

# WWW\_20200909\_Lockdown\_Update

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## SPEAKERS

Cal Hawk, Michael Whelan, Joseph Tesoriero, Show Theme, Simon Ruth



Show Theme 00:04

\* This is Well Well Well. Sex, health, and well being in our LGBTI communities presented by JOY sponsor Thorne Harbour Health \*



Cal Hawk 00:16

This is Well Well Well here on JOY 94.9 presented to you each and every week by Thorne Harbour Health. Here on Well Well Well we delve into the issues impacting and interwoven into the health and well being of our gender, sex and sexually diverse communities I'm Cal Hawk... and who the heck are you?



Michael Whelan 00:32

Oh, well, I am the return of Michael Whelan. How are you? Cal? It's good to be back



Cal Hawk 00:38

The Spectre formerly known as Michael Whelan...



Michael Whelan 00:43

Can I be the 'Silk Spectre' formerly known as Michael Whelan?



Cal Hawk 00:46

Yeah, sure. Yeah. All right. Okay. Well, first things first, how's your mouth?



Michael Whelan 00:52

Haven't had any complaints!



Cal Hawk 00:53

Oh, honey.



Michael Whelan 00:55

No, yes. Um, for those who weren't listening to our last couple of weeks, where I wasn't here I \*just\* as a 33 year old human being had my wisdom teeth removed, which should have been removed when I was much, much much younger. So, yes, I'm feeling much better.



Cal Hawk 01:10

There you go. Very good. Well, it's wonderful to have you back. And you know, and this week we're you know, there's been changes we haven't roadmap out of lockdown.



Michael Whelan 01:23

Also, it's - we'll get into this - but it's very rude to call it a road map when no one can go anywhere.



Cal Hawk 01:28

Yeah, exactly. Yeah. Driving what you're not allowed to do right now.



Michael Whelan 01:32

Yeah. Not allowed to do that.



Cal Hawk 01:33

Yeah, exactly. Um, so of course, Premier Daniel Andrews has released Victoria's roadmap to reopening which you know, is staged out and relies heavily on you know, the results of getting these numbers down. We are seeing things decrease. You know, it is jumping around, but we're also seeing a lot of people... and I think you and I were talking about this before the show, you know we are hitting a wall. I consider myself a pretty resilient person. But I have noticed on some things, you know, getting a little frustrated, I'm not out there protesting at the shrine of remembrance and then you know, jumping into Albert Park lake to evade the police. I think my favorite tweet that I saw was somebody said that they jumped into the lake to avoid the police because they thought that they would be under the jurisdiction of maritime law,



Michael Whelan 02:19

Maritime law. International waters.



Cal Hawk 02:21

Exactly! In the middle of Albert Park Lake. So we are going to delve into that. We're gonna have CEO of Thorne Harbour Health Simon Ruth joining us to talk about that from you know, the perspective of, you know, LGBTI community health organization, what this means. And also it's great to have you back, Michael, because we're going to be talking PrEP. You you know, a thing or two about that.



Michael Whelan 02:41

I know a thing or two.



Cal Hawk 02:43

But, a \$1 million milestone was achieved in just under two years. Prepped Smart and Healthy, which is a program that has kind of come out of a chain of pharmacies here. We're going to be joined by its proprietor, Joseph Tesoriero, who has basically helped you know, Thousands of people from what I understand I get PrEP by having a million dollars worth of subsidies that have helped people make PrEP more accessible.



Michael Whelan 03:09

Exactly. Because for anyone familiar with the, you know, the VicPrEP studies and the PREPX studies here in Victoria, people got very cheap PrEP, you got your PReP for one, one PBS payment for three months, whereas now that it's actually listed on the PBS that you're meant to pay every single month so dramatically the price went up three times what it was on those studies. So yeah, Joseph's program and charity Prepped Smart and Healthy is helping to kind of alleviate some of that pressure. And we'll get into where that kind of funding is coming from and how they're supporting that on the program.



Cal Hawk 03:44

And now joining us, Simon Ruth, CEO of Thorne Harbour Health. Welcome back.



Simon Ruth 03:50

G'Day, Cal. G'Day, Michael. Thanks for having me.



Cal Hawk 03:53

Now, the big announcement, of course last weekend was that the Premier has announced a roadmap out of lockdown. While we've seen businesses saying it's not fast enough. We have heard some people saying that, you know, it's where we need to be. Where...what is your perspective? As you know, the leader of a community health organisation?



Simon Ruth 04:10

Um, look, I guess it was disappointing for everybody. We, you know, it's been a long time in Victoria. We've been in one form of lockdown or another in a state of emergency since mid March. You know, nobody wanted to say the dates such as the end of November as being a possible date for COVID Normal. But, you know, that's life and the whole point of this and it's, you know, the epidemiology and the modeling is created by much more intelligent people than us. And the whole point of this is to ensure that we don't have to go through a rolling phase of further lockdowns in the future. We've already seen in Victoria what happens when you open up too quickly, and you take your foot off the pedal a bit, and we were seeing that all across America and Europe right now. And the point of this is about saving lives. So You know, it's unfortunate that this is the way but, you know, we put our faith in, in the experts that are giving this advice. You know, and there are people arguing with it and saying it could be done quicker. And the Chief Health Officer's even suggested himself that if things improve quickly, they might be able to change some of the dates. But at this stage, we all have to continue to work together to get through this.



Michael Whelan 05:23

Just on that, Simon, we do have stage four locked down here in Metro Melbourne for a little bit longer. How do you think are LGBTI and people living with HIV communities are coping throughout all of this?



Simon Ruth 05:33

Um, look it's been stressful for everybody. Even our own 'pulse' surveys and the two of you as staff would know that we've done internal surveys of staff and our own surveys are showing that people aren't doing as well as they were three or four months ago, when we were in the first lockdown. The end was in sight. You know, everyone was able to push through it and as it's dragged on and dragged on, it just gets incredibly draining. You know, and it affects everybody differently. People who live alone and who are working from home are probably more effected than a lot of others. LGBTI people, particularly... particularly people who were looking at coming out, had made plans often have had to put all that on pause. And they possibly live in hostile environments, they might have had to move home with their parents. There's a lot of people who've been unemployed now since mid-March. A lot of people in retail and in hospitality and in personal training and those sorts of areas... in the airlines. And we have a lot of our community members work in those fields. So it is draining on everybody. But that said, you know, people are banding together and they are trying their best. The lockdown is still supported by something like 70% of Victorians, because we know we have to get through that. So it's a it's a complicated time and I think everybody's doing differently and we would encourage people to take care of themselves and to call us if they need assistance.



Cal Hawk 07:03

Now, alongside that Thorne Harbour's advice has been at the start of this was no casual sex. You know, six months later how do we think the community has managed with that messaging?



07:14

Um, yes, it was the first time in 37 years that we'd said 'don't have sex'. And little did we know that it was going to last for this long. It has been an incredibly long break for some people. And, you know, we... the messaging still is 'no casual sex'. And in fact, the laws now back that up. In some of the early stages, you know, we were talking to people that casual sex saying you shouldn't be doing it, it's likely to spread the virus. It's against the principle of what we're trying to achieve. The current law says you should not be doing those sorts

of things with strangers and having them at home. You know, and you should be trying to minimize your engagement with other people. That said, you know, not everyone's been able to achieve that. And that's understandable. If people could put off sex, we wouldn't have had the AIDS epidemic in the first place. So we know, you know, we know that this is something that people are having struggling with. And we have had it reported to us by a couple of community members that they believe that they contracted COVID during casual sex. So we'd encourage people to think about if you can't hold off longer, we encourage people to think about how to minimize their risk. Our website since day one has carried a range of ways that you can minimize your risk during sex, primarily around respiratory issues and saliva, trying to avoid being face to face with each other possibly wearing masks. There's a range of other things on there. we'd encourage people to think about who else is in your little physical distancing bubble. Who are the people you say, every day, who are the people that if you get COVID you may potentially pass COVID on to and that you would need to consider and maybe isolate yourself from if you're if you're going to be having casual sex. We encourage people to swap details with the people that they are having sex with just in case one of you needs to contact the other one more contact traces need to make contact and then let the other one know there's been a possible risk event. And we'd encourage people to consider isolating afterwards, particularly if you're around people who are at higher risk. People who are elderly, or people who have other comorbidities that put them at higher risk of COVID. And again, on our website, if you go to what we have a whole page on sex and COVID of how to make sex fun during this time and saw sex and a bunch of other ways that you can enjoy sex while still restricting yourself. And that said, you know, we know that people, a lot of people have delayed sex the there's a national study called FLUX, which looks particularly gay and bisexual men, which has shown that I think the vast majority of men in the study have minimized their sexual activity or restricted it just to people that they know well, and to restricted casual sex. And we've also seen in the second quarter of this year, April to June, we saw a 33% drop in STI across Victoria, particularly in gonorrhoea. So they're all indicators that people have been putting off sex. But we'd encourage people to, you know, if you can hold out a bit longer hold out. And if you can't, there are a bunch of ways that you can minimize their risk. So please go to the website, have a look. And try and think through, you know, how you can enjoy yourself but try and prevent the spread of the virus as much as possible.



Michael Whelan 10:37

Yeah, I guess that's kind of, you know, we have to look for the silver linings in all of this and one of those silver linings could be that we may see an overall reduction in STI notifications in HIV transmissions. What do you think that's going to kind of look like for the foreseeable future for STIs and HIV?



Simon Ruth 10:55

We did. We did say a bit of a bump when we reopened for that brief period. And then we're seeing a decline again, as we've gone back into lockdown. There are specific issues around HIV, we know that somewhere between 25 and 40% of people stopped taking PrEP. There was there was in the first lockdown because I didn't think they're at risk. So people... we need to get people back onto PrEP. If they're going to start having sex again, we need to do that before they start having sex. And we also saw a similar declining PEP use. So PEP use dropped dramatically during the lockdown period, which again would indicate that people possibly most likely aren't having sex. But there's also a possibility that they didn't want to go to a hospital to pick it up. So the the restrictions that are in place will have the same impact on all infectious diseases as they will on COVID so we are seeing very dramatic drops and things like the flu and colds across winter and we'd expected on infectious sexually transmitted infections as well. Hopefully, you know, hopefully, we can make the most of this and try and see a long term reduction particularly in HIV, possibly in some of the other blood borne viruses as we go into the future. But i'd encourage, you know, everybody, if you were taking PrEP, it's time to go back on now, before restrictions ease. If you're going to look at PrEP On Demand as the way you want to move forward, please educate yourself on what that means, how to do it safely, there is information on our website and on a number of other websites. If you Google PrEP On Demand or Event Based PrEP, you will be able to find that information on how to do that safely. And you know, really, we just we just need people to start thinking ahead of it and preparing for when things ease up.



Cal Hawk 12:38

Now Simon, you were talking before around how people are, you know, mitigating the risk with regards to sex and what this is going to mean you know, as we kind of come out of lockdown and they continue to look after their sexual health and well being. Has the advice... do we think that that advice is going to change or evolve at all as we come out of this or do we have to get to a point where COVID is basically gone before we can kind of relax the the restrictions around sex?



Simon Ruth 13:05

Um look, I think our advice will evolve around this you know, we have always been a pragmatic organization. We have always tried to work with where community are at. We've always been realistic in what particularly gay and bisexual men's (but now the broader community's) sex lives are all about. You know, we... the official advice is that, you know, the only way to prevent this virus being not running through sexual networks is to try and restrict sex. But there are a number of other ways that you can try and prevent the

spread. And I think we're about to talk about social doubles in a minute, but that's another way to look at it. You know, and more generally, our advice, you know, the advice... the advice on washing hands on social distancing on all those things continues. The advice on taking care of yourself. Please don't put off medical appointments. Please don't put off your regular sexual health screening if that's if that's part of what you do. We don't want to accident, you know, in paid those sorts of cultures and, and... if you if there's anything you need to talk through, feel free to call us. And we can see what we can do for you. We also have the Rainbow Connections program that's sitting there, which is a support service for people who are feeling isolated, and they need someone to talk to. And that program can also look at if you're going through financial hardship, or homelessness and a range of other areas that we can try and provide assistance to you.



Cal Hawk 14:30

With regards to the Rainbow Connection service, have we seen a big uptake on it? Or do you think that people are reluctant for any reason to engage with the service?



Simon Ruth 14:39

The uptakes have been steady. I think one of the issues is people, you know, people, there's a lot of people who aren't used to asking for help. And these are unusual times. You know, with we've had people come forward to us and say, I've worked for 30 years, I never realized I could be in the position I'm in right now. I never realized that I will be a person who needed to ask for help. And there's nothing wrong with asking for help, you shouldn't be ashamed of asking for help. You know, please come forward, please don't feel too proud to ask for help. And if you think that there's people worse off than you, and that's why you don't ask for help. Well, we're here for everybody. You know, we're all in unusual situations. You know, there's the employment issues that are that are ongoing now for five months, for some of us have placed a lot of financial stress on the community and the mental health issues, particularly for people that are living in environments that aren't conducive to their mental health applies to a lot of pressure on people. So I would encourage everybody to reach out. We are all getting through this together. The staff here are going through the same sorts of issues that everybody else is. And so we completely understand what's going on for the public. And we'd encourage everybody to put your hand up and we will we'll all work on this together as an LGBTI community and, and as PLHIV community.



15:58

Now recently, the Premier's announced It has also included the mention of social bubbles, which you alluded to earlier being introduced. Can you help us understand how that will work? Who's eligible? And I guess the nuanced experiences of LGBTI people's relationships and how this might kind of assist us to, you know, increase our connectivity.

S

Simon Ruth 16:21

Um, so I guess I social bubbles hasome out, we've seen it being used overseas. It's particularly for people who are living alone, or away from family and friends, it's so that they don't become completely isolated. Those of us who live with family and friends or have that opportunity, not in the same sort of isolated position as some others in the community. We probably... our mental health's probably doing better. We're not completely restricted to mechanisms like telephone and video conferencing to catch up with people. But there are a number of people in the community who have basically been alone now since the start of stage four. For some of them, who felt that they were at risk of COVID it's been going on this way since March. So the notion of a social bubble is that you can have one or two other people who you form a bubble with. And the group of you are able to get together and socialize. Even under stage four, if you don't/didn't live with your partner, you have been allowed to travel and see your partner. So it's effectively the same sort of concept. It's just not restricting it to someone that you're in a romantic or sexual relationship with. Then they are looking I think, at the following stage, they are looking at household bubbles, so that your household can socialize with another household. So the four of you living in your house can go in, you know, hang out with your brother or your sister or your friends or and then now there'll be a next level of bubbles. Because they haven't come in yet. They're still working through it and they still trying to figure out exactly how it will work. But that's the basic concept and I think particularly when It comes to sex, it's likely to, you know, create opportunities there as well. So for single people, they'll be able to create bubbles that not only provide emotional support, but also allow them to, to socialize in a whole range of areas with a few other people. So it does create a lot of opportunities. And we have held a position for a time now that we've supported it. And the community at large has been very active on this. And particularly for you know, isolated LGBTI people. It's a great opportunity, and we're fully supportive of it.

C

Cal Hawk 18:37

We've heard earlier this week as well, you know, the Prime Minister has said that New South Wales has been using the gold standard when it comes to contract tracing and you touched on contract chasing a little bit earlier. But for folks that have really only become familiar with contract racing during the COVID-19 epidemic. Can you tell us a little bit about how that works? And are there things that LGBTI community members can do to

look after themselves with regard to that employing contact tracing, and I know you've touched on some of this before, but probably just walk us through that.

S

Simon Ruth 19:05

So contact tracing has been around forever and it's used in infectious disease as a way of trying to prevent the spread of infectious disease. It's something that people who've worked in sexual health and HIV are incredibly familiar with. It's also used widely in other areas such as tuberculosis and other infectious diseases that we try to restrict the spread of in the community. There's a fantastic article in today's paper, by Raina MacIntyre in the Fairfax press, comparing Victorian and New South Wales contact tracing and what can be learnt there. Raina does talk about the fact that you know, fit for every one person who's got the virus, there may be 10 or 20 people that then possibly in that contact tracing loop that need to be followed up and then they may be extended people for them. So when you've only got five to 20 cases, in a state contract pricing is reasonably easy. But suddenly, when you've got 700 cases in a state, which you know, happened very, very quickly in Victoria contract tracing then goes from maybe having to find 200 people to having to find 20,000 people. So it becomes much more complicated and it becomes a lot more work and it's difficult to ramp up quickly. You know, and to do it sensitively. So it is an area that governments need to work into. One way to contact rise is to use the COVIDSafe app. Countries all across Asia have very successfully used tracking apps like the COVIDSafe app. In Australia, it got taken up by that 7 million people within two weeks, and it never really got past that number. It didn't need to get up to around 12 or 13 million people. So if everybody had uploaded the contact... the COVIDSafe app and they've been using it, it would have made contact tracing much much easier. They would have been able to get listed names or would have been much more time effective and they would have been ways to contact people that didn't require, you know, having to phone you. You would have been able to message them through the app. So that is one way we would encourage people to continue to put that app on your phone to use that app. The biggest issue with the app is that people aren't using it. But it is a highly effective app. And, you know, maybe Victoria can learn from New South Wales. You know, Raina, in her article suggesting that the biggest issue here is just numbers. And until Victoria gets the numbers down, that contact tracing is going to be under a lot of pressure.

C

Cal Hawk 21:33

We know that people face a number of barriers when it comes to testing for STIs and HIV. And I guess a question that I have is that as we start down this roadmap to lockdown, Melbourne's easing of restrictions, it relies on getting the numbers down to a certain point at below a threshold, sometimes below 10. Does that potentially, I guess de-incentivize,

you know, people testing if they don't want be one of those 10 or one of those five because it's different when you're part of a much bigger number, you're sort of a bit more anonymous. If that means that coming back with a positive test result could extend restrictions for the rest of us.

S

Simon Ruth 22:13

Yes, we've had chatter of people saying 'even if I got sick, I wouldn't get tested because I don't want to contribute to the numbers and I want the city to open up'. It's not just through this mechanism that we will learn that we've lost control of the epidemic. If people don't get tested and they don't isolate if they've got the virus the virus will get out of control and emergency departments will start filling up with people and and hospital ICUs will be filled with people who are dying. It... so you know, it's it's all of us together needing to work through this though. No one should be ashamed if you get the virus. You know, there's the stigma attached to having this virus naturally. But getting tested is a responsible and ethical thing to do. We would encourage everyone to do it. Staying at home until you get your test results is the responsible and ethical thing to do. And then isolating until you've cleared the virus is the responsible and ethical thing to do. There should be no shame in having the virus. We all catch viruses. We've all had the flu, we can... you know, every single year if we washed our hands more we could avoid the flu and, and then every couple of years we all get the flu, you know, there's nothing there's nothing to be ashamed of. It's, it's an airborne virus, people are going to get it. You know, what we can do is do the right thing and get tested. Ensure in in help the state figure out what's going on. And then we can prevent the spread because if hospital's start filling up, we will inevitably locked down again, and we will lock down for much longer periods while we try to get it back under control, and that's where it's going to go. So we'd encourage everybody, if you've feel you've got cold or flu symptoms, the first thing you need to do is go and get COVID tested and you are helping the whole community get through this together.

C

Cal Hawk 24:00

That's a good point. I guess there's an action there for the people that potentially may need to get tested. But I guess is there also then an action for the rest of us that we don't, you know, have a copy of that in our conversation, we keep ourselves in check around stigmatizing people who may have COVID, because we are seeing a lot of people get frustrated, and that's manifesting in ways like the protest that we saw at the shrine of remembrance and Albert Park Lake this past week. But, um, I guess, is there something that we need to be thinking about for having conversations around COVID-19 that we don't stigmatize people with it, because that could potentially deter people from seeking

care or getting tested?

- S** Simon Ruth 24:37  
Yes, definitely. So that the more we stigmatize it, the more we talk about putting ankle bracelets on people, the more we talk about charging people who have COVID if they give it to anyone else, that will all deter people from getting tested. And then we will completely lose control of this virus. And that is the last thing we want to do because we know if we lose control of the virus, that it's going to cost lives. It will mean further restrictions into the future it will mean it's much, much longer before we're allowed to travel in and out of this country. It will mean longer border lockdowns with the states that are doing better in controlling the virus. So we all need to work together on this. You know, and it's a fact of life. We all get viruses, we all get sick from time to time, it's nothing to be ashamed of, you know, and we just need to work on this together. And, you know, continue washing your hands, continue social distancing, continue wearing mask using hand sanitizer, and we will be doing that for some time into the future.
- C** Cal Hawk 25:34  
Simon Ruth, the CEO of Thorne Harbour Health. Thank you so much for joining us yet again on Well Well Wel. I'm sure that you know, we'll be talking to you in due time, but hopefully under better circumstances than the current landscape.
- S** Simon Ruth 25:46  
Thanks, guys. And I look forward to seeing you again one day.
- C** Cal Hawk 25:50  
Someday maybe.
- S** Simon Ruth 25:52  
Okay, Cheers!
- C** Cal Hawk 25:54  
And now we are joined by Joseph Tesoriero who is from Health Smart pharmacies, and Health Smart is affiliated with Prepped Smart and Healthy who have hit a pretty major milestone of \$1 million in subsidies for PrEP users. Thanks for joining us here on Well Well

Well.

- J** Joseph Tesoriero 26:11  
Thanks Cal Thank you for having me. Tonight. It's a privilege and an honor to be having a chat to you about this.
- C** Cal Hawk 26:18  
So we've touched on how smart pharmacies and Prepped Smart and Healthy but let's start with Prepped Smart and Healthy. What exactly is that program?
- S** Simon Ruth 26:26  
Okay. So Prepped Smart and Healthy came about because in pharmacy, we've been involved in providing patients with PrEP. The Alfred Hospital ran a PrEP pilot program a few years ago. And what was concerning is that once the program finished and the medications became PBS, that there was the absolute reality that the medications were going to triple in price to patients. And that was something that was going to be detrimental... detrimental to people taking it And so we tried to come up with a way that we could make the medications the same price as they were on the pilot program. And so Prepped Smart and Healthy is a way of subsidizing and paying for two months out of the three months supply that people get when they get their PrEP scripts.
- C** Cal Hawk 27:19  
So how does that work from a user standpoint? So they come into the pharmacy and what do they need to do?
- S** Simon Ruth 27:24  
So they need to have a prescription from the prescriber, and it's usually an authority prescription for three months supply. It is only available to people with a Medicare card, so it needs to be a Medicare card holder with a valid PBS prescription. There should be no issue with that if you fit the criteria if you've had the required blood tests, and then you are given all three months of your supply of PrEP and you're required to pay the first month and the charity pays for the second and third month.



Cal Hawk 28:04  
And that's amazing.



Joseph Tesoriero 28:05  
That's how it works.



Cal Hawk 28:07  
Is there a limit to how often people can access the program?



Joseph Tesoriero 28:10  
Well, it really should be only once every three months or so, if people are getting it a lot more frequent than that, obviously, they're not getting PrEP for themselves. And that causes a whole range of issues. If people are getting longer than three months, then perhaps they're not taking their PrEP. And the whole purpose of the program was to make sure that there were no barriers in place that would that could listen no financial barriers in place that could prevent someone or deter someone from taking preventative healthcare medication that could actually keep their health and wellness and prevent them from acquiring a viral illness.



Michael Whelan 28:47  
And so how did the the Prepped Smart and Healthy charity and program kind of kind of all come about?



Simon Ruth 28:53  
Well, I was having a chat with a winner rights Professor Edwina Wright who ran the program. And we were talking about how... how the cost was going to be to patients, and it was going to become significantly more expensive. And the PBS rules state that you're not allowed to discount certain types of medications passed, you know, a \$1 discount. And so that was going to be a significant barrier. Now, I've been involved in a couple of other charitable organizations and I was Treasurer of an organization and one of the things that we had done was set up an associated incorporation and set up a charity. So my mind started thinking, well, how can I then validly and legally create a system whereby a third party could pay for this medication? So I set about getting donations to this charity. Set up the charity. It's registered with the ACNC it's registered as a DGR, which is a donatable

gift recipient, went through all the loops, hoops that you need to to set up a charity properly constituted. We have a board I'm the president The Board of Prepped Smart and Healthy. So we use the name 'PrEP', and 'Smart and Healthy' came from my group of pharmacies called health smart. So Prepped Smart and Healthy was one of those names that I thought was appropriate because if you're properly prepared, you'll be smart and healthy about your own health. So this started off with how can we assist patients with medication. So, you know, adhering to a proper regime would be able to be done going forward. And it's sort of gone well past what I thought it might.



**Cal Hawk** 30:36

Absolutely you've hit a \$1 million milestone and just to make sure that I understand this. So the funding for Prepped Smart and Healthy this program that subsidizing this, this is all from donations?



**Joseph Tesoriero** 30:47

Look, the predominant part is from the pharmacies that I'm director of. We have had a small number of donations it but it's predominantly from from the pharmacy, so they in a sense, made donations to the charity to be able to fund the program so that we're not ... we're not profit driven at people's at the expense of people's health. The idea is to make this a program which whereby it's not going to be run negatively from a business point of view, but it's something that you comes from a compassionate heart. I think I've, I've worked in Commercial Road in the Prahran/South Yarra. area since I first started in the early to mid-1980s. Even before PMC moved into Commercial Road right near the Prahran market. And during that time during the last sort of 30+ years, I've gone through the 80s and 90s. And now into the 21st century, and too many times I have seen people who I've known become ill and pass away. So, HIV and preventative HIV care is something which has been very close on my heart. And when this particular trial started back quite a few years ago, and it was so successful, it was just so exciting to be part of something which was successful, to prevent an illness spreading through a community who were marginalized in a number of ways. And I didn't want this to be another way through the high cost of medications to to affect them even more. So. It was something that I was very, very excited to be part of. And I'm very proud to be associated with it.



**Michael Whelan** 32:45

And obviously, during that time, you've had, you know, you said through the sort of, you know, mid to late 80s, with the inception of HIV and AIDS here in Australia, as the

proprietor of Health Smart pharmacies, you've kind of seen, you know, a positive trajectory in the way that we can kind of responds to HIV. We've got all these new tools that are around. Can you tell us a little bit what that's been like, obviously, to have the implementation of things like PEP or post-exposure prophylaxis, and then into PrEP?

**J** Joseph Tesoriero 33:14

Yeah, sure. I mean, there's been through some of the early stages when all you all that were available were a wide set of anti retrovirals to try and treat someone once they had acquired the virus. And of course, that had a lot of devastating side effects on many people. And that has evolved over the years to some really good treatments now, which are very, very simple to take. We were involved at the Alfred hospital with with PEP, they, you know, we could see some of the medications that were being used in in PEP, and that had some limitations because they there was no PBS funding, although there was a great program n-PEP which was able to help subsidize that particular cost. But you had a particular timeframe and time window, we had to have medications. And it wasn't always... I won't use the word 'convenient' but or easy for people to access, they'd have to access only certain points at certain times today, and then have follow up treatments. And it was really a bit haphazard. And PrEP was one of those game changers. It's just, it's just amazing to think that here is a medication and a regime which could actually stop the virus from from spreading. You could have a generation in the generations time you could have situations where HIV is no longer going to be an issue for for people going forward.

**C** Cal Hawk 34:49

I was just curious because you talked about having a presence on Commercial Road for such a long time. When did you... When did you first I guess have a business on Commercial Road.

**J** Joseph Tesoriero 34:58

I was an employee From 1983 in Commercial Road at the Prahran market until 1999, when I got into my first business ownership, which was also on Commercial Road on the corner of Commercial Road inandChapel Street. And then in the early 2000s, I moved or had an opportunity to buy into a pharmacy that was starting up at the Alfred Hospital also on Commercial Road. So I've gone from one end together into a commercial road but all within a particular area. And so that's, that's how I started and where I've ended up now. So I haven't moved very far. From there at all. I've gone into other other hospital sites around around Melbourne. My pharmacies are located in hospitals at Royal Melbourne at

the Box Hill at St. Vincent's and at the 24 hour day Peter Mac Cancer Hospital in the city.



Cal Hawk 35:57

That, I mean starting in 1983 being in that landscape... But, I mean, it really aligns directly perfectly with the HIV and AIDS epidemic here in Australia. And of course, for you know, people that maybe are newer to Melbourne or aren't from Melbourne, you know, Commercial Road was sort of our hub, I guess, for a lot of gay men, really up until I guess, just after the turn of the millennium. So I imagine you'd have seen quite a few people that would have been part of, you know, LGBTI communities over that time.



Joseph Tesoriero 36:25

Definitely, definitely. Obviously, I remember some of the the doctors who came to PMC you know, Vaughn, Lenny, and Norm Roth, and Andrew Buchanan and all the the legends who started that clinic and then all the people who were the great activists for the LGBTQ community. I remember I can name the people who... I can visualize and picture them in my mind the people who were the ones who had the greatest, greatest voice and pushed for the best outcomes in health care. But you know, unfortunately, sadly, a number of them are not with us anymore. And it's, I can say it's like the passing prior remember there was a number of a number of events held in Commercial Road - right outside the pharmacy where I was - promoting and trying to raise awareness. So yep, right in the heart of that it was called the Pink Strip at the time. But right in that area, it was it was something which sort of gave me a great understanding of some of the challenges



Cal Hawk 37:39

And we're continuing the conversation with Joseph Tesoriero, proprietor at Health Smart pharmacies and head pharmacists? Chief pharmacist? What its...What's the title for, you know, the Grand Poobah of you know, pharmacists?



Simon Ruth 37:53

Well, I could be the proprietor pharmacist, I could be the pharmacist regularly and usually in charge I usually have a team of pharmacists working with me but as the owner of a particular business, I'm the proprietor pharmacist, Grand Poobah? Yeah, I like that. I like the Grand Poobah



Cal Hawk 38:11

You can have that you can have that for free. There you go.



Joseph Tesoriero 38:14

Thanks Cal.



Cal Hawk 38:15

Now with health... PrEP Smart and Healthy we've talked about \$1 million in subsidies to help people access PrEP. Is there a way... do you have any idea like how many people that's helped?



Joseph Tesoriero 38:27

I tried to run some sort of report to give me an idea of how many people it is over a particular period of time it and it's really difficult because it's across a number of pharmacies. I can only try and estimate what it is at one place and then try and multiply it and add it. I'm I'm believing it's somewhere between 4000-5000 people who have accessed the program at different times. Predominantly was originally main or mainly in Victoria and metro area. Then as we've had other pharmacies around Melbourne, some of them have gone a bit further. And we've actually now got a number of people who are requesting to access the program from interstate. So there's quite a few from South Australia and we've had some others from WA, South Australia and even down in Tas. So it's available to anyone in Australia, who has a Medicare card and can access a GP to get a prescription.



Michael Whelan 39:28

We haven't been particularly tech savvy in the way that we access our medications in, in Australia until very recently. People kind of probably wouldn't be familiar with the concept of picking up their medication from a pharmacy they're not physically walking into. What does what does that process kind of look like? Do you? Can you buy it online? And do you just have to, you know, pay for shipping? How does that work? If you're saying something like Adelaide?



Joseph Tesoriero 39:51

Sure. So there's a couple of ways you can do it. Up until probably the last month the

easiest way was to send an email through to PrEP Smart and Healthy. Take a photo of your prescription, make sure you include a picture of your Medicare card or just the Medicare card number and a phone number. And we would call during business hours. Just arrange and confirm address, arrange payment, there's a postage cost, a small postage cost to send it to interstate. It's sent by Australia Post Express post. The vast majority have arrived the next day, so they can go to anywhere in Australia. In the last few weeks, you may have heard about something called e-script or e-prescription. Whereby instead of actually having a paper prescription, your prescriber can send you a QR code to your phone or to any device and you can then if you're in store, you can scan it or you can send it, again, via email to to PrEP Smart and Healthy and we can send it to one of the pharmacies, usually the one that I'm involved in because I access all the emails on a regular basis. And that QR code is your prescription it doesn't have to be a paper prescription anymore. It is actually a prescription. All the details come up when we scan it into our system and we can go from there.



Cal Hawk 41:11

Oh, wow, I actually had not heard about that at all. So what is it called again?



Simon Ruth 41:15

E-script. E-prescription.



Michael Whelan 41:17

I knew that that was kind of on the horizon. Is that already implemented now? And is that kind of readily accessible at some, you know, does your prescriber your GP need any particular software?



Joseph Tesoriero 41:26

Yes, your prescriber needs software to be able to do it. Most prescribers who use some computerized software will be able to do it without an issue. There's a number of companies that provide the right programming for it. From my end, I've had to upgrade some hardware, install a number of software things is any there's an encryption that only people with access to health record information is able to use the e-prescription. So we've all had to make sure that we have properly registered. There's privacy things that are concerned with that. So it is available. It's been available for about two weeks and we're seeing quite a few. We were seeing a number of them each day. But I think that's going to

be the way of the future. I mean, it's we've got a robot inside most of our pharmacies and it's even possible that I could see that you could drive up to one area scan your QR code as an entry point a bit like a McDonald's. By the time you get through to the dispensary area, the robot can find your three packets of PrEP, send it to the dispensary. It's labeled, parceled. And by the time you get to the end of the the drive thru away you go. Not now but it could be in the future.



Michael Whelan 42:40

Wave of the future. Yeah, we are living in 'Westworld'.



Cal Hawk 42:44

Did you say... this is ...you \*could\* have a robot or you \*do\* have a robot.



Simon Ruth 42:48

We do have a robo. We have these robotic dispensing systems they they compact all the medications into little shells and compartments with this electronic pick head and it goes around And picks it out and drops it into whichever shoot you're working at. We've got three for pharmacists, there's four different shoots, so your medication gets into your shoot. So you can spend more time making sure that you got all the details on the prescription correct. You can spend more time speaking and consulting with your patient at the time. And when it's when it's a barcode. It's, well it removes a lot of human error. So there's much less chance of having any mistakes made. And it's quick, it's it's space saving. So in my line when things save me time and save me space, it makes things more efficient.



Cal Hawk 43:37

Wow, the the future is now There you have it. And I like that you talk about it, you know, it really makes way for you to to have that human experience and to that face to face with people. It's not just about the efficiency of it, but it actually allows you to do this other really important element in that relationship.



Joseph Tesoriero 43:55

Well, what when you're trained as a pharmacist, you know, your key criteria is to be able to provide the information that you know to the patient so that they can take the

medication in the best possible way for the best possible outcome. If you spend all of your time fishing through things in drawers and off shelves, you're spending less time doing what you're qualified to do. And I'd like to try and spin it the other way around. So I spend more time doing the things that I like doing in consulting with with the people and interacting and having better health outcomes,



Michael Whelan 44:29

And less time deciphering GPs handwriting.



Joseph Tesoriero 44:31

Yes, yes. Thank goodness for computerized prescriptions. It's making things a lot easier. But let me tell you over the years... it's been a challenge.



Cal Hawk 44:43

I do want to ask you one more question before we let you go. I know that a lot of your pharmacies have been (are within) hospitals and considering the current landscape around COVID-19. And, you know, a lot of these hospitals also have COVID clinics. I imagine there are some people that are kind of taying away from that environment if they don't have to. Has that has that impacted your business?



Joseph Tesoriero 45:05

hugely, hugely, where we're trading probably at about half of our normal turnover. It's been massive. There's things such as you know, elective surgery has been canceled. People can't come to visit patients. A lot of the hospital staff working from home so they're not... they're not attending the hospital, any consultations are done through the various clinics are done online, so I'm not seeing the patients for that. So it's, it's impacted us incredibly. I've kept all of my staff on, fortunately, you know, things like Job Keeper and some of the incentive packages help keep you going. But when you're when you're turnovers down to half and you've got a lot of other fixed costs going it's it's quite difficult. And it's actually one of the safer places to be because everyone gets temperature checked and scanned as you come through and you have to ask and answer all the questions that they asked you as you to the hospital. The COVID testing clinic is sort of situated some way away down in a in a carpark. So it's... there's no risks involved, but it certainly has impacted our business incredibly. We're staying open and trying to find ways to assist people. So doing things remotely and by post and by courier has been a way that

we've been able to help maintain our business and also maintain medication supply to patients who needed



Cal Hawk 46:32

Joseph Tesoriero, thank you so much for joining us on Well Well Well. Congratulations to Prepped Smart and Healthy on hitting that \$1 million in subsidies for PrEP users. I'm you're, you know, you've literally changed thousands of people's lives and I imagine more into the future. So thank you so much for joining us here on Well Well Well.



Simon Ruth 46:48

Thanks, Cal. Thanks, Michael. Thank you for the opportunity to come on.



Cal Hawk 46:52

Well, that has been another episode of Well Well Well here on JOY 94.9. A big thank you to our guests this week proprietor at Health Smart pharmacies Joseph Tesoriero and congratulations on that \$1 million milestone in supporting people to accessing PrEP, both here in Victoria and further afield. That's great to hear about, you know, people can actually access that scheme through the Postal Service and the, you know, the QR codes and the robots that help deliver the PrEP. This mental image now of drones, actually.



Michael Whelan 47:22

Yeah, it's very it's very like that claw in 'Jurassic Park' that turns the eggs I'm imagining that but it gets my PrEP for me and puts in a little baggie for me.



Cal Hawk 47:30

Yeah, and just like winks at you like with like, robot eyes. It's just digitize. Yeah, exactly. .



Michael Whelan 47:35

It's just, it's just gotten squiggly eyes stuck onto the front of it



Cal Hawk 47:40

Moves around eratically. So yeah, congratulations, Joseph Tesoriero and of course also

thanks Thorne Harbour Health CEO Simon Ruth for helping us unpack what it means. Now, Michael, you know, I know you have a partner at home so you are ineligible for the social bubble stage one package or benefits that's coming up.



Michael Whelan 48:03

I'm ineligible! No, I'm very fortunate I have someone that I live with. So I have a great amount of human connection every week. But for those people in our communities that are solo/single/separated from partners or don't have housemates. This is going to be an amazing implementation to allow them to have some in-person social connectivity, because that can be so important at this time.



Cal Hawk 48:26

Absolutely. And we've talked about a few different resources on the show. Simon touched on Rainbow Connections, which, you know, he said is accessible it is out there, check it out, head to the Thorne Harbour website, ThorneHarbor.org and head to the COVID-19 section. And if you look under Services Updates, that'll be the information there, which has not only Rainbow Connections, but if you want to access their counseling services, which are continued being delivered, and a range of other things that are accessible to anyone across Victoria.



Michael Whelan 48:53

And also of course, we chatted with them Joseph Tesoriero and his pharmacy chain is LiveHealthSmart.com.au and they're dotted kind of all around the city. So hopefully if you're in Melbourne there's one located within your five kilometer radius while you're at your book you can pick up your PrEP. If not, you can obviously head online to purchase that for for a small shipping fee. And of course that's through Prepped Smart and Healthy, which you can find a link to them help them out website or just jump on your favorite search engine and type in Prepped Smart and Healthy and that will take you to that charity to to use that online. Also, we've got tons of events kind of happening online at the momen. Groundbreaking for COVID-19!



Cal Hawk 49:34

Including some peer to peer support groups. I know a lot of people think about Thorne Harbour's peer support groups as being largely for gay men and MSM, but they've got to coming up Novus and Pace which are actually for trans women and trans men,

respectively, head to [ThorneHarbour.org/calendar](https://ThorneHarbour.org/calendar) to check out that as well as there's a upcoming group for people around ice use called Defrosted and you know, heaps of events come up from time to time so tune in and check that out if you want stay active.



**Michael Whelan** 50:04

We have of course had the first two episodes of the Bent Spoon go live. So those are accessible online also. My program Down an' Dirty does a kink and fetish exploration each and every week on [DownAnDirty.org](https://DownAnDirty.org). So you can check that out there. And we've also had some really good feedback from the Transcripts series, which is our trans, gender diverse, and non-binary webinars series. Yeah, so plenty of either medical community support information on those and those will be up online very shortly. And you can find that by heading to the Thorne Harbour, website [ThorneHarbour.org](https://ThorneHarbour.org) and follow the links through to our YouTube channel. Cal, It's been a pleasure to join you finally once again.



**Cal Hawk** 50:48

Yes, welcome back. And I will see you next week for another episode of Well Well Well here on JOY 94.9. You've been listening to another episode of Well Well Well here on JOY 94.9. If you've missed any part of this week's episode, head to our podcast page [joy.org.au/WellWellWell](https://joy.org.au/WellWellWell). You can subscribe on Apple podcasts, Spotify, and wherever you get your podcasts. We'd appreciate a five star review so we can continue to reach people within the LGBTI communities. We'd love to hear your comments, feedback or suggestions for future topics affecting our LGBTI communities. Please feel free to send us an email at [wellwellwell@joy.org.au](mailto:wellwellwell@joy.org.au). Well Well Well is recorded on the shared lands of the Boonwurrung and Wurundjerri/Woiwurrung people of the larger Kulin Nation. We would like to pay respects to elder's past, present and emerging and any Aboriginal and Torres Strait Islander people listening today. We acknowledge sovereignty was never seated.



**Show Theme** 51:49

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