



the future

“I love it when our tribes come together - respecting our differences and celebrating our diversity. We’ve made amazing strides forward. What we can accomplish when we’re united is a force to be reckoned with.”
KAM



THORNEHARBOUR HEALTH

ANNUAL REPORT 2017 - 18



the future

“When I came out, my family was a source of acceptance and support. I was lucky. One day perhaps every young person will feel safe and supported at home – to be open and honest about who they are.”
DANTE



Last year's annual report focused on LGBTI+ human rights abuses all over the world. The fantastic community volunteers who were pictured in that report highlighted the very real, life or death issues faced by our communities globally. The report struck a chord. The overwhelmingly positive feedback we received for the work culminated in the report winning the award for Excellence in Communications in the not-for-profit sector at the 2018 Australasian Reporting Awards.

This year, where possible, we have invited the fabulous cast of volunteers back to give us their reflections on the future. It seemed like a good fit for the organisation as we look to the future ourselves as Thorne Harbour Health.



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THORNE HARBOUR HEALTH IS THE TRADING NAME OF THE VICTORIAN AIDS COUNCIL INC. AND THE GAY MEN'S HEALTH CENTRE INC.



the future

"I look forward to the day every LGBTIQ person is able to breathe and live without persecution, to love and be loved without judgement, to walk this world without shame."

ANA

Following our discrete brand reboot in 2014, the VAC and GMHC Boards commissioned a brand consultation in 2017. The consultation was designed to determine how our brand is perceived by the community and if those perceptions would serve us well into the future. The consultations found that a significant proportion of the respondents thought that the name, VAC, was not inclusive or reflective of the broader work we do with regard to LGBTI health and wellbeing. The challenge for the Board was to arrive at a new brand that paid homage to our origins and was inclusive enough to recognise our work now and into the future, to do this we looked at how we began and the leadership that has defined our work and our organisation.

OUR ORIGINS

At a time when HIV and AIDS existed as terrifying spectres on the horizon, Alison Thorne was among the many concerned community members at the first public meeting, attempting to grapple with the emerging crisis. She made the simple statement; "What are we doing about this, and how can we do it? What we need is an organisation." Her rallying cry was an important founding voice in what was to become the Victorian AIDS Council. Alison, along with eleven others, formed the inaugural Board.

KEITH HARBOUR'S VISION

Keith Harbour was President of the Victorian AIDS Council / Gay Men's Health Centre (VAC/GMHC) from 1987 to 1989 and is remembered as a hero in our organisation and the HIV and AIDS sector as a whole. He was a fierce proponent of inclusion, coining the phrase "Talk to us, not about us." And was instrumental

in the creation of the People Living With AIDS program as part of VAC in 1988, writing in that year's annual report, "The establishment of People Living With AIDS Victoria as a program group of the AIDS Council and Health Centre is a source of pride. People living with AIDS are involved in all decisions and program areas within the organisation and this has helped to focus all services to the needs of the users."

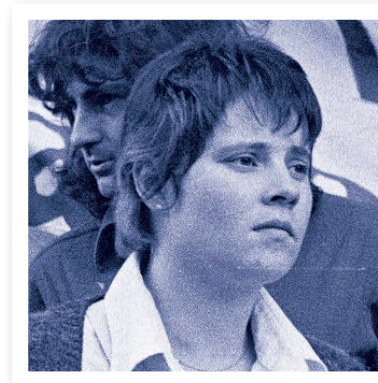
This statement was made 13 years before the United Nations General Assembly Special Session on HIV and AIDS adopted the GIPA* Principle as a 'commitment made by the governments of the world to the full inclusion of people living with HIV in decision making that affects us'.

LGBTI RIGHTS

In the early 80s, when even some organisations on the left sought to marginalise the interests of their lesbian and gay members, Alison sought to champion those that she considered to be the 'most oppressed in the working class – including queers'. Alison wrote at the time, 'women, people of colour, and lesbians and gays were essential movers and shakers within the working class.' She championed the rights of GLBTI communities and has consistently fought for the inclusion, equity, diversity and dignity of our community in all her activist work.

MATTERS OF LIFE AND DEATH

Keith was arrested on the steps of the Victorian Parliament House in 1990 for taking part in an ACT-UP demonstration fighting for the rights of people living with HIV. He was a tireless advocate for access to treatment, having meetings at Fairfield



ALISON THORNE



KEITH HARBOUR

Hospital right up until the week he died with other members of ACT-UP to discuss strategy related to treatment access.

Alison participated in demonstrations to get access to the first antiretroviral drug used to fight HIV, AZT. Keith was instrumental in establishing buyers clubs to ensure Australians had access to life saving drugs.

TRANS RIGHTS

Additionally, at a time when many in the feminist movement questioned the rights of trans women Alison fought for transgender rights industrially, championing the cause of trans people who have been discriminated against in the workplace as well the plight of trans people in the prison system. She has studied the origins of transgender oppression and their links to homophobia and women's oppression.

A BETTER FUTURE

Throughout her life, without regard to the considerable personal cost of her work, Alison has fought for PLHIV, trans people and more broadly for the rights of the LGBTI community.

Keith Harbour worked to save thousands of lives and paved the way to HIV becoming a chronic, manageable condition. Keith died in August of 1991 working to make our community a better and safer place.

Both Alison Thorne and Keith Harbour can be described as fearlessly courageous in their commitment to inclusion, health equity and diversity related to the health and wellbeing of our LGBTI communities, fighting in their own ways with both integrity and optimism.

In aligning our organisation with leaders like Alison Thorne and Keith Harbour we

are recognising that the care, health and wellbeing of the sex, sexuality and gender diverse communities will need bravery, commitment, imagination and vision.

For over thirty-five years of an epidemic that has claimed the lives of thousands in our community, the assets that have remained centrally important to our work are dignity, integrity and optimism. When we had nothing else, we had hope. We hope that this is the last decade of this epidemic and we can continue to work for the dignity and wellbeing of our community on the solid foundation and legacy of our past.

*GIPA is the acronym The Greater Involvement of People Living with HIV, often coupled with MIPA: the Meaningful Involvement of People Living with HIV.

A man with a beard and glasses, wearing a red button-down shirt, khaki pants, and black sneakers, stands with his arms crossed in front of a wall covered in colorful graffiti. The wall is made of a grid-like material, possibly chain-link fencing, and is painted with various colors and patterns. The ground is covered in gravel and some dry leaves. The lighting is bright, suggesting an outdoor setting during the day.

the future

"I often think our communities are much more diverse and have more in common than we realise. Someday, perhaps we'll be more interconnected, woven together to be stronger and helping each other face the challenges still ahead of us."

RAY

PRESIDENT & CEO REPORT

Our communities know that achieving progress can often be slow and arduous, requiring unremitting dedication. Along the way, we celebrate the small victories in order to motivate us, to keep us going, to ensure we stay the course. Less frequently, we see the culmination of all that dedication and those victories result in something greater. The past financial year has seen a handful of those landmark moments.

MARRIAGE EQUALITY

With the announcement of the marriage equality survey, we raised our concerns around the negative toll this would take on the health and wellbeing of the communities we serve; however, we also understood that if this was going to happen, we needed to mobilise – and quickly! The ‘YES’ campaign saw us strengthen partnerships and foster new ones. Our volunteers, staff, and members came together to make badges, knock on doors, and get the word out to ‘Vote YES’. Over one weekend, the façade of the Peter Knight Centre was covered in a rainbow ‘YES’ mural – which went on to become the backdrop of countless photos over the months that followed. We set up additional services to meet the increased demand from our LGBTI communities – whose mental and often physical wellbeing suffered in the face of the divisive public debate.

On 15 November 2017, our communities gathered to hear the results of the survey. As the Australian Bureau of Statistics announced that over 61% said ‘yes’, an emotional wave of relief and celebration erupted. The process left us bruised, but not beaten.

OUR FUTURE HOME

As we left the Peter Knight Centre, whose newly painted rainbow ‘YES’ mural remained untouched until the last wall of the site was demolished in 2018, we began a process of relocation that will continue over the years ahead. The staff and services previously housed on Claremont Street moved into 615 St Kilda Road in November 2017. Co-located with the Cancer Council of Victoria, this move has seen a dramatic increase in the quality of facilities we can offer clients, staff, and community groups; however, this move is only a temporary one.

We’re a growing organisation with programs, services, and projects currently spread across every state and territory in Australia. We need to ensure we plan for our future and can continue to support our growth. While we’re excited to plan a joint future with the Victorian Pride Centre, providing accessible services to our LGBTI and people living with HIV (PLHIV) communities will require more than one single location. Sites like SAMESH in Adelaide and the Positive Living Centre in Prahran will continue to play important

roles in the communities they serve, but many of our other sites will need to grow and evolve in the years ahead. With that in mind, we’re excited by the possibilities that stand before us with the recent purchase of 200 Hoddle Street in Abbotsford. Together with our plans for delivering health services in the Victorian Pride Centre this will see major service sites both north and south of the Yarra.

BIOMEDICAL PREVENTION

In recent years, we’ve been leading a community dialogue around biomedical prevention and its potential to change the landscape of the HIV epidemic. With regard to pre-exposure prophylaxis (PrEP), we have worked with clinicians, researchers, politicians, and community groups to help increase access to this game changer in HIV prevention through demonstration trials in Victoria, South Australia, and Tasmania. Now on the Pharmaceutical Benefits Scheme (PBS), PrEP is easier to access than ever before, and we’re one step closer to seeing it reach its fullest potential in helping to end the onward transmission of HIV.

Meanwhile, the past year has seen even

more research confirm that Undetectable = Untransmittable (U=U). People living with HIV who are on effective antiretroviral therapy and have sustained an undetectable viral load do not pose a risk to their sexual partners.

The virtual elimination of HIV transmissions draws closer and biomedical interventions are seeing HIV rates drop across the country. While we have seen those communities closest to the organisation embrace this wholeheartedly, a great deal of work lies ahead in ensuring everyone understands that HIV is not over, but there are more ways than ever to prevent HIV.

WE ARE THORNE HARBOUR HEALTH

As we approached the end of the financial year, we also drew closer to our 35th birthday as a community-controlled organisation. This important milestone prompted us to revisit our origin and look back on our legacy. Upon reflection, we noted the significant changes to the landscape of HIV as well as our evolution to provide support and services to LGBTI communities alongside PLHIV.

Inspired by our past, and recognising that our brand no longer represented the

full scope of our work, we looked to the future, and marked our 35th birthday with the transition to Thorne Harbour Health.

This transition was complemented by our new *Strategic Plan 2018-2023* and supported by a branding campaign that featured a diverse collection of faces representing the communities we have grown to serve. This change is a big step but one that has been warmly embraced by so many already.

Thorne Harbour Health is nothing without its community. We exist because of our volunteers, our members, our service users and our staff. Thank you to everyone who brings Thorne Harbour Health together. In particular, we would like to thank our volunteers, particularly our Board members, and our staff for their tireless work.

This year we have seen a civil inequity corrected, innovation in HIV prevention embraced, our legacy honoured in our new identity, and our journey toward a new home has only just begun. These are no small victories – these are big changes for the future.

Chad Hughes, President
Simon Ruth, CEO



THE DRAMATIC MOMENT WHEN THE RESULT OF THE MARRIAGE EQUALITY VOTE WAS ANNOUNCED OUTSIDE THE STATE LIBRARY, VICTORIA
IMAGE COURTESY OF BROADSHEET



the future

"I lost a young friend a few months ago to suicide. The poet, Rumi, wrote: 'Ignore those who make you fearful and sad, that degrade you back to disease and death. Set your life on fire, Seek those who fan your flames.' I hope one day we can all do just that."

SUE

EVOLVING ACTIVISM

In a hot room, in the summer of 1989, upstairs from a second-hand clothes shop in Gertrude Street, a group of around 30 gay men sat and listened to Keith Harbour and Chris Gill strategize around what was needed to get access to the newest, most promising drugs to fight HIV.

APPROPRIATE ACTION

That meeting was the foundation meeting of the Melbourne chapter of the AIDS Coalition to Unleash Power, ACT-UP. The meeting was orderly and respectful, Keith was, as usual, pragmatic, insightful and strategic. There was no abuse, no trolling and no grandstanding. We all left with a clear idea of what was required and what measures of civil disobedience would be appropriate to highlight the need for lifesaving medication for those who needed it. In an era before email, before mobile phones, texting or social media, we had come together to organise and to fight for what was necessary. In much the same way, a committed group of community members had gathered years before at the emergence of the HIV epidemic, at a meeting in Carlton when lesbian, socialist and feminist activist, Alison Thorne took the microphone saying "What we need is an organisation!" Sowing the seeds for the creation of the AIDS Council.

DIVERSE COALITIONS

Back in 1989, the coalition was real. Chris Gill makes the point that it was a truly inclusive movement. "For the first time we came together as gay men and lesbians to fight for what we believed in. Artists, designers, actors and even puppeteers were involved from the organising of fundraising parties to demonstrations and political organising – everyone brought their particular talents to bear on issues that were literally matters of life and death."

After the 1996 AIDS Conference in Vancouver that demonstrated, for the first time that combination antiretroviral therapy including protease inhibitors was effective in lowering HIV viral load to undetectable levels, activism shifted gears. That result in 1996 and the subsequent widespread initiation of combination therapy was the culmination of almost two decades of dedicated activism, on the streets, in clinical research and in the corridors of the pharmaceutical industry and political bureaucracy. No one believed that AIDS was over. No one became complacent about HIV. But activism shifted to the human rights of people living with HIV and the needs of others in the global south which remained and in some cases still remain in dire need of services, infrastructure, prevention, treatment and care.

In 2018, activism is just as passionate, just as committed and just as effective, with a varied collection of very powerful tools that were the stuff of science fiction in 1989. Instagram, Facebook, text messaging, mobile phones and websites are the standard tools for living in 2018 and all are deployed strategically in activism efforts now. Most recently, the emergence of pre-exposure prophylaxis (PrEP) saw the community mobilised using these tools and more in the fight for access, education, TGA approval and PBS listing.

COLLABORATION

The things that this recent effort have in common with what was going on in 1989 is a shared passion for what was seen as an urgent need and a willingness to work collectively with a high degree of collaboration, commitment and creativity. Chris Williams from PrEP'D for Change and Michael Whelan from PrEPaccessNow (PAN) are two community activists who have been at the forefront of the effort for PrEP access from the beginning.

Michael Whelan was aware of activist efforts from the past, "I was definitely aware of what ACT-UP did in the early days of the epidemic and, in a way, it gave us license in the activist space now." But Whelan acknowledges that the modern tools at his disposal have an upside and a downside. "The upside is that it's definitely easier to mobilise people - and mobilise them quickly. It's possible for a couple of thousand people to be engaged online - that's not a problem, but in some ways, that points to the downside of digital activism. So, it's easy to get people motivated around your cause, but the other side of that coin is that online it's easy for 'slacktivism' to occur and the capacity for lateral violence is pronounced in the digital space. But I would have to say that the upside easily outweighs the downside, and generally people are respectful and collaborative."

Chris Williams, one of the co-founders of PrEP'D For Change agrees that there are advantages and disadvantages to the new activism. "Online activism means that you can reach a very large audience and not be constrained by geographical boundaries anymore. I guess the downside is that it can be a little impersonal at times. I'd like to think that on PrEP'D For Change that we've had a very good community response and that people have played courteously with each other. That doesn't mean that there aren't very strong beliefs about what messages should go out to community, but we believe that it's constructive for people to be able to see both sides to an



DIGITAL ACTIVISTS TODAY HAVE TOOLS THAT WERE THE STUFF OF SCIENCE FICTION IN THE EARLY DAYS OF THE EPIDEMIC, STILL THERE ARE SOME REMARKABLE SIMILARITIES BETWEEN THEN AND NOW.

issue rather than to shut down the conversation. Having said that, there are limits, and sometimes, not often, but sometimes you do have to step in."

WORKING TOGETHER

The issue of PrEP access actually gave rise to the Victorian PrEP Accord, which was a combination of the 'old school' call around and the newer tools of digital activism. VAC, (as Thorne Harbour was known at the time) convened a meeting of clinicians, social researchers and grass-roots community activists to form an accord on how activism would work in relation to PrEP going forward. This accord was formed in exactly the same way the foundation meeting of ACT-UP Melbourne occurred; with real people in the same room at the same time face-to-face. The PrEP Accord was established through

coalition, collaboration and a degree of negotiation, but its effect was significant. Chris Williams comments, "The PrEP Accord was very important and very valuable, mainly because it gave the opportunity for those of us in the so-called 'activism' space the opportunity to work with other organisations, as well as those in clinical research and clinicians, giving us pathways into conversations with these people where we were considered as peers - working to the same end. In any activist space there could be rebels with a cause but not much of a clue. The Accord allowed us to look at the bigger picture with regard to politics and public health more generally." The PrEP Accord demonstrated, yet again, that activism at every level of the HIV response is most effective when we work together.



the future

"It comes down to human rights. We all deserve food, shelter, an education. We all deserve the chance to be free from discrimination. Equality and freedom to live peacefully should not be something we have to fight for."

YASLEEM

CONNECTING WITH COMMUNITY

1,400,000+



MORE THAN 1,400,000 PEOPLE WERE REACHED VIA THORNE HARBOUR HEALTH'S FACEBOOK PAGE.

385,000+



OVER 385,000 PEOPLE VIEWED OUR CINEMA AD TACKLING STIGMA DIRECTED AT PEOPLE LIVING WITH HIV. THIS NUMBER INCREASES TO 2,051,223 THROUGH THE AD BEING VIEWED INSIDE THE CINEMA COMPLEXES.

347,000+



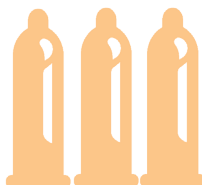
OVER 347,000 PEOPLE VISITED OUR WEBSITES FOR INFORMATION FROM Emen8, DRAMA DOWNUNDER, STAYING NEGATIVE, TOP2BOTTOM, TOUCHBASE, AND HIV STILL MATTERS.

65,000+



OUR INCREDIBLE VOLUNTEERS, WHO FORM THE LIFEblood OF OUR ORGANISATION CONTRIBUTED OVER 65,000 HOURS OF VOLUNTEER WORK TO THORNE HARBOUR HEALTH.

53,000+



OVER 53,000 CONDOMS WERE DISTRIBUTED TO VENUES, PARTIES AND OTHER COMMUNITY EVENTS.

40,000+



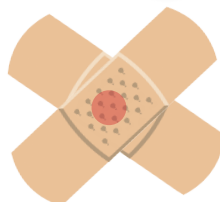
OVER 40,000 RED RIBBONS WERE DISTRIBUTED DURING OUR WORLD AIDS DAY STREET APPEAL.

5,300+



OVER 5,300 PEOPLE ARE ACCESSING PrEP TO PREVENT HIV VIA THE PrEPX TRIAL. THORNE HARBOUR HEALTH ALONG WITH OUR COMMUNITY PARTNERS HAVE PLAYED AN IMPORTANT ROLE IN ADVOCATING FOR ACCESS, APPROVAL AND PBS LISTING OF THIS BIOMEDICAL PREVENTION TOOL.

2,820+



OVER 2,820 RAPID TESTS WERE CONDUCTED AT OUR PRONTO RAPID TESTING SERVICE.

2,703+



OVER 2,703 APPOINTMENTS WERE MADE AT EQUINOX, THORNE HARBOUR HEALTH'S GENDER DIVERSE HEALTH SERVICE.

the future

“While tradition is so important, I hope in the future that families can break through traditional stereotypes and embrace that LGBTI people can have the same fulfillment and happiness in their rainbow families.”

WEI



20 STORIES FROM THORNE HARBOUR HEALTH



1 Well, Well, Well VAC Legacy Series

In March 2018, Well, Well, Well (our weekly radio show on JOY 94.9) began producing the VAC Legacy Series looking at our community's 35 year history in responding to HIV/AIDS. The series featured interviews with over a dozen community legends including: Phil Carswell, Adam Carr, Alison Thorne, Jamie Gardiner, Chris Gill, Colin Batrouney, Tony Keenan, Maureen O'Brien, Bill O'Loughlin, David Menadue, Bruce Parnell, Sue Stone, David Bradford, and the late Jim Hyde. The first episode of the series aired shortly after the 40th anniversary of Mardi Gras, acknowledging the

important role of the gay and lesbian liberation movement in forging a generation of community leaders and activists that would go on to lead the community response to HIV and AIDS. The series unpacked the activism and advocacy that went on, how our community navigated the political landscape, and how we persevered in the worst of the epidemic. The series both documented first-hand accounts of our organisation's origin story while also acknowledging various names and places from our past like Keith Harbour and Fairfield Hospital.

2 Farewell Peter Knight Centre

Following the sale of the building on Claremont Street, the services and programs delivered out of the Peter Knight Centre officially packed up and moved in November 2017. Before moving into 615 St Kilda Road, the staff and volunteers looked back on the history of the building with an afternoon of storytelling by some of the more senior members of the organisation who provided a colourful retelling of our move into the building in the 1990s.

In the weeks leading up to the move, the organisation left its mark on the building with the façade having been painted with a rainbow 'YES' mural leading up to the outcome of the Marriage Equality survey. The mural remained untouched until the building's demolition in mid 2018.

3 David Williams Fund - Phil

Phil* was a victim of domestic violence. When he escaped, he was financially, mentally and emotionally traumatised. Through the David Williams Fund, he was able to get all his fines and demerit points waived under the family violence scheme, as they were all his ex-partner's. We were able to work together with our LGBTI Family Violence team to provide Phil with accommodation and some furniture. We then linked him into his current bank's domestic violence project, which provided him with a \$1000 debit card and a \$500 Coles Myer card. The funds helped him in setting up the rest of his house. Phil was ever so grateful and appreciative for all the financial and emotional support. He now has a safe place to call home. *Name changed

4 Housing Plus - James

James* has been part of the Housing Plus program for over twenty years. He and his partner moved into their home in the late 1990s, James's partner was very sick and they were granted a property in order for James to care for him. James recalls how relieved he was to be able to care for his partner with dignity and respect in the privacy of their own home, after spending some time moving from one unfordable private rental to another on a low income. Over the years, there have been many ups and downs in his life, including: difficult neighbours,

financial hardship, major maintenance needed on the property, and antisocial behaviour in the neighbourhood.

Housing Plus has been there alongside him during this journey – supporting, advocating and being there to give him general housing advice. James is currently getting back to work restoring pianos. Sadly, his partner is no longer with him; however, Housing Plus remains a support for James when he needs it and ensures he maintains his tenancy no matter what comes up in life. *Name changed



5 VAC Women - Working Together

Hot on the heels of International Women's Day, we released a new video featuring some of the great women of (then) VAC making a difference to the health and wellbeing of our LGBTI communities. As a community-controlled organisation, lesbian, bisexual and queer women have played an important role in establishing the organisation, and that tradition continues to grow today with more staff, volunteers and Board members from the women's community. We created this video to help generate awareness of the growth within the

organisation and our role as an LGBTI health organisation in helping to meet the health service needs of the women in our community.

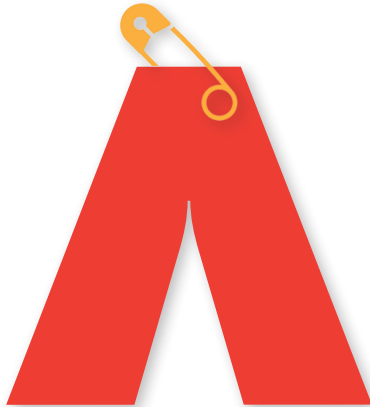
The video was launched on social media, followed by ChillOut Festival, receiving over 700 views in the first 4 days. It has since had more than 1,200 views. Through sponsorship arrangements, the video was also screened during opening night and throughout the Bendigo Queer Film Festival, as well as Geelong Queer Film Festival.



the future

"I look forward to a time when everyone is offered the opportunity to be heard - to not be silenced. We all deserve respect and the chance to fully participate in society."

JACINTA



6 Victoria's Red Ribbon at 25

In the lead up to World AIDS Day 2017, we celebrated the 25th Anniversary of the Victorian Red Ribbon. The Red Ribbon was the first of the plethora of awareness ribbons we now have to commemorate and acknowledge a wide variety of worthwhile causes; however, the Red Ribbon was the first and continues to be an important symbol used to remember lives lost to HIV/AIDS and to celebrate those with the virus living and loving amongst us still.

In our 30th anniversary book, *Under The Red Ribbon*, the story of the uniquely Victorian Red Ribbon is told. Brent Lacey redesigned the International Red Ribbon by removing the loop at the top so that more ribbons could be made from a roll, resulting in more 'bang for our buck' per roll. Brent intended that funds raised from the sale of the ribbons would benefit Victorian women, men, and children living with HIV through the David Williams Fund. The 25th Anniversary event retold this story alongside entertainment and dinner for our members and special guests on the night.

Opera singer Merlyn Quaife sang our National Anthem recreating the moment Joan Carden appeared on national television wearing a Red Ribbon while singing the National Anthem at the 1992 AFL Grand Final. The exposure of this new symbol of AIDS awareness had a substantial impact, and awareness in the community increased rapidly of what a simple ribbon could mean. Our Red Ribbon continues to provide that awareness every World AIDS Day on 1 December each year.

7 THCountry LDAT Project

This year saw the launch of the first ever LGBTI Local Drug Action Team (LDAT) project to be funded in Australia by the Alcohol & Drug Foundation, spearheaded by Thorne Harbour Country. Drawing on current research and knowledge, the LDAT Project has innovatively brought together a team of local LGBTI people from the Loddon Mallee to form a committed and strong community reference group, host community forums, develop community champions, and begin to develop a range of online digital media resources to target alcohol and other drug misuse of LGBTI people in regional and rural areas.

The community forums were held both in Bendigo and Castlemaine and both proved to be particularly powerful. The forum saw people tell their stories of what led them to the misuse of alcohol and other drugs as well as exploring why this is such a problem in our community. Participants reported finding the forums to be highly beneficial to the community, reporting on how "the nature of the group sessions produced an open flow and very genuine discussion".

The community reference group has been working hard on collating all the information collected at the forums and are now in a position to film and launch their first ever campaign. This has been an exciting project for LGBTI people living in the region with more exciting LDAT projects already in the planning.

8 Toy to the World

Co-produced by pencilneck production, Toy to the World returned in October 2017 for an encore community art fundraiser. Centred around custom vinyl "Popobe" bears, the design competition pulls together local, interstate, and international artists to create one-of-a-kind works at various sizes. The creations are then showcased in a public exhibition at ArtBoy Gallery in Prahran. Funds were raised as each artwork was auctioned off online.



9 SAMESH Our Lives

The stigma surrounding HIV is still very real and present for the roughly 27,000 people living with HIV nationally. For World AIDS Day 2017, our SAMESH team in Adelaide released the *Our Lives* campaign – a series of clips exploring the lives of three HIV positive South Australians and their personal experiences of HIV stigma and discrimination. Featuring Adrian, Kath, and Greg, the personal narratives of the *Our Lives* series investigates topics surrounding HIV such as social stigma,

sexual discrimination, the long term health benefits of early treatment, and the role of having an undetectable viral load in preventing the onward transmission of HIV.

The diversity of stories in the series reminds us that the landscape surrounding living with HIV has changed, but we have a long way to go in educating the broader community in what living with HIV really means in a contemporary setting.



10 Little Pricks

At the start of 2018, we developed the *Little Pricks* immunisation campaign for gay, bisexual, and other men who have sex with men at the request of the Department of Health. The campaign was created in response to an outbreak of Hepatitis A and Meningococcal C amongst gay and bisexual men. The Department of Health responded to this outbreak by providing free vaccinations to all men who have sex with men, and included the Hepatitis B vaccination along with the HPV vaccination for

men under 26. *Little Pricks* aimed to make gay and bisexual men aware that there was an outbreak in Victoria, that a vaccination was available, and that it was now free. We sent campaign materials to over 2,000 GP clinics, community centres and health care settings, and included an online social marketing component on various social networking sites alongside radio advertisements on JOY 94.9 and cinema advertisements at MQFF.



the future

“As a proud Yidinji/
Butchulla/Meriam
woman, connecting with
my fellow First Nation
LGBTQIA mob has
enriched my spirit, pride
and keeps me strong. My
partner and I have found
a connection with our
mob that has been very
valuable for us. We all
need that.”

JAMARA

11 PARTi Project

This year we partnered with Star Health on a project called the Peer Advocacy Response Training Initiative, or PARTi Project. The PARTi Project is led by three peer workers and focuses on reducing drug-related harm in nightclubs in the cities of Stonnington and Port Phillip. The project emerged after the tragic deaths of 3 people in January 2017 who had allegedly consumed 'bad pills' while partying in the Chapel Street precinct. This escalated the need for both increased access to evidence-based information on safer using for people who use party drugs as well as a stronger harm reduction focus from nightclubs. Our PARTi Project team has worked closely with nightclubs in the Chapel Street precinct (and beyond) to encourage venues to adopt policies that align with harm reduction principles. The team has also delivered training to nightclub staff to enhance their knowledge on responding to drug-related harm and overdose. The team launched their first 'Drug Awareness' training for peers on International Overdose Awareness Day on the 31st of August. The training was tailored towards people who use drugs in a party setting and focused both on preventative strategies for reducing drug-related harm as well as recognising and responding to drug-related harm.

12 HIV and Ageing

In partnership with Living Positive Victoria, we have launched HIV & Ageing - a HIV peer support network and positive self-management program for people living with HIV aged 50 and over. Both the Positive Self-Management program and monthly peer support network gatherings offer a social setting to talk about a variety of topics relating to ageing while living with HIV.

The Positive Self-Management Program aims to empower people by equipping them with information and teaching skills and techniques to improve self-care and doctor-patient interaction, with the ultimate goal of improving one's quality of life. HIV & Ageing builds confidence and equips participants with the skills to coordinate all the things needed to manage their health as well as keep active in their lives. In particular, HIV & Ageing is designed for those living with longstanding HIV alongside significant co morbidities.

13 GLOBE Win for Volunteer Myka Williams

Thorne Harbour volunteers have always featured as finalists and winners for the Volunteer of the Year award at the GLOBE Community Awards, but Myka Williams was the first to share his story about overcoming social isolation and mental health concerns by taking action. For him, volunteering was part of the solution and a way of giving back to services that had assisted him. The lack of confidence that can sometimes occur due to poor mental health is debilitating. Myka used the security and safety offered at the Positive Living

Centre and our volunteer program to rebuild his confidence and more actively participate in his community.

Myka's real strength lies in his ability to empower others and build social capital. A strong advocate for what volunteering can deliver, Myka has helped many other people living with HIV find meaning through their contributions.



ABBY LANDY AS SHE APPEARS IN THE VIDEO, *COULD IT BE HIV?*

14 Could it be HIV?

With funding from Viiv Healthcare, we produced *Could it be HIV?* - a clip for GPs and other medical healthcare professionals with the aim of increasing their awareness around symptoms of HIV. *Could it be HIV?* highlights the need to offer an HIV test to individuals who present with possible HIV-related symptoms, but due to a perception that they are not

at high risk of contracting HIV, might be misdiagnosed. The clip shares the story of Abby Landy, a young heterosexual Australian female living with HIV. Abby presented at several medical clinics and hospitals with severe HIV related symptoms but was not offered an HIV test due to a perception by healthcare professionals of her not being at risk of HIV. Her personal story is interwoven

with information provided by Professor Jenny Hoy, the Director of HIV medicine at the Alfred Hospital. Professor Hoy provides information about various symptoms that someone might present with and suggests that any of these symptoms would warrant an HIV test regardless of perceptions of risk. The clip aims to get healthcare professionals to ask, 'Could it be HIV?'

15 Nanyubak Yapaneyepuj Victorian LGBTI Retreat

This year, our Aboriginal and Torres Strait Islander Project Lead was a steering committee member and participant for the Department of Health and Human Services: Nanyubak Yapaneyepuj Victorian LGBTI Retreat. Held in Shepparton from 18-20 May 2018, the gathering attracted approximately 40 Aboriginal LGBTI participants and allies to Yorta Yorta Country. The program included cultural sessions, yarning circles, a welcome

dinner, open mic night and other art and healing sessions.

A common theme from participants was the feeling of isolation felt by Aboriginal and Torres Strait LGBTI Mob - emphasising the importance of events like this one to help people connect. Our project produced a gym towel for the event featuring the colours of the Aboriginal and Torres Strait Islander flags and the Pride flag. In an effort to stay connected, participants

have formed a Facebook group and exchanged details in the hopes of seeing more events for LGBTI Aboriginal and Torres Strait Islander people in the future. Upon evaluation, the event was successful in strengthening resilience, engagement and inclusion as well as promoting Aboriginal LGBTI networks and providing a strong voice for the Aboriginal LGBTI community.



the future

“The world is moving at a more rapid pace. I hope we ensure we take a moment to stop and listen to each other and open our eyes to what’s happening in front of us. Live in the moment. Breathe the fresh air.”
MOHAMED

16 iHeal Family Violence Services

Our Family Violence Team continues to deliver a suite of services to our LGBTI communities across Victoria. This includes the Flexi Support Packages for victim/survivors of family violence and intimate partner violence as well as the Revisioning program for gay, bisexual or queer men that use violence, now going into its 14th year. This past year saw the addition of the iHeal program. In response to recommendations arising from the Victorian Royal Commission into Family Violence, this new service delivery model was developed. iHeal seeks to support an individual's long term recovery from the trauma of family and intimate partner violence and is a specialised recovery program for LGBTI victim/survivors.

The framework puts individuals at the centre of their recovery journey, acknowledging that survivors have unique and important insights into what recovery means to them and what supports their recovery. The program offers case management, counselling, and support from specialised recovery support workers. Clients can access iHeal in their own community – this outreach component brings a much valued accessibility to the program.

One Flexi Support Package recipient described their experience of family violence as “the most difficult time I have ever experienced in my life” and after receiving support they wrote that their life and the lives of their children have improved greatly. They described the material aid for them and their children as making their everyday experience of caring for their children so much more manageable. They went on to state that for the first time since they separated from their ex-partner, they feel a genuine legitimacy in their capacity as a parent.



18 ReThink the Drink

Officially launched this year at the Bendigo Queer Film Festival (BQFF), ReThink the Drink is part of VicHealth's Alcohol Culture Change Initiative. The project incorporates different elements to encourage women to think about their relationship with alcohol and how a hangover could be stopping them from achieving their goals. Following the opening night film at BQFF, the launch included a panel of guest speakers, including Commissioner Ro Allen, discussing a range of health issues concerning Lesbian, bisexual and queer (LBQ) women in the region. In addition to print collateral and digital promotions, the project is inviting LBQ women in regional areas to share their story about reducing drinking and what they have gained by doing so. By sharing these stories and hearing others, the project aims to support individuals in realising they are not alone.

The project has a dedicated section on the Thorne Harbour Health website, where a number of these stories can be read. The project also aims to encourage health seeking through providing links to our counselling and AOD support services.



19 Queer Pool Party

As Midsumma was coming to a close, we produced a new event for the festival – the Queer Pool Party. The afternoon event was a relaxed, alcohol-free recovery session from a busy two weeks of festival events. We took over the Prahran Aquatic Centre to create a colourful and queer-friendly space. Over 600 people dropped in to enjoy the sunshine, a sausage sizzle, and the

sound of Pop Chops DJs throughout the day. There was truly something for everyone. Our friends at Melbourne Surge helped Water Polo Victoria run Bumpa Ball activities as well as ticketing, serving up snags, and set up. As we wrapped up the event, the one question people asked was ‘Are we having a Queer Pool Party next year?’

20 PRONTO! Bendigo

PRONTO! Bendigo was launched in December 2017. It was an incredible expansion for Thorne Harbour Country. As a collaboration with Bendigo Community Health and the Burnet Institute, PRONTO! Bendigo has been responding to the specific sexual health testing needs of gay, bisexual, and trans men and non-binary people living in regional and rural Victoria. PRONTO! Bendigo is working closely both with clients and local agencies to improve quality and access to services.

Since launching, the team have reported stories of men travelling over 3 hours to have their sexual health check, having never tested before out of fear of stigma and discrimination. Others shared stories of being too scared to disclose to their family doctor or simply were not aware of how to best care for themselves.

To help get the word out there about PRONTO! Bendigo, we arranged for a community filming day for people to come together and express



their passion for the health of our community. The footage is being used to create 5 short videos, featuring faces from the community while reminding everyone that it's time to get tested!



17 Medically Supervised Injecting Service

We along with the Victorian Alcohol and Drug Association, Harm Reduction Victoria, Living Positive Victoria, and the Australasian Professional Society on Alcohol and other Drugs, drafted a joint statement that called on the Victorian Government to trial a medically supervised injecting centre (MSIC).

Forty-three leading health, community, and alcohol and other drug organisations, as well as prominent individuals, signed the joint statement. In October 2017, one month after the release of the joint statement, the Andrews Government announced it would trial a medically supervised

injecting centre for two years.

Several months later, in July 2018, the medically supervised injecting centre in Richmond opened its doors. Within its first two months of operation, the centre had 8000 visits and responded to 140 overdoses, many of which would have been fatal without the immediate medical care provided by the centre.

The safe injecting room has reduced ambulance call outs, referred people to the rehabilitation and support services they need, and most importantly reduced overdose deaths. In short, the trial of the safe injecting room has been an overwhelming success.



the future

“With time, I hope we do more than just respect our cultural diversity – we celebrate the fact that we are different beings and we have so much to offer each other. We can make the world a better place when we collectively embrace that diversity.”

IRENE

THORNE HARBOUR HEALTH AWARDS



PAUL KIDD

LIFE MEMBER

Paul Kidd is a long term advocate for the rights of people living with HIV. He is a past Board member of both VAC/GMHC and Living Positive Victoria, serving three years as its President. Paul chaired the joint HIV Legal Working Group whilst we fought to have Section 19A of the Crimes Act repealed. He received the VAC President's Award 2014, the Living Positive Victoria Positive Advocate Award 2014, the HIV Media Award 2004, and the Supreme Court Exhibition Prize 2018 for his research into the criminalisation of HIV in Victoria. He continues his activism as Supervisory Board Secretary of the international HIV Justice Network and the Victorian Government LGBTI Taskforce Justice Working Group.



MAUREEN O'BRIEN

LIFE MEMBER

In 1986, Maureen was employed as the Community Health Nurse at the Gay Men's Community Health Centre. Maureen established both our nursing service and the Centre Clinic, recruiting our first medical staff. Maureen worked tirelessly in the counselling program through the 90s at a time when deaths from AIDS were a frequent occurrence, providing counselling to countless young men, people with AIDS and their loved ones. Maureen always fought for the rights of PLHIV to have agency and power over their care, from diagnosis to end of life decisions. She served on the Boards of VAC/GMHC and Fairfield Hospital.



DAVID OWEN

PRESIDENT'S AWARD

David is a life member of Thorne Harbour Health (THH). He commenced his volunteer service with VAC/GMHC in 1988 as a member and then team leader of care teams. As a barrister and solicitor in Victoria, he also volunteered with the HIV/AIDS Legal Centre, and conducted over thirty courses at Fairfield Hospital on the "Care and management of persons with AIDS". During this time, David acted as our honorary solicitor and assisted with the purchase of the Claremont Street headquarters. In the past two years, David has been a member of the THH Investment Committee, and has led the negotiations on our participation in the Victorian Pride Centre.



LEE CARNIE

GREIG FRIDAY YOUNG LEADER AWARD

Lee Carnie is a lawyer in the Human Rights Law Centre's LGBTI Rights Unit. Lee works, through strategic litigation, campaigning and advocacy, to protect and promote the human rights of our communities. Lee has worked on the High Court challenge to the Marriage Equality postal survey, to improve federal anti-discrimination protections, and to improve access to hormone treatment to trans and gender diverse young people. They have worked across Australia to elicit state apologies for historic unjust criminal convictions including in Victoria and South Australia and secured a public commitment to repeal the 'gay panic defence' in South Australia. They are also a volunteer mentor with Liberty Victoria's Rights Advocacy Project.



VIRGINIA CUMMINS

SPECIAL SERVICE AWARD

For over a decade Virginia Cummins has created powerful distinctive images for a range of our organisational initiatives. Cutting her regular fee to a fraction, and some-times only charging to cover costs Virginia has worked with us to deliver multiple award winning campaigns and annual reports that are considered benchmarks in the field of communications. For over 10 years Virginia has demonstrated that she is a powerful supporter of our organisation and the LGBTI community as a whole.



PROFESSOR JENNY HOY

SPECIAL SERVICE AWARD

Professor Jenny Hoy has worked for over 30 years in the fields of HIV medicine and clinical research relating to HIV and AIDS. Her contribution to the health and wellbeing of our community has been significant, sustained and passionate. Combining empathy, compassion and scientific rigor, her contribution to the fight against HIV and care for people with HIV and AIDS has made her one of the most significant figures in the response to the epidemic in Australia and around the world.



NIC HOLAS

SPECIAL SERVICE AWARD

Nic Holas has lead a revolution in PLHIV engagement and participation. First, via the establishment of The Institute of Many (TIM) in 2013 which created a peer-led platform and social umbrella for PLHIV, engaging many younger people for the first time. Nic has become a very public face of HIV, writing and speaking on his experience as a man living with HIV, including appearing on ABC TV, at several of our events and with articles in *The Guardian*, *Junkee* and *Archer Magazine*. Through TIM, NIC has spearheaded Australia's engagement in the U=U movement, including the *In Bed With U=U* Campaign.



MAX PRIMMER

MEDIA AWARD

Max Primmer has played a vital role in ensuring that the LGBTI voice has a place in rural Victoria. Through his Friday night program, *Rainbow Radio* on Phoenix FM Bendigo and his regular show *Queer and Now* in Castlemaine, Max has promoted Thorne Harbour Country programs, local community members and initiatives. Max's work both combats isolation and encourages community connection and engagement.



HERBERT SMITH FREEHILLS LAWYERS

SPECIAL SERVICE AWARD

In acknowledgment of their significant pro bono contribution in the sale of Claremont Street, negotiations with VPC and assisting our organisation in the management of an industrial issue in early 2018. In addition, Herbert Smith Freehills have been unceasingly generous in their dedication to helping the organisation meet our strategic goals and objectives.



This year we mourned the loss of two important figures in the history of our organisation, Tony Maynard and Professor Jim Hyde. The fact that both men were serving board members at the time of their death is a sign of their unfailing and passionate commitment to the work of our organisation.

TONY MAYNARD

Tony Maynard was appointed the first ever treatments officer at the AIDS Council in the early 90s, working when HIV notification rates and deaths from AIDS were at their highest.

His work at this time, when deaths from AIDS were a weekly, sometimes daily, occurrence was characterised by sensitivity, care, generosity of spirit and genuine regard for the clients, many of whom were friends of Tony's from the community. He could often be seen sharing a meal or a coffee with clients, talking through treatment options and encouraging people to never give up hope, often in the face of seriously debilitating illness and the tragic reality of facing death. For his own part, he never allowed the toll of the epidemic to show, always cheerful with a wicked sense of humour he was always ready with a smile and a welcome, no matter how difficult the circumstances or the issues he was facing with his clients and friends.

COMPASSION & FORESIGHT

Looking back on his career, a colleague recounted how Tony assisted a young HIV positive couple to access vertical transmission prophylaxis, prior to the publication of a landmark study, so that they had a healthy, HIV negative baby. In a world before the internet, knowing that this information was out there before publication was truly remarkable. Tony was incredibly knowledgeable and he genuinely cared about people.

With an established focus on HIV treatment throughout his career, Tony was excited to join the Board at a time when biomedical prevention's role in ending HIV was being fully realised with the introduction of pre-exposure prophylaxis (PrEP) and the impact of an undetectable viral load in people living with HIV.

His legacy will be one of considered attention to scientific evidence tempered

by a genuine sense of compassion and a commitment to caring.

PROFESSOR JIM HYDE

At the time of his death, Professor Jim Hyde was an active and vigorous board member. His almost 30 year involvement with the organisation was characterised by passion, intelligence, strategic insight, and a fierce commitment to the HIV and AIDS sector as well as the LGBTI community as a whole.

Jim was a life member of VAC and was, in fact, the General Manager of the organisation from 1990 to 1994. During that time, he guided the organisation in its development from our modest premises in Collingwood to our relocation to Claremont Street in South Yarra, where we remained for 23 years. He was also at the helm in 1993 when the first Positive Living Centre opened on Acland Street in St Kilda. Jim was a founding member of the AIDS Council of South Australia and the South Australian Gay and Lesbian Rights Lobby.

Jim held senior policy positions in both the New South Wales and Victorian Departments of Health, including serving as Victoria's Director of Public Health where he brought his grassroots activism and community awareness to bear on matters of high level public policy.

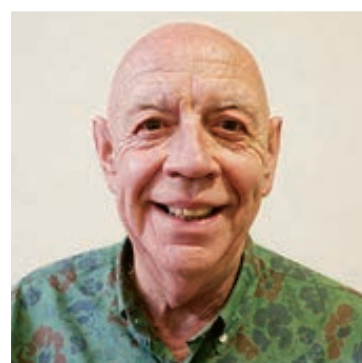
He was awarded the inaugural Rainbow Award for Leadership in the Gay Community in 1993 and the PLWHA Victoria President's Award for Services to the Positive Community in 2008.

Jim was an Adjunct Chair at the University of Western Sydney, an Honorary Senior Lecturer at the Monash Centre for Ethics in Medicine and Society, and a Professor of Public Health Policy at Deakin University.

PASSIONATE & PROVOCATIVE

Jim could be seen by some as provocative in his relentless pursuit of issues related to the health and wellbeing of LGBTI communities. He could be a fierce opponent and a formidable ally. Jim always said, "I try to contribute as best I can." Through all his endeavours, he sought to make our community a safer, healthier, and more secure place.

At the time of his death, Thorne Harbour Health President, Chad Hughes said,



TONY MAYNARD



PROFESSOR JIM HYDE

"Jim was a great strategic thinker, a skilled negotiator and policy expert, as well as a generous elder of our community.

"Whenever we came across complex issues related to the organisation, Jim was always ready with sage advice and critical insights that I personally, and the organisation as a whole, benefitted from.

From the sale of our previous premises in South Yarra to our rebrand to Thorne Harbour Health and countless other matters, his legacy is significant."

Both Tony and Jim provided leadership, insight, energy and compassion at pivotal points in the history of the epidemic and our organisation. They will be missed.



the future

“PrEP and biomedical prevention are paving the way toward making HIV a thing of the past. There may not be a cure for HIV, but I look toward a future where the onward transmission simply doesn’t happen.”
DIMITRI

As an LGBTI community controlled health organisation, Thorne Harbour Health is based in the communities it serves and which it is governed by – by community, for community. As the range of services we offer develops; as our geographic catchment expands and as our communities' expectations of us grows, we need to ensure we remain fully engaged with our communities' needs and wants. Through our new Strategic Plan, we have once again committed to ensuring the community can engage at all levels of the organisation and that we recognise the value that our diverse communities bring.

THE MEANINGFUL INVOLVEMENT OF PEOPLE LIVING WITH AND AFFECTED BY HIV (MIPA)

Thorne Harbour Health's commitment to the principles of the meaningful involvement of people living with and affected by HIV (MIPA) continues to inform the organisation's strategic vision, policies and service delivery. The MIPA Committee, comprising of both community and staff member representatives has continued to implement the THH 2016-2018 MIPA Report and Action Plan recommendations and is integrating these principals of meaningful inclusion into all aspects of the organisation's operations. Key actions this year included supporting Positive Leadership Development Institute attendance at AIDS 2018, establishing support structures for transgender people living with HIV and ongoing support to Positive Women Victoria's peer support program.

Thorne Harbour Health remains the only AIDS Council in Australia to have completed a MIPA audit and will seek to undertake this process again in the coming year. In addition to engaging with individual community members and service users living with HIV, Thorne Harbour Health regularly consults our partner representative organisations Positive Life South Australia, Positive Women Victoria and Living Positive Victoria.

DISABILITY COMMUNITY ADVISORY GROUP

Thorne Harbour Health has partnered with members of the LGBTI community to build the organisation's capacity to engage with and meet the needs of LGBTI people with a disability. The project began with the formation of a Community Advisory Group comprised of community members with lived experience. A key aim of the project is to build the individual capacity of community members by providing them with the tools, skills and sector experience required to continue this work within other organisations.

As part of this, a Co-Mentoring Framework, underpinned by principles of co-design and sustainability, has been developed. As part of this approach, community members and THH employees have been matched as co-mentors to facilitate mutual learning. The aim is to develop internal organisational champions with increased awareness and knowledge of disability inclusion, as well as community champions who have had access to opportunities to develop their skills and knowledge.



THORNE HARBOUR HEALTH'S COMMITMENT TO MEANINGFULLY ENGAGE WITH THE LGBTI ABORIGINAL AND TORRES STRAIT ISLANDER COMMUNITIES CONTINUES WITH THE DEVELOPMENT OF THE INNOVATE RECONCILIATION ACTION PLAN FOR 2018-2020. PHOTO COURTESY PETER WAPPLES-CROWE

A further aim of the project is developing a model for organisational capacity building that may be replicated in other organisations, with the overarching, longer-term objective of improving accessibility and inclusion across communities. An evidence-based, peer-led organisational audit of inclusion and accessibility is underway and learning from this activity will inform an organisational action plan, and critically will shape the development of a sustainable capacity building model.

INNOVATE RECONCILIATION ACTION PLAN (INNOVATE RAP)

As our Reflect RAP came to completion, Thorne Harbour Health's commitment to meaningfully engage with the LGBTI Aboriginal and Torres Strait Islander communities continues with the development of the Innovate Reconciliation Action Plan for 2018-2020. The RAP Working Group consists of Aboriginal and Torres Strait Islander community members and Thorne Harbour Health staff representatives.

The Innovate RAP reinforces our commitment to working with the Aboriginal and Torres Strait Islander community toward HIV prevention and harm reduction, and commits to the ongoing development of Thorne Harbour Health staff and Board understanding of Aboriginal and Torres Strait Islander culture. We have provided opportunities for staff to participate in significant Aboriginal and Torres Strait Islander events including NAIDOC Week and have continued to ensure that all staff have undertaken cultural awareness training.

The Innovate RAP 2018-2020 has a focus on working with Aboriginal and Torres Strait Islander stakeholders to test and trial projects, building relationships, showing respect and improving opportunities. The Innovate RAP 2018-2020 is due for imminent release.

TRANS AND GENDER DIVERSE ADVISORY GROUP (TAG)

The Thorne Harbour Health Trans and Gender Diverse Advisory Group (TAG) continues to provide invaluable insight and input into our health and support services. The TAG continues to work with our service teams to ensure that trans and gender diverse issues are considered in service design, delivery and policy development. The TAG has supported the Equinox service in addressing operational challenges throughout the year, assisted in the development of a new trans specific PrEP video and met with our PARTI Project team to ensure that the delivery of harm reduction strategies to peers and nightclub venue staff is trans inclusive and affirmative.

SAMESH COMMUNITY ADVISORY GROUP

In partnership with Shine SA, Thorne Harbour Health facilitates the SAMESH Community Advisory Group that ensures the evaluation and development of our services in South Australia are informed by and supported the community. The SAMESH CAG has supported the concept and design of several funding submissions that will inform the direction of the SAMESH program.



the future

"I look forward to a world where everybody sees ability first. Living with my disability since childhood, wrapped in bubble wrap, what I couldn't do was what was focused on. Now I'm dedicated to what you can achieve – the value of what you can do eclipses what you can't."

GRANT



the future

"We're starting to see progress. Laws are shifting. Societies are evolving. How good would it be if one day no one had to come out? People will just be who they are and that will be the norm."

MISH

35 YEARS OF VOLUNTEERING

Ever since the first night of the organisation on 12 July 1983, it's been the people that are willing to put their hand up, offer their time, energy, and talents, that have kept the organisation going – our volunteers.

And while the numbers of volunteers have fluctuated (it's estimated we had over 3000 volunteers at the height of the epidemic) and how they have contributed to the organisation has changed, volunteers continue to be the lifeblood of the organisation.

As we looked back on the last 35 years of the organisation, Bill O'Loughlin, (who started as a volunteer with us) recently reflected on some of the organisation's earliest volunteers.

"Gay men came forward when their friends became sick – not everybody, and sometimes it was the friend you least expected – who just became rock solid. But you had hundreds and hundreds of gay men who volunteered to become a supporter or a carer for someone with AIDS – many of whom were gay men, but not everybody. And they were saying, 'I'm prepared to look after someone, through until they die, who is a stranger.'"

EXTRAORDINARY CONTRIBUTION

"Now that was extraordinary! And when you consider that homosexuality was illegal according to the law... that these men were degenerate, sick, perverted, a threat to society... and what you had was this extraordinary period of over ten years where these supposedly sick, perverted men did the most extraordinary, altruistic, selfless thing of saying, 'I am willing to be part of a team to look after a stranger' – that's what happened."

Bill goes on to point out that it wasn't entirely gay men, but for a long time, they made up the vast majority of our volunteers. We had people come from various parts of the community who were affected by or, in some cases, living with HIV themselves.

At that time, the organisation's army of volunteers was huge, with the bulk of those working in community support. When it came time for us to start hiring staff to manage the considerable volume of people involved with our work, you actually had volunteers refusing to be managed as the organisation had fostered such a strong culture of volunteer empowerment.

Tony Keenan, who also started with the organisation in the 1980s as volunteer, went on to serve as our President. He remembers those times and recalls the challenges you would face when people were so invested, and to top things off, were losing friends, colleagues, and loved



A VICTORIAN AIDS COUNCIL VOLUNTEER TRAINING WEEKEND IN KYNETON, VICTORIA 1987. SEATED IN THE FRONT ROW, FOURTH FROM THE LEFT IS OUR FIRST PRESIDENT, PHIL CARSWELL

ones along the way. It's no surprise that when highly active antiretroviral therapy (HAART) came along and dramatically changes the HIV landscape in 1996, you also saw this prompt a change in our volunteers.

"The other thing that happened was when treatments arrived – when there was hope, there was a huge sigh of relief and a huge retreat from the organisation – a rapid retreat. In the States, you saw huge drops in donations, as they relied on private donations... but the AIDS council suffered a big drop in volunteers. People withdrew. People were exhausted. And it moved toward becoming a more established organisation without the urgency."

EPIDEMIC BREAKTHROUGHS

While volunteer numbers have never been the same, we thankfully have also seen huge advancements in HIV treatment make the virus a chronic manageable illness. Our volunteer program consolidated for many years but we had a resurgence in volunteers as Melbourne prepared to host the 20th International AIDS Conference – AIDS 2014.

Understandably, the organisation was

heavily involved with various aspects leading up to and during the conference, but with so much planned, we were going to need a great deal more volunteers than we had actively engaged at the time.

Thankfully, we saw volunteers stream back into the organisation – both returning volunteers who hadn't been involved in years as well as fresh faces of a new generation of volunteers. From the arrivals area at Melbourne Tullamarine Airport to the Global Village to the Mobilisation March, our volunteers were everywhere.

Every year, you can still see our volunteers en masse during events like World AIDS Day and Midsumma, but the reality is that our volunteers are working away in various capacities nearly every day of the year.

VOLUNTEER RECOGNITION

Often our volunteers have been recognised for their outstanding contribution to the communities they serve – from the Minister of Health Volunteer Awards to the Volunteer of the Year at the GLOBE awards.

Our respect for volunteers was embedded in our organisation's identity early on. Today, it's something we seek to amplify

and encourage in other volunteer-driven organisations. In fact, last year saw us expand our partnership on the LGBTI Organisations Volunteer Event (LOVE) to honour and include volunteers from JOY, Switchboard, the Australian Gay and Lesbian Archives, and Transgender Victoria. This now annual event recognises volunteer milestones including some of our own volunteers being recognised for decades of service.

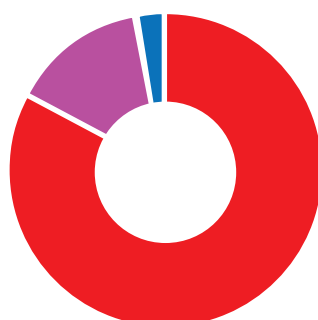
While the landscape of the epidemic has changed, the breadth of the issues the organisation seeks to address has grown to include the broader health and wellbeing of our LGBTI communities. Our army of volunteers are there with us every step of the way. We're also seeing our community of volunteers diversify. As that has happened, that growing diversity allows us to continue to offer programs and services that are often both peer-informed during development and peer-led when delivered.

But it's only possible when people from our community put their hand and say *'I'll volunteer!'*

FINANCIAL REPORT

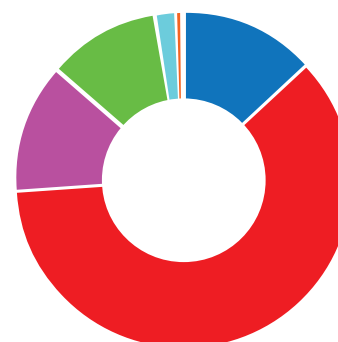
REVENUE BREAKDOWN

- Grant income 83%
- Operating income 14%
- Investment income 3%



EXPENSES BREAKDOWN

- Operating expenses 13%
- Employee costs 61%
- Campaign expenses 12%
- Client support expenses 11%
- Professional expenses 2%
- Other expenses 1%



Revenue breakdown

Grant income	10,390,522
Client fees	1,352,059
Donations, fundraising and bequest income	423,734
Goods and Services Income	502,788
Membership fees	3,601
Other revenue	9,352
Interest income	372,992
Total revenue	13,055,048

Revenue summary

Grant income	10,390,522
Operating income	1,788,746
Investment income	372,992
Total	12,552,260

Expense breakdown - Detailed

Operating expenses	1,607,317
Employee costs	7,462,054
Campaign expenses	1,513,288
Client Support expenses	1,336,309
Professional fees	237,996
Other expenses	89,068
Total	12,246,032

VICTORIAN AIDS COUNCIL INC./GAY MEN'S HEALTH CENTRE INC. (AGGREGATED)

Summary Aggregated Statement of Profit or Loss For the Year Ended 30 June 2018

	2018	2017
	\$	\$
Revenue	13,055,048	10,779,730
Less: expenses		
Operating expenses	(1,607,317)	(1,105,128)
Employee costs	(7,462,054)	(6,335,691)
Campaign expenses	(1,513,288)	(1,501,202)
Client support expenses	(1,336,309)	(1,204,488)
Professional fees	(237,996)	(343,514)
Other expenses	(89,068)	(41,660)
	(12,246,032)	(10,531,683)
Surplus / (deficit) for the year	809,016	248,047

Aggregated Statement of Financial Position As At 30 June 2018

	2018	2017
	\$	\$
Assets		
Current assets		
Cash and cash equivalents	3,001,408	18,684,200
Trade and other receivables	89,262	354,580
Other financial assets	17,101,194	-
Other assets	100,765	138,707
Total current assets	20,292,629	19,177,487
Noncurrent assets		
Trade and other receivables	67,178	-
Other financial assets	50,753	-
Property, plant and equipment	1,156,431	628,603
Intangible assets	89,184	-
Total noncurrent assets	1,363,546	628,603
Total assets	21,656,175	19,806,090
Current liabilities		
Trade and other payables	1,057,634	392,435
Provisions	1,134,369	888,992
Other liabilities	674,473	842,838
Total current liabilities	2,866,476	2,124,265
Noncurrent liabilities		
Provisions	136,987	35,102
Total noncurrent liabilities	136,987	35,102
Total liabilities	3,003,463	2,159,367
Net assets	18,652,712	17,646,723
Equity		
Reserves	447,383	250,410
Accumulated surplus	18,205,329	17,396,313
Total Equity	18,652,712	17,646,723

The above summary financial information has been extracted from the audited financial statements. No audit opinion has been issued in relation to the summary financial statements. These should be read in conjunction with the audited financial statements that are available to the members on our website www.thorneharbour.org/financials

Aggregated Statement of Changes in Equity for the Year Ended 30 June 2018

2018	Accumulated Surpluses	Asset Revaluation Surplus	Financial Assets Reserve	Total
	\$	\$	\$	\$
Balance as at 1 July 2017	17,396,313	250,410	-	17,646,723
Net surplus/ (deficit) for the year	809,016	-	-	809,016
Net fair value gains on available for sale financial assets	-	-	66,973	66,973
Revaluation of property, plant and equipment	-	130,000	-	130,000
Balance as at 30 June 2018	18,205,329	380,410	66,973	18,652,712
2017	Accumulated Surpluses	Asset Revaluation Surplus	Financial Assets Reserve	Total
Balance as at 1 July 2016	17,148,266	-	-	17,148,266
Net surplus/ (deficit) for the year	248,047	-	-	248,047
Revaluation of property, plant and equipment	-	250,410	-	250,410
Balance as at 30 June 2017	17,396,313	250,410	-	17,646,723

	2018	2017
	\$	\$
Cash flow from operating activities		
Grants received	10,614,192	8,203,175
Fees received	1,854,848	1,001,484
Receipts from customers	25,000	4,208
Donations and bequests received	398,733	914,243
Membership fees	3,601	3,825
Interest received	284,297	518,598
Payments to suppliers and employees	(11,317,462)	(10,132,474)
Net cash provided by operating activities	1,863,209	513,059
Cash flow from investing activities		
Proceeds from sale of plant and equipment	24,516	-
Purchase of financial assets	(16,953,741)	-
Purchase of property, plant and equipment	(616,776)	(270,572)
Net cash used in investing activities	(17,546,001)	(270,572)
Reconciliation of cash		
Net increase/(decrease) in cash and cash equivalents held	(15,682,792)	242,487
Cash and cash equivalents at beginning of year	18,684,200	18,441,713
Cash and cash equivalents at end of financial year	3,001,408	18,684,200

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the future

“One day, it’d be great to be beyond labels. Where we’re just kind to each other, nice to each other, and treat each other as we are – human.”

DEE



THANK YOU!

- ACON
- ADAM RICHARD
- AFAO
- ALFRED HEALTH
- ALGA
- ALISON THORNE
- ANNA LINDSTAD
- ANTHONY WOOD
- ANZ
- ARCHER
- AUSTIN HEALTH
- AUSTRALIAN DRUG FOUNDATION
- BALLARAT COMMUNITY HEALTH
- BARRY JAMES
- BEN PEDLEY
- BENDIGO COMMUNITY HEALTH
- BETH WILSON
- BEV GREET
- BEV HARBOUR
- BOLTON CLARKE
- BROADTREE FOUNDATION
- BURNET INSTITUTE
- CANCER COUNCIL VICTORIA
- CATHOLIC AIDS MINISTRY
- CHAPEL OFF CHAPEL
- CHAPEL ST TRADERS ASSOCIATION
- CHRISTINE WHEELER
- CITY OF PORT PHILIP
- COHEALTH
- COLIN KRYCER
- DAVID LARGESSE
- DAVID MCDONALD
- DAVID OWEN
- DEAN ARCURI
- DOHERTY INSTITUTE
- DON WINSOR
- DRUMMOND STREET SERVICES
- EAGLE LEATHER
- ED CHAN
- ELLEN RATTRAY
- EMMA BROWN
- FPPV ARCHITECTURE
- GALFA
- MELBOURNE GAY & LESBIAN CHORUS
- GREG KELLY
- HERBERT SMITH FREEHILLS
- HRLC
- JAMES FARMER
- JANE GREEN
- JESS TOOP
- JON JACKSON
- JOY 94.9
- LADY POTTER AC
- LATROBE UNIVERSITY
- LIVING POSITIVE VICTORIA
- LUKE GALLAGHER
- MAC COSMETICS
- MADELEINE MILLER
- MAMA ALTO
- MARK GROGAN
- MELBOURNE CITY
- MELBOURNE HEALTH
- MERLYN QUAIPE
- MERRI HEALTH
- MIKE KENNEDY
- MIND
- MONASH HEALTH
- NAB
- NADINE KILPATRICK
- NORTH WESTERN MELBOURNE PHN
- PALLIATIVE CARE VICTORIA
- PATRICIA LOW
- PATRICK NOLAN
- PAUL VINEY
- PEOPLE TO PEOPLE COMPUTER SERVICES
- PETER REILLY
- PHIL CARSWELL
- PICTURE THIS BALLOONING
- PLSA
- POSITIVE WOMEN VICTORIA
- PREP'D FOR CHANGE & PAN
- PROFESSOR ANDREW WAY
- QUIT VICTORIA
- RO ALLEN
- SAM WARD
- SHINE SA
- SOUTH AUSTRALIAN GOVERNMENT
- SOUTH EASTERN MELBOURNE PHN
- ST KILDA FOOTBALL CLUB
- ST KILDA LEGAL SERVICE
- STAGE ART PRODUCTIONS
- STAR OBSERVER
- STEPHEN SOMERVILLE
- SWITCHBOARD VICTORIA
- THE LAIRD HOTEL
- THE PRODUCTION COMPANY
- THE INSTITUTE OF MANY
- TONY KEENAN
- TRANSGENDER VICTORIA
- TURTLE COVE
- VICHEALTH
- VICTORIA POLICE
- VICTORIAN GOVERNMENT
- VICTORIAN PRIDE CENTRE
- VIIV HEALTHCARE
- VOLUNTEERING VICTORIA
- YOUR COMMUNITY HEALTH
- YSAS
- ZOE BELLE GENDER COLLECTIVE
- PHOTOGRAPHY VIRGINIA CUMMINS



the future

“I hope that transphobia becomes a thing of the past. I hope we can all walk out the door without a sense of fear - even better if what we’re walking into is a world of acceptance.”

CHARLOTTE

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health*
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