

hepatitis *wa*



# Acacia Prison BBV Peer Health Educator Program

*Working towards elimination -  
together*

# Acknowledgement of Country

We would like to acknowledge the traditional custodians of this land and pay our respects to the Elders both past, present and future for they hold the memories, the traditions, the culture and hope of their people



# The Acacia BBV Peer Health Educator program

- **Empowered Peer Leadership:** Now in its third generation, the Acacia Peer Education Project continues to thrive, with trained peers delivering vital harm reduction and BBV education inside the prison environment.
  - **Tangible Impact & Growth:** The program has expanded in scope and confidence, with peers increasingly contributing to meaningful change across education sessions, health promotion stalls, and one-on-one interactions.
  - **Strong Support & Collaboration:** The project's success reflects the ongoing partnership with Serco, whose support has enabled this model of lived-experience leadership to flourish within a complex correctional setting.
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# Origins of the Acacia Peer Project

- **Initial Invitation:** The project began with an invitation from the Red Cross to join their Health and Wellbeing program inside Acacia Prison.
  - **Peer Employment Model:** HepatitisWA offered to fund and support four peer educators to deliver brief BBV interventions and hopeful, strengths-based education to men entering the prison.
  - **Year-Long Training:** Over the course of a year, 25 peers were trained by HepatitisWA staff (myself and Helen), building capacity through structured education, mentoring, and lived-experience storytelling.
  - **Organic Evolution:** As peers were released or transferred, a third generation of peer educators stepped up—ensuring continuity, deepening impact, and creating a sustainable model of peer-led education and support.
  - **Solid Foundations:** The early success of the program was built on genuine collaboration, mutual respect, and a shared vision of empowerment and harm reduction.
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# Early Problems & Learning Curve

- **Follow-Up Challenges:** Many peers were released, transferred, or rotated frequently, making sustained engagement and follow-up difficult.
  - **Inconsistent Data Capture:** Tracking peer interactions, reach, and outcomes proved difficult in a high-turnover environment with limited internal systems.
  - **Message Drift:** Without tight oversight, messages around BBVs and harm reduction occasionally became inconsistent—particularly when peers improvised or mixed personal beliefs with program content.
  - **Complicated by Charges:** Some peer educators faced new or unresolved charges during their sentence, interrupting their roles and affecting program continuity.
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# Program Status Today – Growing Reach & Recognition

- Active Peer Network:**

15 trained peer educators currently active, with 5 more completing training soon—marking the 4<sup>th</sup> full year of the program and 4<sup>th</sup> generation.

- Sector Collaboration:**

Expanded program delivery with support presentations from Peer-Based Harm Reduction WA, WAAC, and Aboriginal Health Council of WA (ACHWA), enriching peer knowledge and external trust.

- Established Peer Presence:**

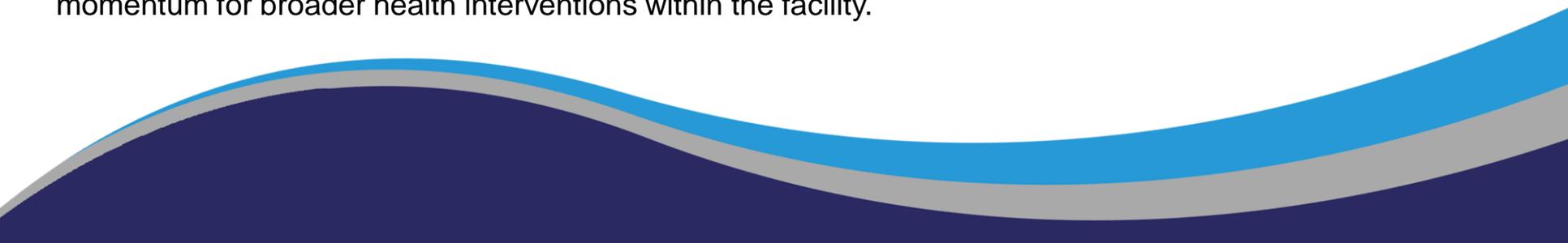
Peers now deliver BBV induction talks at prisoner entry. Trust is strong—prisoners actively engage, approach peers for support, and value their lived experience.

- High Engagement:**

Sign-up sheet model for testing and vaccination drives has seen strong uptake. Raffles, quizzes, and newsletters keep awareness high, especially around events like World Hepatitis Day.

- Next Steps in Motion:**

Planning is underway for a POCT (point-of-care testing) and liver scan blitz event, building momentum for broader health interventions within the facility.



# Notable Wins – Impact Through Trust

- Peer-Led Syphilis Success**

Several undiagnosed syphilis cases identified thanks to trusted peer disclosures — demonstrating the power of lived experience to surface hidden risk.

- HIV Stigma reduction**

Improvement in HIV reported stigma and discrimination in protection units reported by positive people.

- Thousands of Brief Interventions**

Peer educators have now delivered thousands of brief interventions across the prison, plus an estimated 50–80 BBV induction talks, embedding harm reduction at entry.

- Transformational Peer Growth**

One peer, initially **uncomfortable with LGBTQI+ engagement**, went on to champion inclusive education, helping support the first ever PrEP negotiation to a prisoner at Acacia— despite this not eventuating, it showcase the growth and emphasis the peers have placed on BBV prevention and cultural safety.



# Moving Forward – What We've Learned

- **The Program Works – When Nurtured**

This model succeeds when supported. With time, safety, and consistency, peers build trust where others can't.

- **Long-Term Peers = Real Impact**

Short-term placements dilute effect. Lasting change comes from embedded peers with strong training and gradual empowerment.

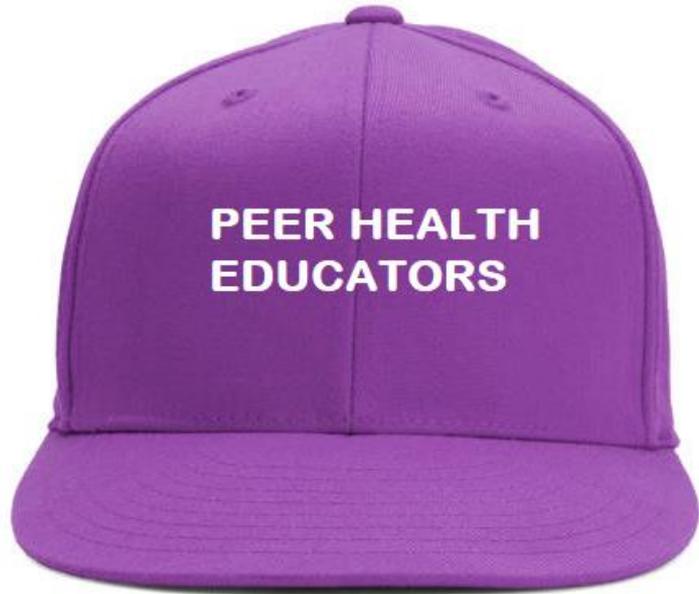
- **Train Slow to Go Far**

Deep change takes time. Slow, thorough training is the backbone. When done right, the results speak for themselves.

- **Ready for Expansion**

This model is scalable. It has the potential to replace or complement external education, especially in settings where outside access is limited.





Questions?