they have either hepatitis B and C," she says.



[Listen to the Podcast](#)



Australian visa application

New visa change requirements bring hope

A change to Commonwealth Government rules in the way people are assessed for visas is bringing a ray of hope to people living with viral hepatitis. Sadly, the changes came too late for Sidney Vo, a Vietnamese-Australian from Canberra living with hepatitis B, and her 12-year old son Billy (see box story).

Immigration health requirements for Australia are strict. They prevented any migrant with an illness, disease, or intellectual or physical disability from obtaining a visa if it is deemed their condition will be too costly to the Australian taxpayer or put the general public at risk.

From 1 July 2019, significant costs associated with a condition are assessed as those exceeding \$49,000 over ten years. Previously the cost threshold was \$40,000 over a person's lifetime.

"I am delighted to learn these rules have been relaxed, both in terms of the financial cap and the number of years over which the costs can be assessed," said Melanie Eagle CEO of Hepatitis Victoria.

"This is good news for people living with viral hepatitis who want to live and work in Australia as the higher threshold and shorter calculation period should mean that nobody with hepatitis B or C is denied a visa," Melanie said.

Professor Ben Cowie of the Doherty Institute has been a champion of this issue. He welcomed the changes and the practical implications they have for patients.

"I believe this will benefit everyone seeking permanent residency – and particularly benefits those who are entering Australia as students or on work visas seeking to obtain residency, plus those migrating under non-humanitarian streams – i.e. the vast majority of migrants," Professor Cowie said.

In the past Hepatitis Victoria had received worrying reports of people living with chronic viral hepatitis (in particular, hepatitis B) being unsuccessful in applying for permanent and temporary Australian visas. In 2018, the organisation created a resource to support visa applicants "Australian visa applicants and hepatitis".

"We became aware of the issue through discussions with colleagues and directly from enquires to the Hepatitis Infoline," Melanie said.

The previous rules were a clear example of health-based discrimination in the Australian immigration system which disadvantaged those living with viral hepatitis who want to call Australia home.

Still, even with the new changes the application

process is far from perfect and the complex terms and processes of filling applications and collecting supporting documents can be a confusing and exhausting.

Cost of medication

The cost for antiviral medication differs depending on the drug, so it is very important for visa applicants with chronic hepatitis B to be mindful of this and depending on the medication a person may be assessed as exceeding the cost threshold of \$49,000 over the ten-year period.

Hepatitis Victoria has created information in simple terms as well as in a number of languages. These aim to inform and empower people who are living with chronic viral hepatitis as they navigate the application process.

Input was also obtained from an expert migration lawyer people with personal experience of viral hepatitis and applying for Australian visas.

Australian visa applicants and hepatitis is available digitally on the Hepatitis Victoria website in English, Burmese, Vietnamese, Arabic, Chinese and Dari. Hard copies of the English resource are also available by contacting Hepatitis Victoria.



PODCAST

I am standing up not just for myself, but for the community – Sidney Vo

Sidney Vo, a Canberra based woman living with hepatitis B, appealed a Federal Government decision, based on her hepatitis B status, that meant she and her 12-year-old son Billy would have had to have left Australia in October. Sidney and Billy were granted a three-month extension of their visas.

Her case was widely publicised and by the end of September an online petition of support had received over 30,000 signatures.

Sidney's experience galvanised her to speak out. She signed up to become a Hepatitis Victoria HEPspeaker and stepped out of training to record a short Hepatitis Victoria podcast.

Sidney speaks about her situation and in particular the unexpected stigma and discrimination she has experienced since going public.

"It's not fair for people like us to get discriminated against," she says.

"We didn't choose to have this disease - I call it an ailment - it's not serious if we take care of it, and what we need is more people to take the test."

Only 7% of people living with hepatitis B in Australia are getting treated while the other 93% of people "...are hiding maybe because of the stigma and discrimination, they don't want to tell doctors they have hepatitis B.

"I feel like a victim of old-fashioned guidelines..." Sidney says. "It's not only myself, after I went public, I was contacted by people who are now overseas who say they had the same situation but left Australia without talking about it, maybe because of the stigma.

"If everyone chose to pack up and go who would be the one to stand up for us? I am doing this not just for myself but for the hepatitis B community."

Snow Festival

O'liver and volunteers melt hearts and teach minds

On 28 July an enthusiastic group of Hepatitis Victoria Project officers and volunteers braved the cold and descended on Dandenong in Melbourne's South East to run a fun education and information stall at the 2019 Springvale Snow Festival.

'Snow Fest' - a popular annual event organised by the City of Greater Dandenong - attracts more than 60,000 people who are there to have a good time in spite of the cold.

According to the Doherty Institute's *National Mapping Survey*, Melbourne's South East is a high-prevalence hot spot with 14,880 people living with chronic hepatitis B and 11,868 living with chronic hepatitis C. Snow Fest was therefore an ideal event to attend and raise awareness of both conditions and promote better liver health.

Furthermore, hepatitis B and C rates are much higher particularly among some of the many culturally and linguistically diverse communities that call the region and Dandenong their home.

Snow Fest is a vibrant display of movement, colour and gastronomical delights, with dozens of stalls set up all around Springvale Shopping Centre offering delicious food, trendy clothes, games and activities plus information stalls from community organisations. There are fun activities present that attract people of all ages.

It is called 'Snow Fest' for a specific reason, with 80 tonnes of real snow trucked from Mt Buller and multiple ice sculptures created and snow pits for children (and adults) to play in. The weather on the day was cold but sunny, helping the ice stay put, at least for a while.

"The primary purpose of our stall at Snow Fest is to promote liver health and we had the best coincidence of all as the 28th of July is World Hepatitis Day," said Aliasgar Khaki, Project Officer in charge of Hepatitis Victoria's participation at the event.

"Our aim is to raise awareness about viral hepatitis B and C amongst local communities by promoting curiosity and accurate information seeking on viral hepatitis and in so doing challenge the stigma and



discrimination that exists against people living with the condition.

"As a result of the activities at our stall we were able to engage with more than 400 guests who visited our stall ranging from adults to young children," said Aliasgar who described some of the activities.

"After engaging visitors in an active conversation about viral hepatitis we would then ask them to match photos that represent transmissions routes for hepatitis B and C to see if they could match them correctly. It was a great way to initiate talk about the conditions and challenge myths.

"Our friendly mascot 'O'Liver'- was cheerfully hopping around promoting liver health and grabbing attention, so much so children and adults would often stop by and take selfies and photos. This activity allowed us to engage in conversation proactively about viral hepatitis and social media promotion.

"Face painting was one of our little supporters favourite activities as it gave us

an opportunity to engage with parents, talk to them of the risks and how to keep themselves liver healthy," said Aliasgar.

Language specific resources containing information about viral hepatitis were handed out to the visitors and our bilingual volunteers were able to speak to visitors in Chinese, Hindi, Khmer and Vietnamese.

"We are so fortunate to have an outstanding team of volunteers", Aliasgar said.

Visitors made the following comments some of which showed how the stall had dispelled myths;

I didn't know we had a free vaccine for hepatitis B,

I will make sure my family is vaccinated and

I always thought hepatitis is spread by sharing food.

Aliasgar said the wheel of fortune game which he commandeered with real energy and gusto was one of my favourite activities.

“This was because it grabbed the attention of many (adults and children) to come in and spin the wheel and answer questions about viral hepatitis. Once they got it right, they received a prize and to my surprise there was not a single wrong answer!

“It worked as an engagement method that was entertaining and allowed us to spread the message busting the myths that exist around viral hepatitis and providing accurate information. Many people were amazed to hear about the vaccination for hepatitis B that is available,” said Aliasgar.

Planning for events like Snow Fest require a lot of team effort and hard work. Two weeks prior there was an orientation for volunteers prepping them for community engagement by practicing and conducting role play. Volunteers also helped pack resources and work on the activities we would conduct on the day.

Aliasgar said for next time he would like to plan a few more activities for the youth and younger age groups, resources that would grab their attention and help improve health literacy pertaining to viral hepatitis.

Overall, Hepatitis Victoria’s participation at Snow Fest 2019 was a great success but there’s always room for improvement.

“It would be great to have electronic devices available to allow people to use our app and show our video and audio files that they can access from our website,” he said.

“I would like to thank the Dandenong Council for allowing us to participate in this event, and especially our volunteers and staff members who worked around the clock to ensure the event was a success,” said Aliasgar.

Quick Facts

Hepatitis B in Victoria

There are 63,067 people living in Victoria with chronic hepatitis B (CHB). 23.6% are receiving care, either treatment and/or monitoring. 76.4% are not in care or unaware of their condition.

Victoria’s care uptake is better than the national average of 20.2% and just behind NSW with 24.9%.

Hepatitis C in Victoria

There are 48,477 people living in Victoria with chronic hepatitis C (CHC). 28.9% are receiving treatment and 71.9% are not in care or unaware of their condition. Victoria’s care uptake for CHC is better than the national average of 23.6% and slightly worse than SA with 30.3%.

Find out more from the Doherty Institute recently published viral hepatitis *National Mapping Report 2017*.



Calls for more awareness and resources

World Hepatitis Day is one of only 4 diseases-specific days supported by the World Health Organisation. It underscores the urgent need to meet the international target to eliminate viral hepatitis B and C by 2030 as a public health threat.

Victoria too has committed to this target and the Victorian Hepatitis B and C strategies 2016 – 2020 is the foundation for this goal. It requires action to prevent, test and treat, build knowledge and critically to reduce stigma.

“The Andrews Labor Government has set the bar high with an ambitious target to eliminate viral hepatitis in Victoria by 2030,” said Victoria’s Parliamentary Secretary for Health Anthony Carbinis speaking at the *StreetShot* awards ceremony.

“We are getting on with delivering our landmark Victorian Hepatitis B and C Strategies 2016 to 2020 – which is our roadmap for eliminating the disease. It is driving actions to prevent, test, treat, build knowledge and – critically - to reduce stigma.

“There are well over 110,000 people in Victoria living with viral hepatitis and of these over 70 percent are not in care or aware of their condition, which is why the awareness raising activities of Hepatitis Victoria are so important,” he said.

HEP Hero Mayors take a stand for World Hepatitis Day

The latest research from the Doherty Institute shows even in Victoria of the 110,000 people living with viral hepatitis over 70,000 people are unaware they are living with viral hepatitis.

Dandenong Mayor and HEP Hero Cr Roz Blades welcomed the awareness-raising activities around the Day by Hepatitis Victoria at the Snow Festival.

“The prevalence of chronic hepatitis B in Greater Dandenong is one of the highest in Victoria, but sadly, the stigma around hepatitis still prevents people from talking about it or seeking help from their GP,” said the Mayor.

“Viral hepatitis -particularly hepatitis B and C- are potentially life-threatening but the good news is they can be treated – and in the case of hepatitis C it can be cured.

“As a HEP Hero I am honoured to be able to shine a spotlight on this disease and hopefully encourage people living in our city to seek help and support.

“By working together as a community, I strongly believe we can eliminate this disease,” said Mayor Blades.

Mildura Mayor commits to fight viral hepatitis

Cr Simon Clemence, Mayor of Mildura called for more awareness to fight the serious incidence of viral hepatitis in Mildura and the Murray Primary Health Network region.



The Mayor opened a HEPReady® workshop held in the town in June where he spoke to health and community workers about the seriousness of the issue that impacts on about a thousand people in Mildura and about 9000 across the Loddon Mallee.

“Unfortunately, there is a lack of awareness of the condition and a stigma attached to it, and the majority of people who have hepatitis don’t even know or they ignore the fact that they have it. Consequently, some find out too late,” he said.

“Many health professionals believe there is a general ‘apathy’ or lack of understanding about viral hepatitis. Health professionals who attended the Mildura workshop are keen

to learn more about this disease and to get the message out to the community,” Cr Clemence said.

“What you can do as a community member is to ask your doctor for a blood test for hepatitis. Remember, you may have it and not even know. There’s usually little or no charge for the blood test because it’s on the Pharmaceutical Benefit Scheme.

“The Victorian Government wants to eliminate hep B and C by 2030, and to reach this goal more awareness is needed, so they are running workshops like the one I attended. The message was clear, do something positive for your health and get a blood test.”

Brimbank Mayor’s statement

“In the lead up to World Hepatitis Day raising awareness of viral hepatitis is a very important life-saving task,” said Cr Lucinda Congreve, Mayor of Brimbank.

“Our community has one of the highest rates of chronic hepatitis B and C in the country, with nearly 4000 people living with one of these conditions.

“Viral hepatitis - particularly hepatitis B and C - are potentially life-threatening that

could affect the livers of you, your family or friends. The great news is that they can be treated, either totally cured as in the case of hepatitis C, or effectively managed for hepatitis B.

“The biggest problem we have is the stigma and a lack of awareness of the condition, as the vast majority of people who have these conditions in Brimbank have either no knowledge or even ignore when they have got it.

Other liver related health issues, such as Non-Alcoholic Fatty Liver disease

are becoming more prominent every day.

“What you can do is talk to your GP or local community health centre and get a blood test for hepatitis B and hepatitis C. There’s little or no charge to get a test on the Pharmaceutical Benefits Scheme,” said Cr Congreve.

“The Victorian Government is focussed on eliminating hepatitis B and hepatitis C by 2030. To reach this goal more awareness of the liver and its functions is urgently required, so let’s get off our couches and do something positive about it!”



Richard Lim

Pharmacist

I would like to raise awareness and help eradicate viral hepatitis.

I am a pharmacist who provides health seminars to various communities, locally, nationally and internationally.

As a former clinical pharmacist working in a hospital and now working in community

pharmacy, I know that people tend to worry about viral hepatitis.

Why do they worry? Because many people still not understand what viral hepatitis is.

Richard's message to others:

Get treatment and take care of yourself. You'll live a normal life like everyone else.



Simon Clemence

Mayor of Mildura

As Mayor of Mildura I support the eradication of hepatitis from our community.

Elected Mayor of Mildura in 2018, I have been on council since 2016. As a retired Mildura Police Commander, I have worked on crime reduction initiatives, Ice education, family violence and improving Aboriginal youth training and employment - and have a keen interest in helping improve

access to services, and social justice. It's critical that we address viral hepatitis because it's killing people at a rate higher than the road toll and is treatable.

Simon's message to others:

Get a blood test. In most cases it's free. You may have it and not even know, and if you leave it too long it can cause significant damage including cancer.



Sidney Vo

Mother and advocate

After I went public about my case and hepatitis B, I was contacted by people who are now overseas who say they had the same situation as me, but left Australia without talking about it, maybe because of the stigma.

The incredible fact is that only 7% of people living with hepatitis B in Australia are getting treated, while the other 93% of people are hiding, maybe because of the stigma and discrimination, they don't want to tell doctors they have hepatitis B.

But I feel overwhelmed by the love and support I have received from the community and personally, people who didn't know me before have heard about my case and they have signed my petition and sent text messages to encourage me to keep motivated, but also I have experienced a lot of discrimination against people like us, with hepatitis B, I could feel the vibe, and it made me feel a bit down.

Sydney's message to others:

We need more education and more research to challenge the stigma and change people's attitudes. I want to help people understand more by talking about my case and raising awareness.

VIDEO - *Let's talk about Hepatitis C*

A focus on healthcare workers



In September, Hepatitis Victoria released a new anti-stigma video called 'Let's Talk about Hepatitis C'.

The video features both people with lived experience and health care workers familiar with hepatitis C. It highlights the importance of front line healthcare workers being equipped and comfortable to talk about hepatitis C in a range of settings.

Healthcare workers are at the forefront for offering prevention information, testing, and treatment for groups at risk of hepatitis C. Given that in Victoria, less than 29% of people living with hepatitis C have taken up curative treatment, it is vital that information and support is available in all health settings. However, there is a need for this broad workforce to be skilled and able to recognise at-risk populations and confidently talk about blood-borne viruses with their patients/clients in a non-stigmatising way.

"Five wonderful participants were interviewed and filmed for the video, two HEPspeakers Moira and Terry and three healthcare workers, Phoebe a hepatitis C Clinical Nurse Consultant, Jarrod a pharmacist and Leanne working in the alcohol and other drug sector focussing on hepatitis C," said Isabelle Purcell, the Health Promotion Officer managing the project.

Those with lived experience were interviewed about their views of care in the healthcare setting, especially around their positive and negative experiences in regard to exposure. They were also asked what advice they would give to health professionals to make the interaction more positive.

Healthcare workers were asked about why broad awareness is important and what approaches and tips and tricks they have in talking about hepatitis C in an appropriate, positive and non-stigmatising manner.

"Similar themes emerged in the interviews regarding strategies for having these conversations and talking about hep C," Isabelle said.

"Participants spoke about 'normalising the conversation' to ensure that clients were not made to feel singled out, giving clients choice about when and where they wanted to talk and creating a safe space and pathway for people to come back to, re-engage and ask questions."

The aim of the video is to convey to healthcare workers the issues regarding stigma and viral hepatitis and the barrier this can be to patients feeling comfortable initiating communication. It hopes to encourage healthcare staff to continually be aware of viral hepatitis and bring it up in an appropriate manner.

The video also touches on the negative impact a healthcare worker with a lack of understanding and poor knowledge can have on a patient. As Moira says, "...the infection control consultant was misinformed about how the virus is transmitted...it was the only time I have gone away feeling grubby."

Interestingly, the video was filmed entirely in-house by Digital Communications Officer Shaun Knott, allowing flexibility for filming schedules but also giving Hepatitis Victoria the chance to tailor the video to different settings. For example, the video has been embedded into the suite of HEPReady® workforce training modules and there is potential to make a longer length more in-depth video should there be demand. Furthermore, producing the video this way enabled us to capitalise on the work that has been done recently improving our video production skills in house.

"The result is a short and useful video, filled with insights, tips and tricks," Isabelle said.

Download it from the Hepatitis Victoria website now or view on Hepatitis Victoria's social media and share amongst your friends, colleagues and networks.

For further information or to provide feedback contact: isabelle@hepvic.org.au



Download it from the
Hepatitis Victoria website

Adult Migrant English Program

How 'speaking your language' helps project gain momentum

Good Liver has reported on the progress of the hepatitis B mobilisation project in the past. It's innovative and creative work involving the collaboration and involvement of dozens of teachers and hundreds of their students, all with the positive aim of raising awareness about health and hepatitis B while learning English. Here is the latest update.

As part of their induction into Australian life, Adult Migrant English Programme (AMEP) students are supported to do up to 510 hours of English study.

The AMEP is funded by the Federal Government Department of Education and Training and holds classes throughout Melbourne and greater Victoria. Hepatitis Victoria worked with the AMEP throughout 2018-19 conducting dozens of sessions and teaching many hundreds of students. Part of the Hepatitis B Mobilisation project is funded by the Victorian Government's Department of Health and Human Services.

Many of the students attending these courses come from regions of the world such as South-East Asia or Africa, with a high prevalence of hepatitis B.

In addition to studying English, AMEP students have been given liver health information from Hepatitis Victoria as part of an innovative and creative approach to learning that has proved highly successful.

Meg Perrier (Hepatitis B Community Mobilisation Officer) and Aliasgar Khaki (Hepatitis B Community Mobilisation Project Officer) manage the project and their schedule has been very busy one. For example, from November to December 2018, the team taught a total of 540 AMEP students who attended 18 sessions at 14 different locations across the north-west, east and south-east of Melbourne. In Term 1, 2019, they held 24 sessions collaborating with 60 teachers to work with 800 students. For term 3 and 4 the focus has been on extending the reach to rural AMEP providers. Sessions have been conducted in Ballarat and Wonthaggi and upcoming sessions are planned in Morwell, Bendigo and Shepperton. The project has gone from strength to strength.

Students learn the facts about hepatitis B using a clear and colourful text called *Living Well with Hepatitis B*. Fortunately for the Hepatitis Victoria team this text had already been created by Hepatitis Queensland and needed just a little tweaking before it was ideal for our use.

Living Well with Hepatitis B is a collection of four archetypal stories written in very simple English with lots of helpful images, and from that we have also created posters, postcards and other materials which prompt students to consult with their GP or nurse about getting vaccinated against hepatitis B.



"The positive feedback from the AMEP teachers and students shows that our resources are very welcome," said Meg.

"The students who attend the AMEP sessions not only learn English, they also learn about the processes and support services we have in place in Australia, and as such they are a captive and very attentive audience.

"And given that many come from parts of the world with very high prevalence of hepatitis B we thought it would be useful to incorporate our information about the condition into the course," she said.

"The student's willingness to learn and show interest towards their health is a driving

force for us to keep continuing with the sessions. Students often ask us for a few more resources to share with their family and friends to ensure they are able to spread the message on testing and vaccination for hepatitis B," said Aliasgar.

A free hepatitis B vaccine is now available to vulnerable Victorians including people born in countries where hepatitis B is endemic. These countries include China, Philippines, Malaysia, Vietnam, Afghanistan, Thailand, South Korea, Myanmar (Burma), Indonesia, Singapore, Hong Kong, Taiwan and Cambodia. The vaccine is for people who arrived in the last 10 years.

"Even though some of the students have problems with the class because their English level is low, they are very interested in the resource and have lots of questions.

There are misunderstandings about the transmission of the disease which we use for challenging stigma, and students also mention issues about hepatitis from their own experience," he said.

To reinforce the message, Meg and the team decided, that the English text and visuals should be supplemented, where possible, by translations (audio files) in first languages.

"We've been able to go into classes and work with the teachers to expand the reach of the material by having *Living Well with Hepatitis B* translated from English into audio files in 9 languages; Arabic, Burmese, Cantonese, Dari, Khmer, Mandarin, Kiswahili, Urdu and Vietnamese.

"We have received a lot of support from the AMEP teachers, who have been quite active in spreading the word about these resources," said Meg.

"Teachers have asked for us to organise sessions for new groups of students at their institutions as it provides important information on hepatitis B and a valuable resource for students to use," said Aliasgar. If you are an AMEP teacher and would like to get involved contact Meg Perrier Meg@hepvic.org.au or Aliasgar Khaki Ali@hepvic.org.au



What the teachers said:

It was helpful to students with hepatitis B and those who have friends or relatives with it. Also answers many questions some students have who are worried that they may have it (sexual contact & food contact) - ESL teacher, Bendigo TAFE

Important information for those who may be at risk...all people at risk need to be educated about hepatitis, - ESL teacher Swinburne TAFE

I would like to have this workshop twice a year to reach all my students. It's an accessible, kind, non-judgemental, inclusive and useful to all of my students, - AMEP and SEE teacher, Box Hill TAFE

The session entirely met expectations, it was well paced, respectful and tactful (sexual transmission references), well suited to the AMEP clientele, - AMEP and SEE Co-ordinator, Box Hill TAFE

The session provided adequate information for the student group and would be great to have these sessions for future student groups - AMEP Teacher Bass Coast Adult Education, Wonthaggi

Good and interactive presentation that engage the students into learning about health, specifically hepatitis and very relevant for demographics of AMEP students - AMEP Teacher Djerriwarrh Community & Education Services, Ballarat

Post session evaluation:

About 50% of students attending our sessions had not heard about hepatitis before. Post session evaluation revealed that more than 80% of the students were able to answer the questions on transmission of hepatitis B correctly.

Questions on behavioural change revealed that 65.8% of the students would get a hepatitis B test and about 90% will share the information with their family and friends.

Post session evaluation figures show promising numbers on retention of knowledge about transmission of hepatitis B. An example of a direct positive impact for this project is the fact that the students responded in seeking out for a blood test and vaccination against hepatitis B.

What the students said:

I didn't know there was a vaccination for hepatitis B available

Being able to read information in your own language helps provide a better understanding of hepatitis B

It is great to hear that I may be able to get my family and myself vaccinated for hepatitis B

StreetShot

Super creative ideas from youth take the fight to viral hepatitis

2019 was the 9th year of the *StreetShot* program, a unique Hepatitis Victoria initiative that once again saw a full timetable of education sessions offered across Victoria for youth, encouraging them to raise awareness of viral hepatitis. *StreetShot* sessions took place at 32 Victorian institutions with 37 classes delivered engaging 466 young people together with 45 of their teachers and workers.

Sessions took place at secondary colleges, alternative schools, Clontarf programs, Flexible Learning Centres, youth groups, TAFES, VCAL programs and at a Headspace Youth Advisory committee.

Kay Dufty, the Health Promotion Project Officer coordinating the program said it was great to touch base with young people, teachers and group leaders in such diverse



Melanie Eagle and Anthony Carbine



StreetShot winners



Kay Dufty,
Health Promotions Project Officer

settings and locations both in metropolitan and regional centres.

“One of the highlights for me was playing ‘Hepatitis Bingo’ – a game with a focus on transmission, prevention, testing and



treatment of viral hepatitis, where our young players were good sports, and most said they enjoyed the interactivity of the game regardless of whether they won a prize!” Kay said.

Others took part in an alternative interactive activity, ‘What’s the Chance?’ which stimulated discussion about risk factors for viral hepatitis.

The percentage of youth participants who were reported to have been previously aware of viral hepatitis prior to education sessions varied widely in different settings, from 0% across 5 settings to 100% across 4 settings,

with an average of 45% of participants across all settings where percentages were reported.

Several teachers at different locations expressed concern for their students about home-based tattoos and piercings, given associated risks for transmission of viral hepatitis associated.

The *StreetShot* Exhibition and Awards Ceremony was a highlight of the 2019 *StreetShot* Season, held this year for the first time at the St John Street Gallery, at Melbourne Polytechnic, Prahran Campus. The well-attended gathering featured shortlisted images and videos submitted to

the competition, and those in attendance included students and teachers from regional Victoria from as far away as Wodonga.

The event was launched by Anthony Carbine, Victoria’s Parliamentary Secretary for Health, who gave a fulsome speech. Richie Goonan, Manager Community Health at Youth Projects also addressed the gathering. Guests enjoyed refreshments prepared by a chef and students from the Melbourne Polytechnic hospitality course. They were also treated to entertainment from Melbourne Polytechnic music student Evanna Pironnet.

Chinese Health Promotion Coalition

Celebrating its first anniversary

The journey of a thousand miles begins with the first one step - Lao Tzu

On 23 September, the Chinese Health Promotion Coalition (CHPC) celebrated its first anniversary with a well-attended event in Melbourne in the presence of sponsors, supporters and many partner organisations. Hepatitis Victoria President Frank Carlus and CEO Melanie Eagle were also present and spoke to Chinese language media.

The CHPC was founded to help address the urgent public health issue of viral

Australians living with chronic hepatitis B across the state.

In the June edition of Good Liver, we reported at length the activities of the Coalition this year particularly its focus on educating GPs of Chinese heritage in order to increase the number who are HBVS100 community prescribers. At the anniversary event Coalition leaders, president Marion Lau (OAM, JP, HEP Hero) and 1st and 2nd vice president Dr Lilian Iliina and Mary Tan (respectively) reflected on the year's achievements and cast their eyes towards future developments.

"The Chinese-Australian community is 8 times more likely to have chronic hepatitis

workforce applying a sustainable health promotion approach for this community.

"While mental health, family violence and aged care are priority issues for general public, hepatitis B and related liver cancer are the additional frontline health issues for the Chinese-Australian community," she said.

Li Zhang, the president of the Victorian Chapter of the Chinese Community Council of Australia sent a message of support to the CHPC; "(We are) ...proud to support the CHPC in your continued effort of raising awareness and fighting discrimination around hepatitis B in Victoria, working towards eliminating hepatitis B and related liver cancer, and promoting health and wellbeing within the Victorian Chinese community," she wrote.



I want once again to express great appreciation for the support you or your association is providing to Chinese Health Promotion Coalition partners and hope for more Chinese community members and associations being inspired to join our multifaceted partners and participating in the Victorian Chinese Jade Ribbon Movement - Marion Lau OAM, JP, HEP Hero



hepatitis B and related liver cancer among Chinese Australians. At the launch in 2018, the *Victorian Chinese Jade Ribbon Action Statement* was revealed as a starting point of joint efforts to create resources and tools to raise awareness, reduce new infections of hepatitis B and maximise the wellbeing and liver cancer prevention outcomes for Chinese-

B and 6 times more likely to develop preventable liver cancer compared to the Australian-born population," said Marion Lau.

"Barriers to diagnosis, care and treatment of chronic hepatitis B have been built by intergenerational misconceptions, stigma and lack of awareness and support... meanwhile, lack of funding is preventing the existing



Ms Dorothy Yiu of CCCIS



Melanie Eagle and Aurora Tang

Future directions

The Jade Coalition has celebrated one year since its foundation, so what is next for the organisation?

Marion said the short-term aim is for the CHPC to become an independent registered health promotion charity. In this way the organisation partners can work together collaboratively to develop program proposals and succeed in grants-sourcing for the continuous-delivery of Victorian Chinese hepatitis B related health promotion programs and campaigns throughout 2020.



HEP Hero, Marion Lau

Looking forward to the development of the CHPC beyond 2020, Marion said "... let us say in the longer term, beyond 2030 - which is the year the World Health Organisation has a goal to achieve worldwide elimination of viral hepatitis- the CHPC will then identify newly-emerging health issues within the Victorian Chinese community and grow our capacity to secure funding and develop partnerships, with mainstream community health organisations and service providers, to respond to the health concerns and needs of Chinese communities in Victoria."



Bendigo HEPReady® workshop raises interest

The Doherty Institute's National Report 2017, says more than 1400 people in Bendigo are living with hepatitis B and C, but most are unaware or not getting treated for their condition.

Hepatitis Victoria held a HEPReady® workshop on 29 October to highlight the need to raise awareness and tackle the challenge of viral hepatitis in the Bendigo community. The event was well-attended with an interesting mix of people including a community health nurse, forensic mental health worker, refugee health workers and a refugee resettlement volunteer.

"There were a great many good and relevant questions from attendees who were all there with the goal of promoting overall better liver health in the community," said Health Promotion Officer Gayatri Ravisankar who organised the event.

Lived experience speakers Jules Cassidy and Andree Dolby gave excellent presentations which were particularly well received.

Expert speakers presented on the epidemiology and prevalence of hepatitis B, hepatitis C and liver disease and recent developments in the management of these conditions.

Compared to the Murray Primary Health Network (PHN) region, Bendigo is doing better than the rest of the PHN, but the evidence reveals worrying trends; the Murray PHN has the lowest uptake of treatment and care for hepatitis C than any other PHN in Victoria, and while hepatitis B prevalence is low, only 11.8% of people with the condition are accessing treatment.

Supported by the Country Awareness Network, the workshop brought a local perspective to the testing, treatment, management, care and prevention of viral hepatitis and overall liver health.



Jules Cassidy and Andree Dolby



HEPReady workshop in Bendigo

According to the Doherty Institute's National Mapping Project Report 2017, 0.83% (888) of people in Bendigo are living with hepatitis C, and just over a quarter (27.4%) have accessed new treatments for the disease now available through the PBS. This figure for treatment uptake is better than the national average (23.6%), but lower than the average for Victoria (28.9%).

Rates of hepatitis B in Bendigo are lower than for hepatitis C with 0.48% (524) of people living with the condition but only 16.6% of those are accessing care meaning 84.4% are unaware or choosing not to get treated. The national average of people living with hepatitis B accessing care is 20%.

Services listing

Some locations offer multiple services. Service types are shown as numbers, which refer to the following:

Key:

-  **Needle and Syringe Program**
-  **Medical Services including hepatitis and liver Nurses and Doctors**
-  **Counselling Services**
-  **Alcohol and Other Drug (AOD) Services**
-  **Liver Specialists**
-  **Fibroscan**
-  **Bulk-Billing (confirm eligibility)**
-  **Pathology/ Blood Tests**
-  **Private Clinic**

Statewide Support Services

Alfred – HIV: Hepatitis; STI Education & Resource Centre
 Statewide Resource Centre on HIV/AIDS, Hepatitis & Sexually transmissible Infections.
 8 Moubray Street
 Contact: (03) 9076 6993

Cancer Council Victoria – Living with Cancer Education Program
 Contact: (03)13 11 20
Programs across Melbourne and Victoria

Direct Line
 1800 888 236
www.directline.org.au
 24/7 Victorian confidential help line for referral, support, drug counselling & programs

Drug Info
 Level 12, 607 Bourke Street
 Drug Info Line Contact:
 1300 85 85 84
<https://adf.org.au/contact-us/>

Health Complaints Commissioner
 Level 26, 570 Bourke Street
 Contact: 1300 582 113

Carlton Melbourne Sexual Health Centre
 580 Swanston Street,
 Contact: (03) 9341 6200

Needle Syringe Programs
 Find NSPs statewide
<https://bit.ly/31VMvf7>

North Melbourne Harm Reduction Victoria (HRV) and Pharmacotherapy Advocacy Mediation and Support (PAMS)
A Walk in service.
 128 Peel Street, North Melbourne
 Contact: (03) 9329 1500



Southbank Living Positive Victoria
 Suite 1/111 Coventry Street
 Contact: (03) 9863 8733

St Kilda Resourcing Health & Education in the Sex industry (RhED)
 Contact: 1800 458 752
www.sexworker.org.au
sexworker@sexworker.org.au

Victorian AIDS Council
 615 St Kilda Road
 Contact: (03) 9865 6700

North Western PHN:

Altona Meadows IPC Health
 330 Queens Street
 Contact: (03) 8368 3000



Broadmeadows Dianella Community Health
 42–48 Coleraine Street
 Contact: 1300 234 263



Braybrook Cohealth, Braybrook Community Centre
 107–139 Churchill Avenue
 Contact: (03) 9448 5507



Brunswick Merri Health
 11 Glenlyon Road
 Contact: 03 9387 6711



Carlton Melbourne Sexual Health Centre
 580 Swanston Street
 Contact: (03) 9341 6200



Coburg Merri Community Health Services
 93 Bell Street
 Contact: 1300 637 744



Uniting Care Re Gen
 26 Jessie Street
 Contact: (03) 9386 2876



Collingwood Cohealth Innerspace Primary Support Service
 4 Johnston Street
 Contact: (03) 9448 5530



Cohealth
 365 Hoddle Street
 Contact: 03 9448 5528



Craigieburn Anglicare Victoria
 59 Craigieburn Road
 Contact: (03) 9483 2401



Fitzroy Cohealth Fitzroy
 75 Brunswick Street
 Contact: (03) 9411 3555,
 (03) 9448 5531



St Vincent's Hospital
 Victoria Parade
 Contact: (03) 9231 2111



Victorian Aboriginal Health Service
 186 Nicholson Street
 Contact: (03) 9419 3000
 AOD, family and youth specific, connects with services at other sites.



Footscray Health Works
 4–12 Buckley Street
 Contact: (03) 9448 5511



Cohealth
 78 Paisley Street
 Contact: (03) 9448 5502



Gisborne

Macedon Ranges Health

5 Neal Street

Contact: (03) 5428 0300



Kensington

Cohealth

12 Gower Street

Contact: (03) 8378 1600



Laverton

Cohealth

95 Station Road

Contact: (03) 9448 5534



Melbourne

Living Room, Youth Projects

7-9 Hosier Lane

Contact: (03) 9945 2100



Melton

Djerriwarrh Health Services

Yuille Street

Contact: (03) 8746 1100



Moonee Ponds

Dr Froomes

Suite 4, level 1/8 Eddy Street

Contact: (03) 9331 3122

Fax: (03) 9331 3133



Moonee Ponds

Specialist Centre

1003 Mt Alexander Road, Essendon

Contact: 03 9372 0372

Fax: (03) 9372 7517



Northcote

Your Community Health

42 Separation Street

Contact: (03) 8470 1111



Parkville

Royal Melbourne Hospital

300 Grattan Street

Liver Clinic – hepatitis, advanced liver disease and cirrhosis

Contact: (03) 9342 7000

switchboard

Fax: (03) 9342 4234

(outpatients referrals fax)

Infection Diseases Department,

OPD Ninth floor,

Contact: (03) 9342 7212

Fax: (03) 9342 7277



Preston

Preston Anglicare

42 Mary Street

Contact: (03) 8470 9999



Victorian Aboriginal Health Services (VAHS)

238-250 Plenty Road

Contact: (03) 9403 3300

for appointment or drop in

Wednesdays 9-4pm



Your Community Health

300 Bell Street

Contact: (03) 8470 1111

(03) 8470 6710



Reservoir East

Your Community Health

125 Blake Street

Contact: (03) 8470 1111



Richmond

North Richmond Community Health

23 Lennox Street

Contact: (03) 9418 9800



Automated dispensing machine for syringes 24/7

Multicultural Health &

Support Services (HIV, hepatitis and sexually transmissible infections) <http://nrch.com.au>



Automated Dispensing Machine for syringes 24/7

The Epworth Centre

(GP referrals)

Suite 7.6 / 32 Erin Street

Contact: (03) 9428 9908

Fax: (03) 9421 3435



Turning Point Alcohol and Drug Centre

110 Church Street

VIC 3121

Contact: (03) 8413 8413



St. Albans

IPC Health

1 Andrea Street

Contact: (03) 9296 1200



Sunbury

Sunbury Community Health Centre

12-28 Macedon Street

Contact: (03) 9744 4455



Werribee

Anglicare Victoria

2 Market Road

Contact: (03) 9731 2500

All referrals via Odyssey House:

1800 700 514



Eastern Melbourne PHN:

Bayswater

Anglicare Victoria

666 Mountain Highway

Contact: (03) 9721 3688

www.anglicarevic.org.au

Shore Intake Contact:

1300 00 7873



Box Hill

CLEAR Liver Care

Carrington/Eastern Health

43 Carrington Road

Contact: (03) 8843 2317

Fax: (03) 9890 2220



Box Hill Hospital

8 Arnold Street

Contact: (03) 9895 3352

(Specialist Outpatient Clinics)

1300 342 255 (General)



Caulfield South

Caulfield Endoscopy (Private)

544 Hawthorn Road

Contact: (03) 9595 6666



East Melbourne

Melbourne GI & Endoscopy

130-132 Grey Street

Contact: (03) 9417 5306

Fax: (03) 8677 9625



Eltham

Healthability

917 Main Road

Contact: (03) 9430 9100



Ferntree Gully

EACH Ltd

1063 Burwood Highway

Contact: 1300 003 224



Heidelberg

Austin Liver Clinic

145 Studley Road

Contact: (03) 9496 2787

Fax: (03) 9496 7232



Northern Hospital

185 Cooper Street

Contact: (03) 8405 8000

Fax: (03) 8405 8761



Hawthorn

Wellbeing at Swinburne University Health Services

George Swinburne Building, Level 4,
34 Wakefield Street, Hawthorn
Contact: (03) 9214 8483



Heidelberg

Austin Liver Clinic

145 Studley Road
Contact: (03) 9496 2787
Fax: (03) 9496 7232



Rapid access clinic

Northern Hospital

185 Cooper Street
Contact (03) 8405 8000
Fax: (03) 9495 7232



Heidelberg West

Banyule Community Health Service – Needle Syringe Program

21 Alamein Road
Contact: (03) 9450 2000



Hepatitis C Rapid Access to Treatment Clinic

Contact: 0481 909 741
Fax: (03) 9496 2732



Lilydale

Inspiro Community Health

17 Clarke Street
Contact: (03) 9738 8801



Nunawading

Nunawading Clinic

Dr. D Ross
176 Springvale Road
Contact: (03) 9878 9191



Ringwood

EACH Ltd

46 Warrandyte Road
Contact: 1300 003 224



Ringwood East

EACH Ltd

75 Patterson Street
Contact: (03) 1300 003 224



South Eastern Melbourne PHN:

Moorabin

Moorabin Specialist Centre

873 Centre Road
Contact: (03) 9579 0100



Clayton

Monash Health

Monash Medical Centre

246 Clayton Road
Contact: (03) 9594 6666
Fax: (03) 9594 6111
GP referrals via Monash Health
in Clayton (03 9594 6250)



Cranbourne

Monash Health Community

140–154 Sladen Street
Contact: (03) 5990 6789



Dandenong

Community Access Partnership (CAP)

84 Foster Street
Contact: (03) 9792 7630, or
1800 642 287 after 6:30pm



Frankston

Anglicare Victoria

Level 2 / 60-64 Wells Street
Contact: (03) 9781 6700
www.anglicarevic.org.au



Hastings

Hastings Community Health Service

185 High Street
Contact: (03) 5971 9100



Pakenham

Monash Health Community

Henty Way (top Of the Hill)
Contact: (03) 5941 0500



Prahran

Star Health

240 Malvern Road
Contact: (03) 9525 1300



Alfred Hospital Infectious Diseases Unit

Contact: (03) 9076 6081
99 Commercial Road
Hepatitis Clinic

Contact (03) 9076 5276



Rosebud

Southern Peninsula Community Support and Information Centre

878 Point Nepean Road
Contact: (03) 5986 1285



South Melbourne

Star Health Group

341 Coventry Street
Contact: (03) 9525 1300



Wednesdays 8.30 -12 pm

Springvale

Monash Health Community

55 Buckingham Avenue
Contact: (03) 8558 9000
Referrals and counselling
Contact: 1300 342 273

Liver Clinic (Wednesdays)

Fax (03) 9594 6250



St. Kilda

Star Health

18 Mitford Street
Contact: (03) 9525 1300



Star Health

22-28 Fitzroy Street
Contact: (03) 9525 1300



Salvation Army Health Information Exchange

29 Grey Street
Contact: (03) 9536 7703



Access Health

31 Grey Street
Contact: (03) 9076 6081



FIRST STEP

42 Carlisle St, St Kilda, 3182
Contact: (03) 9537 3177.



Gippsland PHN:

Bairnsdale

Advantage HealthPoint

46-56 Nicholson Street,
Contact: (03) 5152 3500



Churchill

Latrobe Community Health Service

68 Macleod Street
Contact: 1800 242 696



Lakes Entrance

Gippsland Lakes Community Health Centre

18–28 Jemmeson Street,
Contact: (03) 5155 8300



Moe
Latrobe Community Health Service

42–44 Fowler Street
Contact: 1800 242 696



Leongatha
Gippsland Southern Health Services

Koonwarra Road
Contact: (03) 5667 5555



Morwell
Latrobe Community Health Services

81–87 Buckley Street
Contact: 1800 242 696



Nowa Nowa
Nowa Nowa Community Health

6 Bridge Street
Contact: (03) 5155 7294



Orbost
Orbost Regional Health
104–107 Boundary Road
Contact: (03) 5154 6666



Rosedale
Rosedale Community Health Centre

2–8 Cansick Street
Contact: (03) 5199 2333



Sale
Central Gippsland Health Service Division of Community Care

Palmerston Street
Contact: (03) 51438800
52 McArthur Street
Contact: 1800 242 696



San Remo
Bass Coast Community Services

1 Back Beach Road
Contact: (03) 5671 9200



Traralgon
Latrobe Community Health Services

Cnr. Princes Highway and Seymour Street
Contact: 1800 242 696



Warragul
West Gippsland Healthcare Group Community Services Division

31–35 Gladstone Street
Contact: (03) 5624 3500



Wonthaggi
Bass Coast Health – Needle Syringe Program

235–237 Graham Street
Contact: (03) 5671 3333



Yarram
Yarram and District Health Service

50 Bland Street, Yarram
Contact: (03) 5182 0270



Western Victoria PHN:

Apollo Bay
Apollo Bay Hospital
75 McLachlan Street
Contact: (03) 5237 8500



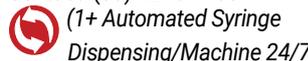
Belmont
Barwon Health
1–17 Reynolds Road
Contact: (03) 4215 6800



Colac
Colac Area Health
2–28 Connor Street, Colac
Contact: (03) 5232 5100



Corio
Corio Community Health
2 Gellibrand Street
Contact: (03) 4215 7100
(1+ Automated Syringe Dispensing/Machine 24/7)



Drysdale
Bellarine Community Health
21–23 Palmerstone Street
Contact: (03) 5251 4640



Geelong North
Wathaurong Aboriginal Service
62 Morgan Street
Contact: (03) 5277 0044



Horsham
Wimmera Health Care Group
83 Baillie Street
Contact: (03) 5381 9111



Lucas
Ballarat Community Health Centre & NSP
12 Lilburne Street
Contact: (03) 5338 4500



Maryborough
Maryborough District Health Service

75–87 Clarendon Street
Contact: (03) 5461 0400



Portarlington
Bellarine Community Health
39 Fenwick Street
Contact: (03) 5258 6140



Portland
Portland District Health
141-151 Bentinck Street
Contact: (03) 5521 0333



Sebastopol
Ballarat Community Health Centre
260 Vickers Street
Contact: (03) 5338 4585



Stawell
Grampians Community Health
8–22 Patrick Street
Contact: (03) 5358 7400



Torquay
Torquay Community Health Centre & NSP
100 Surf Coast Highway
Contact: (03) 4215 7800



Warrnambool
Brophy Family and Youth Services
210 Timor Street
Contact: (03) 5561 8888
For persons aged 12 –25



Wendouree
Ballarat Community Health Centre
10 Learmonth Road
Contact: 5338 4585



Murray North Western PHN:

Albury
Albury Community Health
596 Smollett Street
Contact: (02) 6058 1800



Services available to people in NE Victoria

Bendigo

Bendigo Community Health Service
171 Hargreaves Street Bendigo
Contact: (03) 5448 1200



Castlemaine

Castlemaine District Community Health

13 Mostyn Street
Contact: (03) 5479 1000



Eaglehawk

Bendigo Community Health Services

3 Seymour Street
Contact: (03) 5406 1200



Echuca

Echuca Regional Health

226 Service Street
Contact: (03) 5485 5000



Kangaroo Flat

Bendigo Community Health Services

13 Helm Street
Contact: (03) 5430 1200



Kyneton

Cobaw Community Health Service

47 High Street
Contact: (03) 5421 1666



Mildura

Sunraysia Community Health Service

137 Thirteenth Street
Contact: (03) 5022 5444



Murray North Eastern PHN:

Alexandra

Alexandra Community Health Services

12 Cooper Street
Contact: (03) 5772 0900



Benalla

Benalla Health

45/63 Coster Street
Contact: (03) 5761 4222



Cobram

Cobram District Health

24-32 Broadway Street
Contact: (03) 5871 0777



Euroa

Euroa Health

36 Kennedy Street
Contact: (03) 5795 0200



Mansfield

Mansfield District Hospital

53 Hihett Street
Contact: (03) 5775 8800



Myrtleford

Gateway Health

32 Smith Street
Contact: (03) 5731 3500



Shepparton

Primary Care Connect

399 Wyndham Street
Contact: (03) 5823 3200



Wangaratta

Gateway Health

45-47 Mackay Street
Contact: (03) 5723 2000



Wodonga

Gateway Health

155 High Street
Contact: (02) 6022 8888



Yea

Yea and District Memorial Hospital

45 Station Street
Contact: (03) 5736 0400



Hepatitis Infoline

Call the Hepatitis Infoline to talk about:

Information: We can answer questions and mail information to you.

Support: We can provide support for a range of issues and concerns.

Referral: We can refer you to other organisations and services.

The **Hepatitis Infoline** is a free and confidential service for all Victorians.

Hours

Monday to Friday 9.00am – 5.00pm



English

Hepatitis Information Line. If you need an interpreter, please first call the Translating and Interpreting Service on 131 450.

Vietnamese

Đường dây Hướng dẫn Bệnh Viêm Gan. Nếu cần thông dịch viên, trước tiên xin quý vị vui lòng gọi Sở Thông ngôn và Phiên dịch số 131 450.

Farsi

خط اطلاعات هپاتیت. اگر نیاز به مترجم حضوری دارید، لطفاً با مرکز خدمات ترجمه کتبی و حضوری با شماره 131 450 تماس بگیرید.

Amharic

የወጥ በሽታ መረጃ ማቅረቢያ መስመር። አስተርጓሚ ካስፈለግን፤ አባክዎ መጽሐፍ ለትርጉምና አስተርጓሚ አገልግሎት በስልክ 131 450 አድርገው ይደውሉ።

Arabic

خط المعلومات عن التهاب الكبد. إذا كنت بحاجة لخدمات مترجم، الرجاء الاتصال أولاً بخدمة الترجمة الفورية والتحريرية على الرقم 131 450.

Chinese

肝炎信息专线。如需传译员协助，请先致电翻译服务处电话131 450。

Khmer

ខ្សែទូរស័ព្ទផ្តល់ព័ត៌មានអំពីជំងឺរលាកថ្លើម។ ប្រសិនបើលោកអ្នកត្រូវការអ្នកបកប្រែភាសាជាដំបូង សូមទូរស័ព្ទទៅកិច្ចប្រឹកប្រែភាសាសរសេរ និងនិយាយ លេខ 131 450។

hepatitisinfoline

1800 703 003

Your donations make a difference!

Your donations help us to provide information, services, advocacy, resources and support for people affected by viral hepatitis, health professionals and members of the general public.

All donations of \$2 or more are tax deductible.

If you do not receive your receipt promptly, then please call Hepatitis Victoria on 03 9380 4644, or email: admin@hepvic.org.au

I would like to donate the following amount:

\$20 \$50 \$100 \$_____ (Your choice)

I have enclosed my cheque/money order/cash or

Please debit my credit card for \$_____

Type of card: Visa/MasterCard _____

Name on Card _____

Card number:

Expiry Date _____

Please send my receipt to:

Name _____

Address _____

Suburb/City _____

Postcode _____ State _____

Send to: Hepatitis Victoria
Suite 5, 200 Sydney Road
Brunswick, Victoria 3056