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For Immediate Release

Being Proactive: Ending New HIV Infections in Nova Scotia

HALIFAX, NS, December 1, 2022 – Organizations representing 2SLGBTQIA+, Indigenous, and other at-risk communities are calling on the Province of Nova Scotia to address the long-standing lack of adequate and appropriate HIV and broader STI testing in Nova Scotia.

On the heels of International HIV Testing Week and AIDS Awareness Week, and as we approach Indigenous AIDS Awareness Week and World AIDS Day on Dec 1st, these organizations are clear that the need for more proactive approaches to sexual health are crucial.

For the second time in four years, Nova Scotia is responding to an increase in new HIV diagnoses. A decrease in the already inadequate HIV/STI testing options over the past 2+ years is likely a prime contributing factor.

“That decrease only magnifies the inadequate testing capacity we had before COVID complicated things” says Chris Aucoin, Executive Director of the AIDS Coalition of Nova Scotia (ACNS).

“The idea of only responding to increases in case numbers – and not focusing efforts on eliminating new diagnoses altogether – is an inadequate response,” says Julie Thomas, Executive Director at Healing Our Nations. Poor testing infrastructure is also a major factor, as testing is often difficult to access and is often not culturally appropriate.

“The surest way to prevent future HIV infections – or any STI – is to reach the undiagnosed” says Stella Samuels, Executive Director of Sexual Health Nova Scotia (SHNS). “Only then can folks be connected to treatment. HIV, if fully controlled, is 100% impossible to pass on to a sexual partner.”

For all the above reasons and more ACNS, SHNS, and Healing Our Nations are calling on the Health Minister to:

- **immediately increase funding to community-based sexual health clinics** - to increase the number of clinics throughout Nova Scotia, expand hours at each location, and adequately compensate the required trained testing staff to ensure staff retention;
- **work with Indigenous, Black, and other communities of colour, and with 2SLGBTQIA+ communities to address the lack of culturally competent sexual health access;**
- **add rapid Point of Care Testing HIV testing** to the options available in Nova Scotia;
- **make the HIV self-test available free-of-charge** to populations at-risk in Nova Scotia; and;
- **provide universal coverage for Pre-Exposure Prophylaxis (PrEP)** for populations at-risk for HIV.

The tools to end new HIV infections in Nova Scotia already exist... but they are not being made use of. **That needs to change!**

Chris Aucoin says the AIDS Coalition has been recommending that all sexually active Nova Scotians have a full STI screen annually. Julie Thomas underscores reasons why: “What many don’t realize is that you can have an STI and have no symptoms! That STI will not go away on its own and you stay infectious if you remain untreated.”

“STIs can be cured or well controlled if caught early” says Stella Samuels. “Several can do real and permanent harm if left untreated for too long – especially HIV and syphilis. As well, untreated chlamydia and gonorrhea raise the risk of chronic pelvic pain and life-threatening ectopic pregnancy in people who can get pregnant.”

If you do not have access to an appropriately informed primary care provider or a local sexual health clinic, you do not have meaningful access to HIV/STI testing in Nova Scotia. “The Halifax Sexual Health Centre is perpetually working above and beyond their capacity” says Stella Samuels, “because a lack of adequate funding means a lack of capacity to meet existing demand. The level of service required to adequately address actual STI testing needs is not being met by the Province.”

Rapid Point of Care Testing (POCT) has been approved in Canada for 17 years. This faster, easier and much-preferred testing option is unavailable in Nova Scotia. “POCT requires only one appointment and you get results back in a minute,” says Julie Thomas. Regular HIV testing in Nova Scotia currently requires two appointments and processing by the provincial lab; this is not the case for POCT testing.

Two years ago, Health Canada approved that same POCT rapid technology for individual self-test use. Unfortunately, these tests are expensive to obtain for individuals and organizations

seeking to use them. “Those populations who are most at risk for HIV infection are also populations who are more likely to be economically challenged” says Chris Aucoin.

Provincial coverage of HIV self-testing kits would make testing more accessible for all Nova Scotians. “Making the self-test available for free in NS would fill a lot of gaps” says Stella Samuels, “and eliminate a barrier to those who would most benefit from having access to HIV testing.”

Some organizations are working to meet this need by becoming part of larger national projects. However, they are not without their limitations. “ACNS and HON are distribution partners with the federal *Community Link* HIV self-test program that launches this week and will run for 4 months” says Chris Aucoin. “So, for a few months at least, Nova Scotians will be able to get free HIV self-tests... but when that’s over, then what?”

The fact that many new HIV infections are the result of contact with someone who is unaware that they have contracted HIV is a major reason for further testing access to be top of mind. “Until the person with HIV is put on treatment, that person remains highly infectious” says Stella Samuels. “However, treatment will not start until they get tested, so more and better testing options are crucial.” With early diagnosis through accessible testing and connection to treatment, the vast majority of people living with HIV will no longer get AIDS and most will have a typical life-expectancy.

HON’s Julie Thomas wants people with HIV to be able to get connected to care sooner rather than later, both for their own health and for that of those they may have sexual contact without knowing their status. “If someone with HIV is on effective treatment and maintains a very low or undetectable viral load, that person is medically unable to be the source of infection to others via sexual contact.”

“With ‘Treatment as Prevention’ there’s zero possibility of being the source of HIV infection through sexual contact” says Stella Samuels. “So as a prevention tool it’s 100% effective.”

The science behind Pre-Exposure Prophylaxis for HIV is also clear. Taken daily, PrEP is up to 98% effective in the prevention of sexual transmission of HIV. “Beyond the research studies, we’re seeing major impacts in the real world too” says Chris Aucoin. “Jurisdictions where PrEP has been made easily accessible to high risk populations have seen dramatic drops in HIV infection rates by as much as 40% in a single year.”

Substantial reductions in HIV rates attributed to PrEP are already well-documented in San Francisco, London, and New South Wales. “We’re pleased that PrEP has made it onto the provincial formulary four years ago” says Stella Samuels. “However, we now need to see it made available to those who would most benefit from it; Nova Scotia’s Pharmacare coverage will not do that in its current form.”

Provincial healthcare access is compromised by a lack of culturally competent service provision. This is likely more pronounced when dealing with sexual health because of the inherent intimacy of being examined and differing cultural and social mores about sexuality.

Cultural competency training regarding working with members of BIPOC and 2SLGBTQIA+ communities for all healthcare providers is sorely overdue. This training should be mandatory and should be informed by first-voice consultations with these communities.

“Prevention is always cheaper than treatment” says Julie Thomas. “It’s time for Nova Scotia to be proactive and provide better opportunities for STI testing.”

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