

# Intergovernmental Committee on HIV/AIDS, Hepatitis C and Related Diseases

## History

The Intergovernmental Committee on HIV/AIDS, Hepatitis C and Related Diseases (IGCAHRD) has passed through three incarnations since its original form, the Intergovernmental Committee on AIDS (IGCA). The original committee was established in 1987 to respond to the emerging HIV epidemic. In 1997, IGCA decided to adopt related diseases such as sexually transmissible infections, invite community sector representation and to actively strengthen its links with surveillance and communicable diseases networks. IGCA became the Intergovernmental Committee on AIDS and Related Diseases (IGCARD). In 2000, given the emerging hepatitis C epidemic, IGCARD decided to specifically adopt hepatitis C as part of its mandate, and became IGCAHRD. This followed a similar change to the Australian National Council on AIDS, Hepatitis C and Related Diseases (ANCAHRD).

## Role

IGCAHRD's current terms of reference were updated at the end of 2001. Its primary role is to act as a key advisory body to the National Public Health Partnership through the Communicable Diseases Network Australia (CDNA) on policy, program, social issues and activities related to HIV/AIDS, hepatitis C, sexually transmissible infections and related diseases. The committee comprises representatives from states, territories, the Commonwealth and the community sector. It aims to:

- contribute to the development and implementation of Australia's policies and programs on HIV/AIDS, hepatitis C and related diseases through jurisdictional and sector collaboration;
- ensure that national, state and territory policies reflect and address the personal, social and community aspects of HIV/AIDS, hepatitis C, sexually transmitted infections, and related diseases;
- contribute to the monitoring and surveillance of HIV/AIDS, hepatitis C and related diseases;
- provide a national network of expertise on HIV/AIDS, hepatitis C and related diseases; and
- foster the development of effective collaborative responses to HIV/AIDS, hepatitis C and related diseases.

IGCAHRD maintains links to other key committees such as the Australian National Council on AIDS, Hepatitis C and Related Diseases and the Communicable Diseases Network Australia and its other sub-committees, to ensure that effective communication is maintained on issues relevant to the sector.

## Membership

Membership of IGCAHRD currently comprises:

- a Chairperson, nominated by IGCAHRD, endorsed by the CDNA, and appointed for a period of 2 years;
- one representative for both HIV/AIDS and hepatitis C matters from each State and Territory department of health;
- one HIV/AIDS and one hepatitis C representative from the Commonwealth Department of Health and Ageing, and one representative from the Office of Aboriginal and Torres Strait Islander Health, Department of Health and Ageing;
- one representative each from the Papua New Guinea National AIDS council and the New Zealand Ministry of Health;
- one representative from an appropriate national hepatitis C peak body (e.g. the Australian Hepatitis Council);
- one representative from an appropriate national peak body on injecting drug use (e.g. the Australian Injecting and Illicit Drug Users' League);
- one representative from an appropriate national peak body representing people living with HIV/AIDS (e.g. the National Association of People Living with HIV/AIDS); and

- the Chair of the Australian National Council on AIDS, Hepatitis C and Related Diseases as an ex-officio member.

In addition, the IGCAHRD may appoint subcommittees comprising either members of the IGCAHRD or other persons nominated by the IGCAHRD, to address particular issues.

Currently, three subcommittees report to IGCAHRD:

- the National HIV Surveillance Committee;
- the Viral Hepatitis Surveillance Committee; and
- the Sexually Transmitted Infections Surveillance Committee.

The Chair of IGCAHRD is Dr Linda Selvey, Manager, Communicable Diseases Unit, Queensland Health. The Deputy Chair is Ms Kim Petersen, Manager, HIV/Hepatitis C and Related Programs, South Australian Department of Human Services.

### **Current issues**

Issues currently on IGCAHRD's agenda include:

- injecting drug use and transmission of bloodborne viruses, including in Indigenous communities – IGCAHRD has established an Indigenous Injecting Drug Use working group;
- prisoner health and bloodborne virus transmission issues in correctional settings;
- growing numbers of people seeking HIV treatment who are not eligible for Medicare coverage;

- evidence of increasing incidence of unprotected anal intercourse in Australia and implications for HIV transmission;
- cross border travel into Australia, particularly into northern Australia, of HIV-positive foreign nationals, often unaware of their HIV status;
- the national World AIDS Day campaign;
- development of a National Sexually Transmissible Infections Strategy; and
- collaboration with and links to ANCHARD and its committees.

For further information, please contact the IGCAHRD Secretary:

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