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Victorian  
AIDS  
Council  
Gay Men's  
Health Centre

## Statement of Purpose

The Victorian AIDS Council was formed in 1983 as the central part of the Victorian gay community's response to HIV/AIDS. In 1986 the Gay Men's Health Centre was formed to address the broader health needs of the gay community. Together, the Victorian AIDS Council and Gay Men's Health Centre work to confront the continuing challenges of the HIV/AIDS epidemic and, increasingly, the gay community's broader health concerns.

Our core work aims to preserve the independence, dignity and health of people with HIV/AIDS and to reduce the transmission of HIV.

We are committed to social justice and social change. Since our inception, we have been a strategic partner of government, hospitals and other service providers.

Our effectiveness and inspiration come from the hard work and dedication of our volunteers and paid staff, who are men and women of many backgrounds, and from the ongoing support of the communities we serve.

# Awards

## President's Award

### John Thwaites

This year's President's Award goes to a public figure who has proven over many years that he is a friend and a partner of Victoria's GLBT and HIV/AIDS communities. John Thwaites was elected to the Victorian Parliament as the member for Albert Park in October 1992. John became Health Minister in the first Bracks government in October 1999. One of his first actions as Health Minister was to confirm funding for the Continuing Care Unit at The Alfred Hospital and announce that the new unit would be named Fairfield House. His achievements that benefited our communities multiplied rapidly: the establishment of Ministerial Advisory Committees for HIV/AIDS and Gay and Lesbian Health; Victoria's first HIV/AIDS Strategy; funding for the first HIV action plan to address rises in HIV infections in Victoria; funding to undertake the work on the Gay and Lesbian Health Action Plan which resulted, after he left the portfolio, in the establishment and funding of Gay and Lesbian Health Victoria; his ongoing advocacy for the changes that swept aside years of legislative discrimination against same-sex relationships. Now that John has left the Parliament, it is fitting that we thank him for his support and acknowledge his sustained contribution to the health and well being of the communities we serve.

## Gay and Lesbian Community Award

### Frank Bonnici

After attending a Young and Gay workshop in 2001, Frank Bonnici became one of the peer education program's best facilitators -- 'solid', 'patient', 'caring' and 'understanding' are the words his supervisor used to describe him. Frank has provided many young and tentative gay men with a positive and non-stereotypical role-model of what a gay man can be.

In 2004, without a moment's hesitation, Frank agreed to become one of the founding faces of the Staying Negative campaign. As a result, we have plastered his face and name over billboards and press ads across Melbourne that directed the public to a website on which they could read all the eye-opening details of his complete sexual history, which he provided us with an equally enthusiastic candour.

And now, in 2007, Frank has just as obligingly become not only the face, but the body of VAC's Dramadownunder sexual health campaign. It is an indication of Frank's considerable appeal that heterosexual focus groups who were shown the Dramadownunder campaign material were as keen to claim Frank as one of their own as gay men have always been. Thank you, Frank -- hands-on doesn't begin to describe your contribution!

## General Community Award

### Chrissie Feagins

Chrissie Feagins became involved with the work of the Health Promotion Program when she was the Creative Director for

J Walter Thompson -- one of the largest advertising companies in the world. Chrissie has, and continues to be, an incisive contributor to the work of the program and the organisation.

In a community field that is too often characterised by amateurism and guesswork, Chrissie has brought a hard-nosed professionalism that has enhanced and sharpened the work of the Health Promotion Team. She has presented on social marketing, in collaboration with the Health Promotion Program, at the National Educators Conference and has brought her considerable expertise to the deliberations of the UAIC campaign reference group. Through her input, Chrissie has enabled the work we develop in Health Promotion to have an edge that cuts through creatively in the highly competitive world of social marketing. On top of that, she has a great dirty laugh!

## Oz Showbiz Cares/Equity Fights AIDS (OSCEFA)

Equity Fights AIDS (OSCEFA) has successfully run 'Hats Off' as a fundraiser for HIV/AIDS organisations for the last eight years, including projects undertaken by VAC/GMHC. The event is run entirely by volunteers -- from stage hands, lighting, makeup and all the singers, entertainers, comedians, and performing arts schools. The night has always brought together a plethora of talent from theatre and the performing arts in Melbourne and makes a very strong statement of support for communities affected by HIV/AIDS while providing a fabulous night's entertainment. In particular this award acknowledges the work of Martin Croft for his coordination and ongoing support of this event.

## Media Award

### Doug Pollard

Doug Pollard has been reporting on HIV/AIDS and related issues for a range of media organisations in Melbourne over the past several years -- for the old *Melbourne Star*, for *bnnews*, and for JOY Melbourne. Doug is very well embedded and this gives his journalism a depth and a veracity that is often missing from stories written in the mainstream media by journalists looking in from the outside. In particular, this award recognises the quality of Doug's reporting on the Michael Neal case. In the blanket media coverage, much of which was inaccurate and sensationalist with strong overtones of moral panic, Doug's reports presented a sensible and balanced mix of news and analysis and he was an effective commentator for those mainstream media that were striving for a more balanced perspective on the story.

## Research Award

### Rebecca Guy

Understanding the epidemics we face as a community is crucial in all parts of the organisation to framing our response. We are very fortunate at VAC/GMHC in that we have access to up to the minute epidemiological data made available to us by Rebecca Guy from the Burnet Institute. Over the course of the last three years Rebecca has taken an active interest in how epidemiological data influences how we develop programs and initiatives. She was integral to the creation of the sentinel surveillance system, which continues to give us invaluable testing data, she was

instrumental in the implementation of the PEP program which has been one of the most significant success stories in Health Promotion over the last three years, and she plays an active role in the UAIC (Unprotected Anal Intercourse, Casual) campaign reference group, which is guiding the work of the Health Promotion Team in responding to perhaps the most critical issue with regard to HIV transmission in Victoria. Rebecca brings passion, imagination and creativity to this important partnership.

## **VAC/GMHC**

### **Special Service Award**

#### **Dominic Whitehouse**

Dominic Whitehouse has been a Volunteer with VAC/GMHC for over 13 years. Dominic has routinely and loyally offered his time to the members of the positive community through the HIV/AIDS Legal Centre (HALC) and is a specialist lawyer with subject matter expertise in Wills, Trusts and Estates. Recently, when HALC's continuing operations were in some jeopardy as a result of operational legal issues, Dominic was instrumental in connecting us with the right people to ensure the service remained active.

With an impeccable attendance record not only at his own appointments but also at HALC co-ordination meetings, Dominic has been a stalwart of HALC. Over the last 13 years Dominic has helped hundreds of HIV positive people within our community protect their rights. VAC/GMHC is fortunate to have had a volunteer with such specialist skills giving so generously of his time over such a lengthy period.

#### **Susan Clark**

Susan has been a friendly face at the Positive Living Centre's reception desk for more than two years. Members, volunteers and staff all appreciate her calm, professional approach. Susan is a warm and approachable person who is skilled at building rapport and a supportive relationship with members, many of whom have complex needs. The unpredictable challenges presented at the Positive Living Centre (PLC) make it vital to have someone as skilled as Susan working with staff to manage the reception area. Susan's excellent communication and interpersonal skills, combined with a steadfast and unflappable approach to her job, have made her an extremely valued part of the PLC team. Susan's consistency and reliability towards her volunteer role contributes significantly to the continuity of service that members can expect when they walk in the door. Susan's fine example of professionalism reflects well on the PLC as well as VAC/GMHC as a community based organisation.

#### **Bruce Clifton**

Commencing as a volunteer in the Community Support Program in early 2004, Bruce has been a mainstay of the transport program in the Southern Region. A long-term community activist, Bruce has always been committed to assisting those in need, so his involvement with VAC/GMHC and work with people living with HIV/AIDS was a logical next step.

There are many clients in the Southern Region who have benefited from Bruce's happy disposition, unswerving loyalty and willingness to make himself available at short notice. Entrusted to work with people with complex issues, for over two years

he has been providing monthly deliveries of food and medical supplements to isolated clients. He has been a reliable colleague for staff within the HIV Services Program.

In 2005 Bruce responded to the call for assistance with meal preparation at the Positive Living Centre (PLC) and has become part of the backbone of the kitchen volunteer team.

Bruce is an asset to the needs of the HIV Services Program.

## **Life Memberships**

### **Elaine Grant**

In 1987, with her family reaching adulthood, Elaine Grant found she had time to spare. Instead of indulging herself with a much deserved break from looking after the needs of others, Elaine's compassion and sense of social justice came to the fore. Responding to VAC/GMHC's advertisements – requesting volunteers to join the Community Support Program (CSP) to assist those living with HIV/AIDS – Elaine felt compelled to act. After all she had some spare time... even if it was to be for 'just a little while'.

To place the era of Elaine's involvement in context, 1987 was the same year our television screens were filled with the horrors of the *Grim Reaper* advertisements. This image was enough to frighten some in the community into silence about the disease and for many to distance themselves from anyone who had contracted the virus. Little about HIV/AIDS was understood. There were no treatments. Clients of support services were dying in increasing numbers and stigma towards them was driven by ignorance and fear.

Armed with little more than good intentions, spare time and basic VAC/GMHC training run in conjunction with Fairfield Hospital, Elaine joined the West Area Support Group. Infection rates were rising at alarming levels. People were becoming more ill and frail, necessitating a myriad of medical appointments. Elaine became a driver to fulfill this need. As people's health deteriorated, Elaine was there to help provide home care and to ensure clients could be supported with dignity, to the end of their life. She gave a promise to one client that she would be with him throughout his journey.

With changes to housing opportunities for clients, Elaine moved to assist the East Area Support Group to maintain the promise she made to 'her client'. Even a documentary was made highlighting the needs of this client and her work with him. In addition Elaine became a transport coordinator working with Community Support staff ensuring that as many clients as possible were having their needs met.

What began as a small step of offering 'some time' to assist clients of the Community Support Program (CSP) had grown into an invaluable commitment of twenty years of reliable service; twenty years service to the community in general and to those living with HIV/AIDS in particular. Such a milestone is more than any staff member employed by VAC/GMHC has ever managed to achieve.

It is the Elaine Grants of this world that help change it, and make it a better place. It is the Elaine Grants who make VAC/GMHC a far better and focused organisation.

# President's Message

If anything can be said about the last 12 months it is that HIV has gained more community attention than in previous years. The conversations about HIV in the gay community and in the broader community have increased. Hopefully, along with this has come an increased awareness of Sexually Transmitted Infections as a contributing factor to the transmission of HIV.

# President's Message



Kevin Guiney

The Victorian AIDS Council/Gay Men's Health Centre (VAC/GMHC) has had another very busy year with a number of issues affecting the organisation.

Statewide, there has been an increase in infections with HIV notifications increasing by 41% over the past 5 years. This has raised a number of challenges for the Board as our funding has remained stagnant for a number of years and the community has looked to us for an explanation for this rising epidemic. Within this context we have continued to negotiate with the Department of Human Services (DHS) – after a number of reports and reviews show this situation to be inadequate – for further concrete support. In response DHS has announced the establishment of an HIV Taskforce to look at the recent rises in infections and offer advice about a strategic response. As a result of this we are now seeing much better funded education campaigns targeted at the gay community.

At the end of last year DHS commissioned an external audit of VAC/GMHC. We still await the final report and associated action recommendations. These outcomes have implications for, amongst other things, securing recurrent funding to cover wage increases as a result of an Enterprise Bargaining Agreement between VAC and the ASU.

This year has seen an increase in the number of people charged for reckless endangerment offences -- knowingly infecting others with HIV. For quite a few weeks the press was filled with all manner of salacious reports about non-existent sexual sub-cultures. This created a lot of work for the organisation with us deflecting urban myths with the realities of the lived experiences of people living

with HIV, not to mention responding to the angst that this caused many HIV positive people. We have been warned this may only be the prelude to what may occur when a high profile case goes to trial in June 2008.

Despite these many challenges, the Board has still been able to focus on the strategic direction of the organisation, for the next three years. This process is gathering pace and about to move into the broader consultation phase. Additionally, an important review of the services offered at the Positive Living Centre (PLC) is about to begin. The services at the PLC have remained very much the same as those provided in the mid 1990s when the first centre opened in St Kilda and when the epidemic was very different. VAC/GMHC is committed to ensuring we are responsive to the needs of the positive community and to the changing epidemic -- hence the review.

If anything can be said about the last 12 months it is that HIV has gained more community attention than in previous years. The conversations about HIV in the gay community and in the broader community have increased. Hopefully, along with this has come an increased awareness of Sexually Transmitted Infections as a contributing factor to the transmission of HIV.

I commend our Annual Report to you and trust you will take the time to read though it and appreciate the breadth and depth of the work of the Victorian AIDS Council/Gay Men's Health Centre (VAC/GMHC). I would like to thank the Board members for their robust and valuable contribution to the ongoing governance of the

organisation. Thanks also to the staff and management team and many volunteers who make the organisation an inspiration to us all. I thank Mike Kennedy in particular for the great support he has provided me and the Board and the tireless work he has done for the organisation.

One of the continuing challenges for VAC/GMHC is to ensure that the services that we are offering remain relevant and up to date in light of changes in the HIV epidemic in Victoria. The environment in which we are working in 2007 is very different from 1983 when VAC was established, from 1987 when the death rate from AIDS was starting to climb, and from 1997 when the death rate had started to decline and there was great hope about the impact that new combination antiretroviral treatments would have on the quality of life for people living with HIV/AIDS and on the future shape of the HIV epidemic.

# Executive Director



Mike Kennedy

A handwritten signature in black ink, which appears to read "Mike Kennedy". The signature is fluid and cursive, with a long horizontal stroke at the end.

It is interesting to look back to that hopeful period in 1997 and consider that, while the death rate did decline steeply, many people living with HIV/AIDS encountered severe side effects from the new treatments including metabolic complications that still impact on our work today. In the intervening decade, new treatments have become available, treatment regimens have changed dramatically, the pill burden is considerably less and the serious side effects we saw early in the HAART era are now substantially less severe and less common.

However, we still have a high level of demand for our services that provide care and support for people living with HIV/AIDS. As the impact of the epidemic has changed, we have needed to change our services to keep pace. My strong sense, as someone who has been working in this field as a volunteer and as a paid staff member since the mid 1980s is that the current era is the most complex for HIV/AIDS service delivery organisations.

There are now multiple ways in which people living with HIV/AIDS experience the epidemic and a broad range of needs that people look to us to fulfill. The review we have just commenced of the services at the Positive Living Centre (PLC) will help us to address the questions raised by this diversity of needs. In an environment where there is static funding for care and support services, we need to determine what is the optimal mix of services and which are our priority populations.

Should we be delivering a broad range of services to a lot of people living with HIV/AIDS, or is it more effective to narrow the range of services we provide

but provide them in greater depth? And whichever model or mix we eventually go with, how do we continue to improve coordination of services across the range of service providers who now work with most of our HIV-positive clients so that services are driven by the needs of the clients and not the needs of the service providers? These are not questions that have simple answers and HIV/AIDS organisations around the world are struggling with similar issues. One of the advantages of the internet is that we are now linked into a number of these services in the UK, USA and Canada and are sharing our thinking and our experience of what has (and has not) worked in this area.

Our health promotion work is also done in a changing and challenging environment. In the first half of 2007 we have seen a welcome decrease of around 10 percent in new diagnoses of HIV but it is unclear whether this will be sustained across the full year. In the same period we have seen a significant increase in diagnoses of syphilis in both HIV-positive and HIV-negative men. There is good evidence that with established gay communities a rise in syphilis infections has preceded a rise in HIV infections.

Syphilis is a new challenge for us for a number of reasons. Consistent condom use for anal sex, our HIV message for more than 20 years, provides only partial protection against syphilis, which is transmitted much more easily than HIV. That means that testing and treatment need to be incorporated into our syphilis prevention messages. In people living with HIV/AIDS, syphilis can progress rapidly

if undiagnosed and untreated with potentially serious neurological complications.

Additional funding from the Department of Human Services (DHS) for a condom campaign and for a testing campaign puts us in a strong position to work in partnership with gay community organisations to address these challenges.

Finally I would like to thank the broad range of people and organisations who have contributed to our work this year. The President, Kevin Guiney and the Board have remained engaged and supportive in the face of the increasing challenges. The management team, the staff and the volunteers continue to inspire and motivate me with their commitment and their dedication to contributing to a strong community-based response. Our community and business partners continue to strengthen our response and build bridges outside the HIV/AIDS sector. Thank you all for your amazing efforts and I look forward to continuing my work with you in 2007-08.



# Board Report 06 07

Kevin Guiney President  
Mark McColl Treasurer  
Sonny Williams PLWHA  
Victoria representative  
Ian Coutts staff representative  
Grant Davies  
Laura Redgrave  
Bill Calder  
Mike Kennedy

**Absent**  
Jon Willis Vice-President/Secretary  
Guy Hussey staff representative  
Jack Graham  
Val Sands  
Mark Saunders



# Board Report

## **Board Work Plan**

As in previous years, the Board met for a day early in the Board year to plan its work program. Monitoring the progress of this work plan is a standing agenda item for Board meetings for the remainder of the year. A Board Briefing Paper accompanies all substantive matters that go to the Board for consideration and the Board has considered twenty-two such papers this year.

As in previous years, the Board established a range of committees to assist it in its work. The committees are able to work through a level of detail that would be impossible at a monthly Board meeting and have the added benefit of enabling the Board to draw on a wider pool of expertise to progress its work. The committees this year were the Finance Committee, the Strategic Directions Committee, the Research Promotion and Ethics Committee, the Political Organising Strategic Development Committee, the Policy Strategic Development Committee and the Fundraising and Marketing Strategic Development Committee.

The Board extends its thank to all of the external members who assisted its work by participating as committee members this year.

## **Financial Reports**

We have delivered a small surplus again this year mostly from periods when staff positions were unfilled while recruitment processes were underway. The Board has also decided this year to move provision for capital works on our Claremont Street building into a secure, structured fund. The building will require ongoing maintenance and it is prudent

that we make provision for this progressively, rather than making a large draw on accumulated reserves, as we needed to do a few years ago when the air-conditioning plant had to be replaced. The Board has therefore created a Building Maintenance Fund with an initial allocation of \$50,000 and future payments into this fund will be determined on the basis of expert advice about our anticipated maintenance needs.

Following discussions with DHS and the relevant unions, the employment of VAC/GMHC staff was transferred from the Gay Men's Health Centre to the Victorian AIDS Council part way through the year. This change is reflected in the annual accounts and will also make the consolidated accounts easier to read in future years.

The issue of indexation on our DHS contract, which has been reported on in previous Annual Reports, has now been finalised satisfactorily and HIV sector organisations are now receiving the same indexation as other organisations in the human services sector.

The Board would also like to especially acknowledge the ongoing generosity of DaimlerChrysler Australia/Pacific Pty Ltd who have continued their donation of a Mercedes-Benz Viano for the PLC. This vehicle has also been available for use by other HIV sector organisations.

## **Strategic Planning**

During the year, the Board and staff contributed to work undertaken by the DHS on the preparation of a gay men's HIV/STI Prevention Plan for Victoria, a project to develop an integrated

service model for the provision of HIV services in Victoria, and the deliberations of the Departmental HIV Prevention Taskforce. This work is the culmination of several years of lobbying by VAC/GMHC and other organisations in the HIV sector to establish an integrated service planning process for HIV/STI prevention and HIV/AIDS care and support services in Victoria.

In tandem with these statewide planning processes, we are well advanced with our own Strategic Directions process and a review of the services we deliver at the PLC. These internal planning processes should be finalised by December 2007 and enable us to incorporate the outcomes into discussions about implementation of the statewide processes and negotiations around our 2008–09 funding.

We are also in the final stages of negotiations with DHS and the Management Committee of the In Home Support Program (IHSP) to amalgamate the IHSP into the HIV Services Program at VAC/GMHC. This amalgamation will further enhance integrated service planning for our joint clients living with HIV/AIDS.

# Counselling Services Program

There has been an increase in therapeutic groups this year to strengthen the current Counselling Service Program curriculum -- working with individuals, couples and groups.

I received an abundance of feedback  
and understanding from the other guys  
in the group

PARTICIPANT IN A NEGATIVE PARTNERS GROUP

# Counselling Services Program



Nicci Rossel – Manager

Over the last year there has been a period of great change for the Counselling Services Program, which has enabled us to restructure the service in order to strengthen the provision of all services with a stronger focus on therapeutic group work. Whilst we have been able to maintain individual and couples counselling over the past year, we have also maintained our commitment to the existing therapeutic groups program. Counselling Services has been able to create a 0.6 (FTE) groups/counselling position, which will see the effective and consistent delivery of therapeutic groups. By doing this, Counselling Services is continuing its tradition of developing a range of services to address the continuing challenges of the HIV/AIDS epidemic and the needs of the GLBT community.

Group therapy offers individuals a means to learn about their behaviour and to promote personal change, within a therapeutic, realistic shared-setting, facilitated by trained professionals. Clients can experience group-work as less intimidating, more socially supportive and more readily accessible, due to the stated duration of the therapy. Group therapy is also utilised as a follow-up resource for clients who wish to refresh or extend their learning once individual counselling work has come to completion.

Research supports counselling services' experience that by actively participating in groups, clients can diminish feelings of loneliness, isolation, depression, and helplessness. Certainly the level of attendance, retention of

and feedback from VAC/GMHC clients attending therapeutic group work supports these positive advantages.

Counselling Services has tailored the orientation of its therapeutic groups to treat those issues specifically recurring within the VAC/GMHC client group, as a specialised demographic. Therapeutic groups include:

- Negative Partners Group
  - Anxiety Group
  - ReVisioning Group (also known as a Men's Behaviour Change Program)
- ReVisioning is the first MBCP to be offered to gay and bi-sexual men in Australia.

Therapeutic group work is a cost-effective and an efficient means of enabling clients to access psychological support, and Counselling Services will continue to develop therapeutic groups as part of its holistic treatment program.

At a broader level, Counselling Services has continued to offer training to the community sector so that generalist and community based services can be more aware of and sensitive to HIV/AIDS and GLBT issues. We have been working closely with the Men's Referral Service, the Same Sex Domestic Violence Awareness Training Project, which has been delivered through the ALSO Foundation, and with the Australian Association of Relationship Counsellors, both nationally and with the state branch.

Counselling Services in the last financial year consisted of a team of 40 people, which includes 3 paid staff, 15 volunteer counsellors, 10 interns, 8 supervisors and 4 students on placements.

Ongoing training, supervision and professional development was provided to all Counselling Services volunteers, interns and students to ensure the best services are provided to clients.

We provided 2681 individual and couple counselling sessions to members of the GLBT community and those infected with or affected by HIV.

Therapeutic groups that have been facilitated include one Negative Partners Group, three Anxiety Groups and one ReVisioning Group.

# Health Promotion Program

The Health Promotion Program delivers a range of preventative and health promotion strategies targeting gay men, homosexually active men, people living with HIV/AIDS and others at risk of HIV infection and STIs other than HIV. The framework for our health promotion work is a combination of adult and peer education, social marketing, community development and cultural intervention.

Our program includes Peer Education Outreach, Social Marketing Campaigns (including electronic media), Radio Programs, Counselling Online, Outreach, Training and Volunteer development.

# Health Promotion Program



Colin Batrouney -- Manager



As recently as 2001, Health Promotion at VAC/GMHC was known as 'Community Education'. In some ways, changing our name was an academic exercise. We have, since the inception of the organisation in 1983, unconsciously adhered to the cornerstone principles set down in the 1986 Ottawa Charter, namely:

- Building healthy public policy
- Creating supportive environments
- Strengthening community action
- Developing personal skills
- Reorienting health services.

I say unconsciously because the AIDS Council came into being three years before the charter was written, but looking at it today, the charter remains a useful and practical template for the health promotion work we do across the organisation and more particularly within the Health Promotion Program.

In addition to the key components of the Ottawa Charter, the Program has actively considered (perhaps more so over the last 12 months) the particular social determinants of health as they relate to gay men and men who have sex with men who may not identify, or have a close association, with the gay community.

Put simply, our focus is not merely on a disease, or the many ways in which it can be transmitted. Rather we focus on the social prism of how lives are lived paying particular attention to where sex and sexual practices sit in relation to those lives, taking into account the broader shifts and changes in both gay communities and the broader community at large. In this way, we ensure that our work is not only reflective of the lived experiences of our priority populations but made more relevant and effective.

Every person who contributes to the work of the Program comes to it with energy, commitment and a story. It's how peoples' lived experiences and their stories get woven into our work that gives the Program life. For example, we are fortunate to have outreach volunteers who work in Sex On Premises Venues (SOPVs) and online who have a range of experiences in SOPVs and a wealth of knowledge to contribute to our work. Peer facilitators, whose experiences as gay men first led them to join a peer group as participants and who then later input into these groups, share their knowledge and life experiences with other men, as group leaders. Volunteers who pack and distribute safe sex resources are committed to prevention and contribute hours and hours to the task of putting together safe sex packs. These safe sex packs are then distributed by an equally committed set of volunteers who work tirelessly at community events, sex and dance parties.

Staying Negative volunteers (both HIV negative and HIV positive) continue to generously share the stories of their lives in an effort to put the work of prevention into a context that lives and breathes for everyone who comes into contact with them. 2007 marks the 4th year that the campaign has been running and each man's story is a testament to the courage, honesty and passion of the gay men involved.

The multi-talented comedians and production team who brought to life 'The Secret Life of Arse' understood that health promotion could not only be highly creative and imaginative, but also incredibly funny. Series two is currently being developed.

Finally, the Health Promotion Program Team have had presentations accepted at the Australian Health Promotion Association conference in Adelaide, the International Union of Health Promotion and Education Conference in Vancouver and the International AIDS Conference in Toronto. In contributing to these forums on health promotion it is heartening to see that our work is not only highly regarded but also considered to be at the cutting edge of health promotion both nationally and internationally.

# HIV Services Program

Responding to changes in the epidemic and the needs of people living with HIV/AIDS, much of the work of the HIV Services Program has focused on the big picture implications of service delivery in response to these changes. VAC/GMHC has participated in various service model planning processes to best position us to meet these challenges and changing needs.

## The Positive Living Centre (PLC)

- Growth in membership from 890 in 2005--06 to 1105 in 2006--07
- 15 peer Support Groups, 160 participants
- 180 clients directly assisted
- 140 external referrals in the HIV/AIDS Legal Centre (HALC)
- 778 visits by members accessing massage, haircuts and complementary therapy and other self-care services
- 7 new computers for members
- 80 volunteers

## Positive Living Centre

51 Commercial Road Prahran  
Victoria 3181 P 1800 622 795  
or 03 9863 0444 F 03 9820 3166  
vacalds.asn.au

*"... what a surprise and pleasure it was to be able to receive a more balanced and broader selection of nutritionally beneficial foods and variety of grocery items compared to my last experience (of pantry)..."*

## Health Coach Project

- Over 40 participants supported to work on and identify health-related goals
- Cross-agency liaison and referral processes established
- 60 personal development and training sessions

*"... Participating has helped me work through a difficult period and given me the confidence to carry on with the work of self-change..."*

## Community Support Program (CSP)

- 83 clients supported by 3 Community Support Officers and 80 volunteers
- Refocus of volunteer training program
- Group social support initiatives to reduce isolation
- Increase in client transport services
- PK Tix providing clients' with a ticket face value in excess of \$200,000 for social/sporting/cultural events

*"... being with other people is very good for my self-esteem, my well-being and my mental health. I am very grateful for this important program and the staff are fantastic..."*

## David Williams Fund (DWF)

- 1247 requests for emergency financial assistance
- In excess of \$163,000 in requests
- \$113,000 dispersed in response to applications
- Food voucher value increased from \$20 to \$30
- Financial Literacy Project developed to enhance DWF member support via monetary skill development workshops

*"... without the support and generosity of the fund, my life right now would be hell. As I am housebound your assistance with my power bill means I can have warmth, lighting and even watch my TV..."*

# HIV Services Program



John Hall -- Manager

A handwritten signature in black ink, appearing to read 'John Hall', written in a cursive style.

The HIV Services Program has experienced significant challenges over the year with the departure of key staff and the ever-increasing complexities of the needs of people living with HIV/AIDS, particularly demonstrated at the PLC. Mental health, drug and alcohol issues, homelessness, poverty and isolation are major issues. Partnership with the Royal District Nursing Service remains critical and has seen a (pilot) HIV, Mental Health, Drug and Alcohol Clinical Nurse Consultant being appointed to assist in better community management of this group – and a much needed resource to our Program.

Over the past 18 months HIV Services has witnessed, on average, one client/member death a month. This impacts significantly upon its services and the close working relationship between PLC and CSP continues to underpin what support we are able to provide. HIV Services and the organisation more generally has been able to participate in the review and possible development of an integrated service model for the provision of HIV services in Victoria.

## **Positive Living Centre (PLC)**

During the year the PLC 'Nutritional Services' focused on improving meal quality and the range of goods available through the Pantry. The Peer Support Project established a diverse range of initiatives including a Hep C and HIV group, a Survivors group, Ongoing and Newly Diagnosed groups and up-skilled other agencies to run similar groups. Also, increasing dialogue with other services and agencies has been invaluable in best supporting both members and staff and with them we have successfully managed numerous community events and forums. The Southern School of Natural Therapies hosts a student acupuncture clinic every Thursday with a focus on side-effects from medications, peripheral neuropathy, nausea, pain and other health issues experienced by members. Regular activities and outings have remained popular with members.

PLC membership continues to steadily increase with 215 new members since the last Annual Report, taking membership to 1105. Many people present with a range of complex issues, which often compounds the already significant

needs of the existing membership. Given these service demands, and the PLC's limited financial and human resources to respond to new and emerging complexities, we have secured a consultant to review the functioning of the Centre.

## **Health Coach Project**

A successful grant application ensured this project would continue for 2007. Since its inception, over 40 participants have been assisted using a collaborative approach in identifying goals and working to individual health plans. This has assisted with motivation and skills development. Feedback has indicated an increase in self-confidence, self-esteem and the knowledge that individuals do have the ability to continue with the positive changes they have made.

## **Community Support Program (CSP)**

The Community Support Program (CSP) developed new strategies to combat social isolation, a widespread problem for people living long term with HIV. To break down social isolation and facilitate community interaction a 'monthly bus pilot project' was established. Further, CSP expanded its volunteer base by establishing a small team of volunteers to work across Melbourne. These volunteers provide a range of support services for clients in their local area which include group social activities. Many clients who have stabilised health can now be supported via group activities. Social support is augmented by our drop-in groups which offer fortnightly lunches in Northcote and monthly outings in the Frankston area. In conjunction with the Royal District Nursing Service's

specialist HIV team and CSP staff we continue to meet the needs of complex and high-needs clients. Approx 50% are co-managed and the collaboration through our formal partnership ensures these clients are well supported. Three Client Support Officers are responsible for (up to) 25 clients in each of the Program's three regions and provide short-term support to connect clients to other services and also longer-term monitoring.

## **David Williams Fund (DWF)**

Demand for DWF assistance has continued to grow with the highest expenses being for food vouchers, refrigerators, beds, washing machines, rent and medical services. To help ease some of the financial pressures DWF successfully obtained a grant from the Consumer Credit Fund to develop financial literacy workshops. These workshops cover budgeting, financial goals, credit and debt, emergency relief and consumer rights and aim to empower people in regard to money matters.

## **INTER -- Agency Collaboration**

HIV Services has collaborative working relationships with:

- People Living with HIV/AIDS Inc. Victoria (PLWHA Vic)
- Royal District Nursing Service (RDNS)
- In Home Support Program (IHSP)
- The Alfred Hospital
- Positive Women
- Straight Arrows
- Catholic AIDS Ministry
- AIDS Housing Action Group (AHAG)
- The Victorian HIV Consultancy
- Royal Melbourne Hospital.



# In Home Support Program

## VAC/GMHC Note

By agreement with the Department of Human Services, VAC/GMHC auspices the In Home Support Program as the Department cannot directly fund an unincorporated organisation. VAC holds the funds from DHS on behalf of the program and provides financial and HR services to the program. The IHSP Committee of Management provides the program's governance. Negotiations are well advanced between the In Home Support Program Committee of Management, VAC/GMHC and the Department of Human Services for IHSP to amalgamate with VAC/GMHC. This amalgamation will occur in 2007-08

**7** clients case managed in supported housing.

**23** outreach clients supported and maintained in their own homes.

**6283** hours of paid attendant care provided to these 30 clients.

**1232** transports provided.

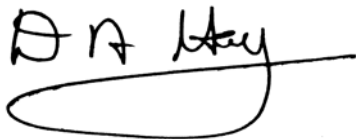
Governance and strategic direction provided by In Home Support Program (IHSP) Committee of Management.

## Positive Living Centre

51 Commercial Road Prahran  
Victoria 3181 P 1800 622 795  
or 03 9863 0444 F 03 9820 3166  
[vicalds.asn.au](http://vicalds.asn.au)

# In Home Support Program

Don Hay – Co-ordinator

A handwritten signature in black ink that reads "Don Hay". The signature is written in a cursive style and is underlined with a long horizontal stroke.

*"Being a client of the In Home Support Program has turned my life around. It has helped me to regain my health and my self-respect. It has enabled me to rebuild my life and find the 'me' I want to be. I feel in control once again."*

Now in its 11th year of operation, the IHSP continues to provide a stable domestic environment for clients with complex needs as a result of HIV/AIDS. In collaboration with Disability Attendant Support Services (DASSI), it ensures paid attendant carers are allocated to meet the identified needs and goals of the individual client. This is done via care plans, which also highlight the role of other key agencies. The objective is to enable the clients to remain in their own home and community environment for as long as practicable and to support them, collaboratively, to achieve good health outcomes.

Currently care is delivered to seven primary clients through the work of the IHSP Co-ordinator. These clients are housed in the seven properties managed by Supported Housing Ltd and case managed by the Co-ordinator.

The work of the Program has increased over the past year – responding to the ongoing complexities of residents, collaborating with other agencies to ensure effective care and support is delivered. Property maintenance and management issues and the growing demand for outreach services – has impacted significantly on the IHSP co-ordinator (a sole worker). The outreach client component has grown from 18 clients last year, to 23 this year, an increase of 27%. Growth has also been experienced in hours of paid

attendant care, (3.5%), and the number of transports, (7%). Co-ordinating the service and overseeing the care of a total of 30 clients means that the service, in its current form, has reached capacity.

In keeping with the Program's philosophy of supporting people to reside in their own homes for as long as possible, the Committee sees a further expansion of the outreach component to be essential to meet identified community need. Therefore a key issue throughout the coming year will be how best to balance need against structure and resources.

This year has seen two significant Program developments which will guide IHSP planning for the coming year. One is the IHSP Evaluation undertaken by Maureen Plain of the Alfred Hospital. The other has been the advancement of the integration proposal for the IHSP to become part of the HIV Services Program of VAC/GMHC. This is a proposal strongly supported by the Department of Human Services.

Overall the IHSP Evaluation assessed the model of care as being successful. Clients reported that secure, stable, affordable and safe housing, supported by carers and monitored by the Co-ordinator, has enhanced their health and wellbeing. They reported that their quality of life has improved which they felt would be in jeopardy if this service were not available to them – citing the problems of generalist public housing as an example of poor outcomes for positive people. It was also suggested by clients that to further enhance future outcomes additional human resources should be invested in the Program.

Given that the IHSP is a small stand-alone service, the IHSP Committee has been looking at structural change. This year the committee entered into negotiations with VAC/GMHC. Both the IHSP Committee and the VAC/GMHC Board have agreed to an in principal acceptance of this integration. Currently, a Memorandum of Understanding is being developed to ensure the Program will continue to operate under the VAC/GMHC umbrella. With many clients being jointly supported by both agencies the change is seen as a practical step in integration of care and support services for PLWHAS.

Good working relationships with key agencies have been essential to an appropriate community response in meeting the needs of clients. People Living With HIV/AIDS (PLWHA) Victoria, the Royal District Nursing Service (RDNS), AIDS Housing Action Group (AHAG), VAC/GMHC, The Alfred Hospital and The Royal Melbourne Hospital all play an important role in the life of both the Program and its clients.

Notwithstanding the complexities facing many clients, it is considered that as a result of the intensive and collaborative approaches undertaken by the Program, some clients are now in stable or improving health. This is the strength of the model. Excellent housing, care and support practices and strong relationships with agencies have all contributed to a successful year for IHSP. This outcome positions us well to confront the challenges of the year ahead and to continue to enhance the lives of those living with HIV/AIDS.

- The Centre Clinics provide holistic primary care for the community we serve in a pleasant welcoming environment.
- We aim to foster links with other health care providers to maximise health outcomes.
- We provide excellence in health care especially in the fields of HIV/AIDS and sexual health.

# Centre Clinics



Dr Louise Owen -- Clinical Director

A handwritten signature in black ink, appearing to read 'Louise Owen'. The signature is fluid and cursive, with a long, sweeping tail on the final letter.

The past year has seen significant change at the Centre Clinics, although we would hope the fundamental care and service delivery has not changed. Dr Nick Medland has taken a position in Vietnam, using his extensive HIV experience to train their doctors. This marks the end of a significant era of 10yrs for the Clinic. It is punctuated by sadness and also tremendous pride in what has been achieved.

I am very pleased and proud to be the new Clinical Director. I have been working at the Centre Clinics on a sessional basis for more than five years and I have a background in General Practice and am a Sexual Health Physician. I look forward to the next chapter in the existence of the Clinics as they continue to provide comprehensive and integrated HIV care.

We have been increasing our efforts around health system planning and co-ordinated team arrangements in order to give the best holistic care to our patients. This facilitates good-quality and timely communication with the other health practitioners involved in patients' care.

Our commitment to the general and sexual health needs of the community we serve will not waver. All of the doctors at the Clinics are highly trained and are continually increasing their knowledge and understanding in this complex area of medicine.

The mental health needs of our patients is also a priority. The introduction of a number of new medicare schemes aims to increase the number of people able to access counselling psychologists. Mental health care often involves a co-ordinated team approach and this process should facilitate communication

between health care providers. Good mental health care leads to improved health outcomes in any population.

The team at the Centre Clinic is committed to the provision of best quality health care in a holistic and caring way. New trends in HIV management are being delivered frequently. Our staff regularly attend scientific meetings and updates and have access to the latest research and management guidelines to inform new and emerging care strategies.

Preventative health strategies are also a very important part of our work. This includes health maintenance, health improvement and risk management strategies. We provide counselling, testing, vaccinations and written information to facilitate these messages.

Antiretroviral therapies are being refined and many regimes are available which have combinations of medications to reduce pill burden and hopefully side effects. We individualise care and treatment strategies for each person and base the regime and care plans on best practice as well as the individual preferences of our patients. We are able to offer the specialist vision within the primary care setting. In the past much of this care would have been available only in a tertiary hospital setting. Many people appreciate being able to access this health care in a pleasant, welcoming community environment.

# Strategic Development & Allied Services Program

The SDAS Program facilitates whole of organisation, finance, infrastructure and HR guidance and support.

- Volunteer management
- Finance management systems
- Updating and reconfiguring IT systems and equipment
- Website development and review
- Ongoing administration and organisational support
- Executive Support -- Board, AGM, ED support and VAC/GMHC constitutional reporting
- National and local alliances and sector membership
- Fundraising and World AIDS Day (WAD) management
- External communications with members, key stakeholders other agencies and broader community
- Policy and systems

Over the past 12 months significant improvements have been made particularly to financial management systems, volunteer management and support structures, fundraising principles and practice. Other aspects of the program have been notably strengthened including the executive support provided to the Board and Executive, administration systems, major building maintenance, big picture IT improvement strategies, IT hardware upgrades across the organisation and policy and interagency work.

# Strategic Development & Allied Services Program



Fiona Tunley – Manager

A handwritten signature in black ink, appearing to read 'Fiona Tunley'.

The challenge for a program such as SDAS (with such an extensive service breadth) is not only meeting its internal responsibilities (program, projects and services) but also delivering on projects that have external requirements/expectations – in all respects ensuring high level accountability. SDAS has done this well and has successfully

improved its services, guidance and support to all areas of the organisation (and as far as possible external to VAC/GMHC).

A major change over the past year has been the completion of the Employment Agreement between the Victorian AIDS Council Inc and staff who are members or are eligible to be members of The Australian Services Union (ASU). With this has come a significant change to how salaries are administered. It has required a transfer of payroll from GMHC to VAC and has seen the introduction of salary packaging opportunities for all staff.

Finance and Human Resources have continued to ensure that VAC/GMHC are compliant with all relevant legislation. Strict management of cash flow and budgets has ensured the ongoing viability of the organisation. Risk management strategies have been improved and increased attention has been given to ensuring that VAC/GMHC are up to date and compliant with OH&S Legislation. Particular attention has been paid to staff training in first aid and OH&S awareness across all three sites, Clinic, PLC and Claremont Street.

Once again, regular fundraising initiatives have produced increased revenues, and corporate support and sponsorships have had a marked effect on the organisation. Several new corporate relationships were initiated and developed during the year. This was particularly so for World AIDS Day, where total revenue was more than double the previous year. Additionally, in November 2006, VAC/GMHC mounted an ambitious production at Her Majesty's Theatre. 'The Short and Girly Show' demonstrated the

organisation's ability to bring together an excellent team which managed complex logistical issues extremely effectively, to support a cast and delight an audience and major sponsors. Third party fundraising also continues to be a growing source of revenue for the organisation. The willingness of outside individuals and organisations to support VAC/GMHC is a result of effective engagement with diverse communities and supports the proposition that VAC/GMHC is a cause worth supporting.

During the year capital grants funding enabled us to maintain and improve our IT systems by replacing outdated hardware and software. This has included installation of a new file, e-mail, database and print server at Claremont Street along with the upgrading of associated software.

A significant achievement for this year has been the review and strengthening of the Volunteer Program. Particular attention has been given to intake and training procedures, volunteer support, increased communication to volunteers, recognition of the work volunteers do and staff/volunteer management support systems. Of particular note has been the remodelling of all volunteer training – Information Session, Core Training, Program project training and the VAC/GMHC Volunteer Handbook – as advised by the VAC/GMHC Volunteer Reference Group (VRG) and volunteers themselves. The Volunteer Reference Group has representation from each VAC/GMHC Program area to ensure whole of organisation input and implementation of volunteer management and support systems.

New processes regarding the management of fundraising volunteers were also implemented in the lead up to World AIDS Day 2006. The 'Street Appeal' in particular was a great success with a much larger number of volunteers participating and several corporate volunteer groups taking part. Corporate groups are already indicating an interest in World AIDS Day 2007 and this area is proving to be a valuable resource for the recruitment of short-term volunteers.

The quarterly volunteer newsletter continues to be an effective resource for informing our volunteers about upcoming events and training, as well as providing general information about developments in the HIV/AIDS and volunteering sectors. Further, we offer numerous professional development sessions aligned with the work that volunteers do. We also recognise the depth of experience and incredible contribution that volunteers make to VAC/GMHC with volunteer social events, including National Volunteer Week and International Volunteer Day.

Finally, indicative of the SDAS program, this year has seen the continued exemplary work of the paid and unpaid workers in the administration team. Because of them, the building remains open, community groups are able to utilise our facilities, bills are paid, invoices processed, reports generated, data base maintained, the website is updated, donations processed, Board and employee and executive support is provided.

# Additional statistical financial information (unaudited) for the seven years ended 30th June 2007

For the Year Ended	2007	2006	2005	2004	2003	2002	2001
	\$	\$	\$	\$	\$	\$	\$
<b>INCOME &amp; EXPENDITURE</b>							
Total Income	4,016,673	3,716,365	3,761,764	3,682,800	3,862,674	3,503,489	3,187,145
Government Funding	3,024,842	2,930,568	2,875,281	2,945,468	3,108,756	2,959,723	2,576,830
Members' Fees	7,637	4,662	6,407	3,557	6,042	8,502	4,957
Interest	72,954	21,265	24,603	21,822	33,942	21,907	15,841
Other Income	911,240	759,870	855,473	711,953	713,934	513,357	589,517
Total Expenditure	3,874,832	3,664,262	3,677,088	3,590,764	3,849,916	3,815,418	3,137,592
Profit / (Loss)	141,841	52,103	84,676	92,036	12,758	(311,929)	49,553
<b>ASSETS &amp; LIABILITIES</b>							
Current Assets	2,072,030	1,402,257	1,173,042	1,009,852	698,450	921,766	1,576,158
Property, Plant & Equipment (1)	3,951,079	3,974,103	3,646,550	3,662,872	3,246,670	3,287,028	1,413,372
Total Assets	6,023,109	5,376,360	4,819,592	4,672,724	3,945,120	4,208,794	2,989,530
Creditors	1,503,990	1,029,021	860,523	827,957	637,294	921,584	1,067,704
Provisions	262,531	232,592	226,425	196,799	216,739	208,881	164,124
Total Liabilities	1,766,521	1,261,613	1,086,948	1,024,756	854,033	1,130,465	1,231,828
Reserves (1)	2,434,556	2,434,556	2,104,556	2,104,556	1,632,556	1,632,556	--
Members' Funds	1,822,035	1,680,191	1,628,088	1,543,412	1,458,531	1,445,773	1,757,702
<b>FINANCIAL RATIOS</b>							
Current Ratio	1.173	1.111	1.080	0.985	0.818	0.815	1.280
<b>GENERAL PERFORMANCE</b>							
Full Time and	24 (F)	28 (F)	23 (F)	30 (F)	26 (F)	26 (F)	23 (F)
Part Time Employees	20 (P)	21 (P)	26 (P)	19 (P)	22 (P)	25 (P)	19 (P)
Volunteers	302	155	145	142	147	157	129
Members	370	405	425	448	443	404	411

(1) ALL BUSINESS REAL ESTATE PROPERTY IS OWNED BY THE GAY MEN'S HEALTH CENTRE INC AND WAS LAST REVALUED AS AT 30TH JUNE 2006

# VAC/GMHC would like to thank

55 Porter Street Sauna Abode Nightclub

Adam Hamilton Adam Richard Adam Wright --  
Country AIDS Network (CAN) Adrienne Walters  
AIDS Housing Action Group (AHAG) AIDS Trust  
of Australia (ATA) Albert Lean Alfred Hospital  
Alfred Hospital ID Clinic Alfred Hospital Social Work  
Department Alternative Life Styles Organisation  
(ALSO) Foundation Andrea Powell Andrew  
Timmins Annie Phelan Art Deco Picture Framing  
The Australian Ballet Australian Centre for the  
Moving Image (ACMI) Australian Dancing Society  
Australian Federation of AIDS Organisations  
(AFAO) Australian Open Tennis Championships  
Australia Pro Arte Australian Research Centre in  
Sex, Health and Society (ARCSHS) Australian  
Shakespeare Company Bamba Press Bay City  
Caulfield Sauna Bay City Seaford Sauna Beat  
Bookshop Bell Shakespeare Company Benny  
Mazzullo Beyond Dance Party Bianca Duggan  
BNews Bororoondara Volunteer Resource Centre  
Brendan Castle Brett Hayhoe Brian Frewin Brian  
Price Burberry Productions Café Zuccherò Cal  
Wilson Cancer Council of Victoria Carolyn Worth  
-- South Eastern Centre Against Sexual Health  
Australia (SECASA) Casey McCann Cath Hill  
Catherine McClements Cinema Nova Circus  
OZ City of Melbourne Club 80 Club Spa Sauna  
Colin Krycer Colts Lifestyle & Fitness Craig Delphine  
Christie Feagins Crowne Plaza Melbourne  
Dainty Consolidated Entertainment (DCE) Dani  
Phaedonis Daren Pope David Burnett David  
Chong David Menadue Dawn Wilcock Deal  
or No Deal Dean Murphy Deb Cutts -- Prostate  
Cancer Foundation of Australia Deborah Cox  
Dominic Whitehouse Denise Scott Di Clark Di  
Rolle Publicity Disability Attendant Support  
Service Inc. (DASSI) Don McGovern DonorTec

Dr Iain Butterworth Dr Rob Guevara DT's Hotel  
Dungeon Warehouse Eagle Leather Ease  
Elizabeth Watts Enda Markey Ethel Chop Fab  
Nobs Theatre Inc. Family Feud Fiona O'Loughlin  
Fiona Pride Frank Bonnici Galactic Circus Gamblers  
Help Gary Spencer Gasworks Arts Park Gay &  
Lesbian Health Victoria (GLHV) Gay & Lesbian  
Switchboard Victoria Gay AA Gel Works Geelong  
Performing Arts Centre Geoff Tate Glen Eira  
Volunteer Information Resource Service Globe  
Café GLYDE The Sexual Health Company Gordon  
Wilson Grant Davies Greg Carter Guy Hussey  
Hares & Hyenas Harriet Cornfeld-Fraser Heaven  
@ 151 Heavenly Solutions Hedged Maze & Tea  
Rooms Henry von Doussa Her Majesty's Theatre  
Her Majesty's Theatre Ballarat HIV Peer Support  
Facilitators HIV, Hepatitis & STI Education Resource  
Centre HIV/AIDS Legal Centre (HALC) Volunteers  
HomoHistories7 Conference Horizon Place  
Hothouse Entertainment Hoyts Ice Café Ikon  
Images IMAX In Home Support Program (IHSP)  
Committee of Management International  
Concert Attractions International Puppetry  
Carnival Jackie Schultz Jacquie Round James  
Clyne Jarrod Peterson Jeffrey Robertson John  
Thomson John Wain JOY 94.9FM Judith Gorst  
Judith Lucy Judy Frecker Kaye Sera Kellie  
Kendrick Ken Woodgater Kerri Boyd Kristin Tytler  
L'Occitane en Provence Laird Hotel -- Ron &  
David Lawrence Cameron Len White Level  
One on Franklin Levi Strauss & Co. Life Saving  
Victoria LifeWorks Liz Brown Liz Crock Lou  
Kervan Louise Naughton-Smith Lucrezia & De  
Sade Luke Gallagher Lynne Hillier M Le MAC  
Cosmetics MAD Productions Maize Café Marc  
Bryce Marg Hayes -- Catholic AIDS Ministry  
Mark Shrubsole Martin Watts Martin Wischer  
Matthew McCarthy & Clear Matthew William  
-- Photographer Oxfam Australia Max Niggi  
McPherson Ink MCV Megan Coulter Melbourne  
Fringe Festival Melbourne International Arts  
Festival Melbourne International Comedy  
Festival Melbourne International Film Festival  
Melbourne Maritime Museum Melbourne

Observation Deck Melbourne Queer Film  
Festival Melbourne Rainbow Band Melbourne  
Sexual Health Centre Melbourne Symphony  
Orchestra Melbourne Theatre Company  
Melbourne Writers' Festival Melbourne Zoo  
Melbourne's Dirty Bad Boys Melissa Thompson  
Memorial Quilt Project Mens Line Australia  
Mercedes-Benz Michael Coppel Presents  
Michael Hall-Manark Printing Michael Williams  
Microsoft Australia Minus 18 Monica Dullard  
Monique Weissner Motorola Spring Fashion  
Week Musica Viva Nan McGregor Nancy  
Cato National Association of People Living  
With HIV/AIDS (NAPWA) National Gallery of  
Victoria Nick Ward No Attitude Guys (NAG)  
Opera Australia Opera Victoria Opium Den  
Oriental Spirit OUT Video Outreach Project  
Volunteers Oz Showbiz Cares/Equity Fights AIDS  
(OSCEFA) Palace George Cinema Pat Cogan  
Paul Evans Paul Cosgrave Paul Jones Peer  
Education Volunteers Peninsula Cinema  
Warragul People Living With HIV/AIDS Victoria  
(PLWHA Vic) People to People Computer Services  
Peter Burch Peter Dunn Peter Gourlay --  
Victorian Equal Opportunity & Human Rights  
Commission Peter Papadopoulos Phillip Sweeney  
PLC Kitchen Volunteers PLC Operations Volunteers  
PLC Reception Volunteers Positive Gay Men's  
Group Positive Speaker's Bureau -- PLWHA Vic  
Positive Women Prahran Market Clinic Puffing  
Billy Steam Railway Q Magazine Queer Muslims  
Rachel Berger Rebecca Matheson Redemption  
Relationships Australia Richie Robertson Ritchies  
Supermarkets Rosz Craig Royal District Nursing  
Service (RDNS) Royal Melbourne Show Rug Up  
Project Ruth Gold Safe Sex Volunteer Packers  
Sally Carr -- Resourcing Health & Education in  
the Sex Industry (RhED) Sam Arsenis SAX Health  
care Scott Brennan Scott Davis Sharon Horvat-  
Danilovic Sidecracked Entertainment Centre  
Simon Hall Solebake Sonic Dolphin Sonny Williams  
Soula Fillipas South Eastern Volunteer Resource  
Service SSL Australia St Kilda Film Festival  
St Kilda Football Club Stage Two Lighting

Staying Negative Storytellers Staying Negative  
Transcribers -- Phillip S and Joseph T Steamworks  
Sauna Stella Entertainment Stephanie Christian  
Stephen Haby Straight Arrows Subway Sauna  
Sue-Ann Post Sue Macgregor Suellen Peak  
Supported Housing Ltd Susan Paxton Suzy  
Malhotra Sydney Dance Company Tattersall's  
Australian DanceSport Championship Ten Plus  
The Astor Theatre The Chocolate Box The  
Comic's Lounge The Famous Spiegeltent The  
Market The Peel The Piercing Urge Tom McFeely  
Token Events Trent McWhinney Trevor Jacobson  
Utopia VAC/GMHC Volunteer Night Managers  
Vanessa Wagner Vic Perri VicBears Victoria  
Police Gay & Lesbian Liaison Officers (GLLOs)  
Victorian Equal Opportunity & Human Rights  
Commission Village Geelong Cinema Village  
Jam Factory Cinema Village Sunshine Cinema  
Vince Boyd Vintage Men Virginia Trioli VIVAIDS  
Volunteering Victoria Ward McKenzie Warwick  
-- Sharp & Pendry Wendy Little Westgate  
Community Initiatives Group (WCIG)  
Employment Services Wet On Wellington  
Women's Circus WoofClub Dance Party  
Xchange Hotel Yackandandah Gay & Lesbian  
Festival Yarra Valley Tourist Railway Young Bucks

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& Ric Wallis