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Call to action

IN THE LAST FEW YEARS, SIGNIFICANT SCIENTIFIC ADVANCES HAVE RADICALLY CHANGED OUR UNDERSTANDING OF HOW HIV CAN BE PREVENTED AND SHOULD BE TREATED NOW AND INTO THE FUTURE.

At the UN Special Session on HIV in New York in June 2011, the UN set a number of global targets for the international community to meet by 2015. These included a scale-up in the provision of treatment to those with HIV (to 15 million people by 2015), to reduce the number of sexual transmissions of HIV by 50%, reduce transmissions through injecting drug use by 50%, and to eliminate the incidence of mother-to-child transmissions totally.

Following the adoption of the Declaration by the UN members, NAPWA has been strongly arguing that in Australia there should be clear and specific targets to bring about a direct impact on HIV transmission rates, and increase the uptake of HIV treatments across the country. As the year progressed there were many forums and discussions across the sector, including those related to the review of the 6th National HIV Strategy. NAPWA has consistently presented and advocated for the Australian government to move beyond the rhetoric, honour its commitment to the UN Declaration targets at a local level, and shift the momentum to real changes in health outcomes we can achieve across communities in Australia now.

Our work over this year has been bolstered and significantly enhanced by the efforts of Bill Whittaker who has been the architect behind the reports and presentations describing the Australian response and the frameworks by which Australian targets should be defined and realised. The NAPWA Board recognises him as a special representative to the organisation and has endorsed much of his work in this past year as a template for the organisation’s advocacy strategy towards Australian HIV targets being introduced into the National HIV Strategy.

NAPWA has also maintained a watching brief on social justice issues arising through government with a particular focus on changes to Centrelink, and followed up with our submission to the Senate Community Affairs Inquiry into the DSP Impairment Tables Review. This year, NAPWA has also put submissions to the Productivity Commission, the public inquiry into Disability Care and Support, PBS Deferrals review, and contributed to the UN Global AIDS Progress Report.

Our advocacy progressed through collaborations with professionals, sector partners and community networks, including the Australasian Society for HIV Medicine (ASHM), the Australian Federation of AIDS Organisations (AFAO), the Australian Federation of Disability Organisations (AFDO), the Australian Council of Social Service (ACOSS), Consumers Health Forum (CHF), and the HIV National Research Centres. I am very pleased with the diversity of representative opportunities taken up by the organisation this year, providing further venues for advocating on behalf of NAPWA’s HIV positive constituency.
We are also excited about the release of the NAPWA HIV Stigma Audit report. This major piece of work has taken the best part of two years and contains the contribution of many PLHIV. The findings will be an important contribution to the ongoing monitoring of the wellbeing of PLHIV — and associated programs focused on HIV resilience will be an important priority in the coming year. NAPWA delivered this work through a community-owned model of research which was delivered in collaboration with the National Centre in HIV Social Research. I acknowledge the work and leadership of Sean Slavin in managing our specific research activities, and bringing this HIV program to fruition.

This is a critical time in our response to the epidemic, and has renewed our sense of purpose, particularly when representing PLHIV on Commonwealth bodies such as the Ministerial Advisory Committee on Blood Borne Viruses and Sexually Transmissible Infections and Blood Borne Virus and Sexually Transmissible Infections Sub-Committee. These forums are now central to our ongoing push to see a working partnership bring about real change, and where we will look for opportunities to secure outcomes.

Finally, NAPWA was proud to receive endorsement and support organisation for the Melbourne-based IAS 2014 AIDS Conference. I have been endorsed as the representative to the International Conference Coordinating Committee and am committed to working with local and regional community partners to see a strong and inclusive international AIDS conference achieved here and to showcase a vibrant Australian community response.

I acknowledge the efforts of the entire secretariat, under the leadership of our Executive Director, and also the ongoing support of the NAPWA directors and members over this year. The collective ownership of the work and the reputation of the organisation make me very honoured to be part of this leadership.

As we continue to pursue better outcomes for our HIV positive population and other affected communities, we are determined that Australia meets our UN commitments, and works towards once again being a global leader in the national response to HIV.
THE BENEFITS OFFERED BY TODAY’S HIV TREATMENTS ARE CONSIDERABLE. THE SIMPLE REALITY IS THAT THEY NOW OFFER PEOPLE THE OPPORTUNITY TO LIVE LONGER AND HEALTHIER LIVES WHILE SIGNIFICANTLY LOWERING THE RISK OF TRANSMISSION.

It was this realisation that prompted the United Nations to set some major global targets in June 2011 and for US Secretary of State Hillary Clinton to call for an AIDS-free generation.

NAPWA believes that these goals are within our reach in Australia — providing our partnership is working effectively and the political will is there — and the past year has been marked by our efforts to improve our national response.

As we go to print, the report of the mid-term review of the 6th National HIV Strategy is almost complete. We look forward to seeing substantial actions being endorsed and pursued to realise these results.

In the body of this Annual Report you will find details of the many program activities that NAPWA has delivered this year. This reflects the broad goals of our current Strategic Plan and the role of the organisation as a national peak body.

A significant milestone was the multi-media treatments campaign we launched in June this year under the theme: ‘If you’re living with HIV, start a treatment conversation with your doctor’. Utilising the services of creative agency Ward 6 and with unrestricted funding provided by Gilead Sciences, the campaign aimed to raise awareness of the health and protective benefits of modern HIV treatment. Campaign images appeared on billboards, buses and trams, and in mainstream and community print. The campaign is currently being evaluated before a second peer-based phase begins.

NAPWA staff and representatives have been actively engaged in various community discussions about the importance of early treatment and the role of treatment as prevention. These have included presentations at education and community forums, for sector partners including Pozhet and the Multicultural HIV and Hepatitis Services, and at conferences including the HIV Educators’ conference in May.

The year was also spent responding to the wide range of other issues affecting the lives of people living with HIV. Education forums staged around the country via our Treataware project continued to address the health and treatment issues that member organisations wanted highlighted at a local level. Positive Living magazine broadened its reach and appeal, both within social media circles and in print; and now appears as an insert in the Star Observer which now covers the eastern seaboard. The NAPWA website maintained its role as a popular source of information for the HIV community sector; and the organisation continued to compile an electronic newsletter to members and send regular media bulletins via email and Twitter with links to relevant national and international HIV news.

The Australian HIV Observational Database (AHOD) Temporary Residents Access Study (ATRAS) — which is providing free antiretrovirals over four years to PLHIV ineligible for Medicare — was another significant highpoint of the year. The study commenced recruitment in November 2011 and stopped enrolling in July 2012 when the 180 places were filled. We are grateful to all partners for their commitment to this important initiative. Through the AHOD team at the Kirby Institute, data collection and analysis has already begun, and will inform our ongoing advocacy work to find a resolution to this outstanding gap in our national response.

FOR A SMALL AND INTERWOVEN STAFF SECRETARIAT, NAPWA ACHIEVES MUCH.

So it is important I acknowledge the staff team for their capacity to meet all challenges and demands. I am grateful for their skills and passion. This year, we farewelled Craig
Cooper who relocated interstate, but has stayed involved by joining the NAPWA Board and by becoming the Executive Director of NTAHC. After nearly 12 years with NAPWA, Scott Lockhart departed for the Illawarra and a health promotion position within the local area public health team. And after seven years, Jose Machado left us to take up the coordinator position of the Positive Speakers Bureau at Positive Life (NSW). I acknowledge all of their contributions and am delighted at their progress through to the next chapters of their careers within the HIV sector.

The year ahead will have significant challenges for NAPWA as we continue to demand shifts in the Australian HIV response and increase our engagement in the public health and research domains. NAPWA has been endorsed as the Australian community partner for the IAS AIDS Conference in Melbourne in 2014. This will mean a range of strategic challenges for the organisation as we liaise with partners across the region and internationally. Our work in international science and clinical research networks is testimony to the strength and recognition of the PLHIV community response.

I want to thank Robert Mitchell and the rest of the NAPWA Board for their support and leadership over the past 12 months. I believe the strength of the NAPWA governance processes is a critical factor in this organisation delivering a sound national voice.

I look forward to us working together over this next period. This is the time for us to take advantage of recent scientific advances, to make some dramatic changes in the current system and to reshape the HIV response for the benefit of those central to it — people living with HIV.
NAPWA BELIEVES THAT THE PROSECUTION OF INDIVIDUAL HIV POSITIVE PEOPLE IS COUNTERPRODUCTIVE AND UNDERMINES THE PUBLIC HEALTH RESPONSE THAT AIDS TO ENGENDER A CULTURE OF SHARED RESPONSIBILITY FOR PREVENTION.
actively engaged in various community discussions about treatment as prevention. These have included presentations such as one at the HIV Educator’s conference in May and an article in HIV Australia.

Work is ongoing with researchers at the Alfred Hospital and Monash University in Melbourne to develop and trial a patient self-management intervention that will assist PLHIV reduce their risks of cardiovascular disease. As PLHIV are living longer this has become one of the most pressing health issues among our communities.

In addition to these major activities, the year has been extremely busy with a variety of other business. This has included delivering lectures to visiting Chinese HIV and public health experts, working with AFAO to develop a community sector response to the United Nations Political Declaration on HIV/AIDS, and running a professional development workshop for ASHM. February this year was busy as usual, with the annual round of NHMRC grant applications. We will hear later in the year which of these has been successful.

As this year comes to an end I am very excited about the release of the HIV Stigma Audit report. This major piece of work has taken the best part of two years and contains the contribution of many PLHIV. The findings also represent an important contribution to the ongoing monitoring of the national HIV strategy. The findings of the study contained many encouraging signs that levels of HIV stigma are not exceedingly high. However, people with HIV continue to feel diminished by their illness. Continuing to engage in a program of activities to support the wellbeing of PLHIV will be an important priority in the coming year.
IT IS PLEASING TO REPORT THAT, FOLLOWING LOBBYING AND RECRUITMENT AT THE 2011 ANWERNKENHE CONFERENCE, THE POSITIVE ABORIGINAL AND TORRES STRAIT ISLANDER NETWORK (PATSIN) HAS RECENTLY WITNESSED AN INCREASE IN MEMBERSHIP.

A total of six new members now bring an invigorated energy to the network's planning and future activity. The new members have expressed a commitment to work collaboratively towards the success of the network. Likewise, NAPWA will work closely with the membership to ensure the network's viability and ongoing relevance. This year has also seen PATSIN's long-standing chair, Wilo Muwadda, step aside from the position.

In February, Wilo provided a heartfelt report to the NAPWA board with an analysis of Aboriginal and Torres Strait Islander issues relating to HIV, social justice and inequality. The presentation cemented Wilo's reputation as one who has worked passionately for indigenous people over many years. Membership to the National Network of Women Living with HIV continues to grow, with the network hosting regular, well-attended teleconferences across the year. The network has revised a set of member protocols this year and has contributed to Positive Living articles aimed at raising the profile of the network and promoting healthy choices for positive women. The network continues to strongly advocate for access to the female condom and other sexual and reproductive health options. This year the network collaborated with Glyde Australia to promote the female condom across World AIDS Day events around the country. The network continues to develop HIV positive women’s policy and is currently focused on developing an options paper looking at issues relating to HIV and pregnancy. Importantly for many of the members, the network continues to provide an important avenue for peer support and a valuable means of information-sharing to members and networks into the broader community.

This year, the NAPWA research unit has prepared two literature reviews. One looks at ‘People living with HIV who do not use antiretroviral treatment: a qualitative study of beliefs, motivations and influences that shape decisions not to treat’; and the other is a ‘Review of literature regarding the definition and characteristics of resilience and factors that may inform effective health promotion interventions’. This later review forms part of the research into practice component of the HIV Stigma Audit, a study of experiences of stigma among positive people conducted by us over the past two years, culminating with the publication of the results. These reviews form an integral part of the planning and developmental work of the unit and are available on the NAPWA website.
THE MEMBERSHIP OF PATSIN HAS BLOSSOMED IN RECENT MONTHS AND THIS HAS BROUGHT A RENEWED ENERGY TO THE GROUP.

A recent face-to-face meeting in Sydney provided an opportunity for members to come together to discuss issues and strategies for the network into the future and to draft a work plan for the next twelve months. This plan identified three key areas of focus: advocacy, education and communication.

Under advocacy, the objective is to improve and increase Aboriginal and Torres Strait Islander services and representation within state-based HIV organisations. To this end, network members will map current services provided around the country and then advocate for better representation where it is needed.

For education, the network has cited some areas where indigenous-specific HIV and sexual health resources could be better targeted. Examples include football carnivals, universities and during NAIDOC week. Positive speakers’ bureaus have also been singled out as fertile spaces to nurture the participation of positive Aboriginal and Torres Strait Islander educators.

Communication within a national network is vital and PATSIN plans to make the most of electronic and traditional mail networks to keep members in the loop. They also plan to develop a webpage, a leaflet and a regular newsletter and to engage with NAPWA on a Board level.

PATSIN’s long-standing champion, Wilo Muwadda, stepped aside from the position of chair this year.

Wilo’s commitment to PATSIN, and to NAPWA generally, must be acknowledged. He is a strong advocate and positive role model and his contribution to the health and welfare of positive Aboriginal people is greatly appreciated. Happily, he is staying on as a member of the network.

In Wilo’s place, the network has welcomed Ian Saunders to the role of chair.

It’s an exciting time for PATSIN as it moves forward with a renewed spirit and the full support and encouragement of the NAPWA Board, their fellow members and the secretariat.

IT’S AN EXCITING TIME FOR PATSIN AS IT MOVES FORWARD WITH A NEW SPIRIT AND THE FULL SUPPORT AND ENCOURAGEMENT OF THE NAPWA BOARD, THEIR FELLOW MEMBERS AND THE SECRETARIAT.
DESPITE A POLITICAL CLIMATE OF NATIONAL COMPLACENCY, A WAVING HIV AGENDA AND POTENTIAL FUNDING CHALLENGES, THE NATIONAL NETWORK OF WOMEN LIVING WITH HIV STILL MANAGED TO PROGRESS A RANGE OF IMPORTANT ISSUES THIS YEAR.

Sadly, we lost a dear political champion along the way. Sharon Cheney, a long-time activist and network member, passed away in February in her home city of Adelaide. Sharon was a powerful positive speaker who drew on her skills in community art, drama and humour to educate others about sexual and reproductive health. The female condom was a passion of hers, so, in her honour, we dedicate all our advocacy work in this area.

As a network, we are blessed with a diversity of experience. And it is this, plus a unique determination, that has helped build our collective capacity, skills and knowledge. It has also helped us progress work in five priority areas: sexual and reproductive health and wellbeing; HIV-related stigma and discrimination; HIV disclosure; peer support; and skills and capacity building.

The network strongly believes in equity and empowerment for women around their sexual and reproductive health choices. To this end, we initiated a female condom campaign on World AIDS Day in 2011. With sponsorship from NAPWA and GLYDE, we purchased 1000 female condoms which our women then distributed across each of their jurisdictions. This was accompanied by a media release: ‘Female condoms: a key to HIV prevention’; and a call to action to increase the availability of the female condom in Australia.

We all know that correct and consistent condom use reduces the risk of STIs and HIV transmission. Women constitute half of this country’s population yet there remains a disparity between the availability of male and female condoms. Globally, female condoms are extremely popular yet our health departments continue not to fund or promote them.

After this powerful campaign launch, we instigated a meeting with YWCA (Australia), Sexual Health and Family Planning Australia (Melbourne), Children by Choice (Brisbane), and the Australian Women’s Health Network. With this working group we can now mobilise a united and coordinated campaign.

Visibility is another network priority — visibility of all women living with HIV in Australia and of our network in particular. This is why we developed an introduction letter and logo.

Sharon helped design...
our network logo, which stands to represent the importance of networks, partnerships and the support of peers.

Our introduction letter has appeared in Positive Living and Talkabout, plus an extensive mail-out was sent to a list of our key national contacts. The letter will be updated and sent out each year to promote our work focus and the input we make to NAPWA policy development, advocacy and treatments.

Regular teleconferences and increasing email activity enabled a high level of engagement and information exchange this year. Our annual face-to-face meeting was very well attended and there has also been a noticeable increase in the presence and engagement of women at NAPWA’s annual and special general meetings.

Every woman on the network holds numerous key positions within their own state or territory, and I appreciate the energy they put into their work and the support and care they show me as network chair.

I would like to thank all members of the network for being national advocates and leaders; for their dedication to the empowerment of all women living with and affected by HIV, particularly those whose voices are silenced or lost due to stigma, violence or indifference in society.

I would particularly like to acknowledge Jane Costello for the lead she has taken in researching for our upcoming work on the breastfeeding options for HIV positive women in Australia; and congratulate her on being nominated our NAPWA representative on APN+.

Thank you, Dianne Lloyd for your tireless commitment to ensuring that positive women are well represented at the NAPWA Board level.

Congratulations to Michelle Tobin for being nominated Chair of the Anwernekenhe National Aboriginal and Torres Strait Islander HIV/AIDS Alliance.

A big welcome to three new members: Michelle Wesley and Susan Paxton from Melbourne and Giovanna from the Northern Territory.

Thank you also to our supporters at NAPWA, particularly Jo Watson, Scott Lockhart and the administration team — your passion is evident through the quality of your work.

You all help ensure that our advocacy voice is heard and that we are proactive in representing the diversity of women living with HIV in Australia.
ON BEHALF OF THE NAPWA BOARD, I AM PLEASED TO PRESENT THE 2011/12 ANNUAL FINANCIAL REPORT FOR THE ASSOCIATION.

NAPWA completed the 2011/12 financial year with a surplus of $47,708, which was above the overall surplus forecast for this period.

THE ASSOCIATION IS TRAVELLING WELL WITH A COMFORTABLE END-OF-YEAR BALANCE SHEET.

NAPWA has increased its margin between assets and liabilities, with $455,994 worth of equity as a result of the commercial office asset. The Association continues to attract alternative sources of funding, such as the AusAID contract, and the NAPWA (not-for-profit community-based organisation) private sector partnership arrangement with the seven pharmaceutical companies and Levi Strauss. These alternative sources of funding are critical for NAPWA to deliver its breadth of activities and programs.

FY 2011/12 was the first year NAPWA owned commercial premises and held a mortgage, instead of operating within a lease arrangement. The management of the property and mortgage has been a smooth transition from a rental position. Apart from the financial advantages associated with acquiring an asset, owning property has had an added bonus of allowing NAPWA’s operational stability and security to be enhanced.

I believe the association has managed its finances within realistic budget parameters and provides long-term viable projects and activities. The disciplined financial management of NAPWA’s projects is a consequence of the high-level budget practice and work of the NAPWA team. I’d like to acknowledge Kevin Barwick, as the Finance Officer, for his efforts in ensuring the Association remains accountable against its financial responsibilities and in providing diligent accounting advice. Additionally, I’d like to acknowledge the work of Jo Watson, as the Executive Director, for her exceptional ability to manage complex contractual and budget arrangements and maintain partnership relations with private donors.

Even though we have two- and three-year funding contracts in place with the Australian government for the NAPWA core grants, we expect that 2012/13 will see continued changes in the way the sector (and these contracts) are managed by government. The extended contract term increases certainty and funding security for the Association. The Board, in tandem with the Executive Director, looks forward to exploring all potential funding opportunities so the Association continues to be financially robust and resilient, and so our work aligns with the strategic priorities as described in the NAPWA Strategic Plan.

Finally, I’d like to thank the Australian government for continued funding. Furthermore, I’d also like to thank AusAID, Levi Strauss and the seven HIV pharmaceutical companies for their ongoing partnership and funding contributions. Without this, NAPWA would not be able to be as effective in achieving results for PLHIV throughout Australia.
Finding direction

Since commencing in February, my role has been to support this advocacy by analysing available research on successful programs in other countries, and identifying priority actions for improving what we are doing here.

This has included analysing and developing to reduce barriers to treatment and testing; and advocacy, presentations and research on rapid HIV testing and reducing late HIV diagnosis.

An important outcome of this research and analysis was the paper: ‘Implementing the United Nations Political Declaration on HIV/AIDS in Australia’s domestic HIV response: Turning political will into action’, which was published jointly by NAPWA and the other Australian peak national community HIV organisations. The document outlines a comprehensive set of actions that NAPWA believes are necessary to increase treatment uptake among people with HIV and for reducing HIV transmissions among those without the disease.

Another key activity area has been NAPWA’s ‘Start the conversation’ campaign. My involvement has been to assist in developing supporting material, campaign implementation and participating in a national program of ‘Road show’ events that commenced in July 2012 and were run in conjunction with NAPWA’s member organisations.

In the areas of HIV testing policy and strategy, I have been involved in advocacy to reduce barriers to the licensing of rapid HIV testing in Australia. I have also been engaged in a review of the National HIV Testing Policy, a NSW-based working group developing strategies to increase HIV testing and treatment uptake.

In research, I have participated in a study of the use of rapid HIV tests in Sydney sexual health clinics; a planned study of home HIV testing among gay men; a review of data collection in the Kirby Institute’s ongoing HIV Seroconversion Study; and development of a new Kirby Institute study, which will investigate the knowledge, attitudes and behaviour of gay and other men who have sex with men, in relation to key issues in HIV prevention and treatment uptake.
Chins still wagging

NAPWA’s TREATAWARE PROJECT CONTINUED TO COLLABORATE WITH A MYRIAD OF FOLK ACROSS THE HIV SECTOR AND BEYOND OVER THIS REPORTING PERIOD.

In 2011, I coordinated a dinner meeting in Melbourne, where Professor Sharon Lewin and Dr Julian Elliot presented the latest data from their studies with vorinostat, an agent currently being trialled to activate latent HIV as part of an HIV eradication approach. These meetings help provide information to the community about local studies that NAPWA supports.

Treataware was on hand at the booth we shared with Positive Life NSW in October 2011 at the Australasian HIV/AIDS Conference in Canberra. This proved to be a useful opportunity to profile the recent advocacy, education and research work of both organisations.

Later that year, I supported TasCAHRD Client Support Officer Kate Bennett to organise a ‘Lifestyle event’ in Tasmania. Included in the two days of peer-focused activities was a ‘Savvy and sorted with HIV’ forum and dinner, where specialists in sexual health, nutrition and geriatric medicine were on hand to provide information and answer questions.

Further afield, at the Igat Hope offices in Port Moresby, PNG, I helped Treatments Advocate Officer, Helen Samilo, finalise production of a resource on ART and adherence. Much appreciated assistance came from Kenneth Lao (NCD Networks). Copies of the resource were subsequently printed and distributed around the provinces. At the same time, preparations were made with newly-positioned Treatments Advocacy Officer Maura Mea to develop and hold a forum addressing treatments access and advocacy in PNG later in 2012.

Involvement with the ‘Start the Conversation’ campaign has been an all-encompassing task for most of NAPWA’s staff up to and after the swish launch at the ACON Cafe on May 4. As well as reviewing ad mock-ups and assisting with focus group testing, I also coordinated a hard copy print run of the revised Checklist Guide for People with HIV, now available from the office and also to download from the NAPWA website.

Thanks to the continued sponsorship and support of the collective seven pharmaceutical companies, Treataware was able to run treatment and health information forums and educational sessions in collaboration with our sector partners around the country.

Numerous short courses in HIV medicine were held over this reporting period, for community workers and for pharmaceutical industry workers. New additions to the ever-popular program include a new session on Pre-Exposure Prophylaxis (PrEP) and another on stigma and discrimination. The comments we receive on evaluation feedback forms show the enthusiasm with which these courses are received. Examples
include: ‘All brilliant! This brought with it a great reality check on what we do in pharma’; ‘Excellent course’; ‘Well-paced and comprehensive’; and ‘Great overall introduction to HIV’.

In the last annual report, natural disasters featured and ash clouds interrupted planned activities; however, I’m pleased to report that the scheduled Chin Wag Chat Show (all about HIV treatments and healthy HIV living) in Cairns did eventually go ahead.

Chin Wag also went to Adelaide early this year and was similarly very well attended and evaluated.

The Treataware Outreach Network (TON) was able to get together for a two-day meeting in March. These get-togethers provide members with professional education and peer collaboration opportunities and have proved invaluable for a group responsible for dispensing HIV treatments information and support to clients around the country.

Treataware and other NAPWA staff joined Lance Feeney from Positive Life NSW and the solicitors from the HIV/AIDS Legal Centre (HALC) to present an HIV rural road show in mid-2012. The forums were aimed at strengthening the links with positive community members throughout regional NSW and to provide people with an update on current health and treatments issues.

Dubbo, Bangalow, Tamworth and Newcastle were visited and we sought to identify any common barriers and gaps in services folk from these regions might experience; as well as to develop better links between positive people in regional NSW and Positive Life, NAPWA and HALC.

As you are reading this, Treataware information and education events, and more ‘Keep The Conversation Going’ forums are being scheduled for Cairns, Townsville and Melbourne. Plus we’re incorporating the theme into Chin Wags, with several about to happen, including Sydney and Perth.

‘ALL BRILLIANT! THIS BROUGHT WITH IT A GREAT REALITY CHECK ON WHAT WE DO IN PHARMA.’
COMMENT FROM PARTICIPANT IN A SHORT COURSE IN HIV MEDICINE
POSITIVE LIVING CONTINUES TO DELIVER CONCISE, QUALITY INFORMATION ON ISSUES OF RELEVANCE TO OUR READERS. SPECIFICALLY IN THE AREAS OF HEALTH, TREATMENTS AND RESEARCH. THE MAGAZINE FOCUSES ON MATTERS EITHER IGNORED OR GIVEN BIASED COVERAGE IN MAINSTREAM MEDIA AND PROVIDES AN IMPORTANT PLATFORM FOR THE ORGANISATION TO RAISE COMMUNITY AWARENESS AND DEBATE.

In the spring 2011 issue: ‘Treatment is prevention’, Robert Mitchell reported back from the UN Special Session on HIV in New York with a call for us to meet some bold new targets. I reported back from IAS2011 in Rome and all the excitement generated by prevention trial results in PrEP, microbicides and treatment as prevention. David Menadue pondered how gay men should interpret these results in his article: ‘So, how infectious are we really?’ We discussed cure research, including the vorinostat trial in Melbourne; whether premature ageing was something we should be worried about; and alerted people to the impending disability support overhaul. Dr Louise Owen talked about syphilis; yogini Vicky Fisher showed us some strengthening standing poses; and James May shared his experiences when trying to find intimacy.

In David Menadue’s wish list, featured on the summer 2011-2012 cover, he humbly asked for six things: a cure, a focus on HIV and ageing, a chronic illness card, personally controlled electronic health records, ART for all and the end to HIV criminalisation. Neil McKellar-Stewart offered some relief for the over-50s and James May revealed his struggles with alcohol and other drugs.

Featuring NAPWA’s ‘Start a conversation’ campaign on its cover, Positive Living returned as an insert in the Star Observer in winter 2012. I wrote about the ongoing debate on the best time to start treatment, and Jane Costello and I reported on topical prevention from the Microbicides Conference in Sydney. David Menadue highlighted two common sexual dilemmas: unprotected sex and sexual dysfunction. There was also news from CROI; Australia’s latest once-a-day pill; and instructions showed us how to avoid bone mineral density loss with some simple home exercise. Graham Douglas-Meyer reported on the changes to the DSP; we offered advice for serodiscordant couples who want to conceive; Sean Slavin gave us the results of the HIV Stigma Audit; and there were heartfelt tributes to departed friends, Sharon Cheney and Rodney Jungen-Williams. Dr Louise Owen talked check-ups for the over-50s and James May revealed his struggles with alcohol and other drugs.

Featuring NAPWA’s ‘Start a conversation’ campaign on its cover, Positive Living returned as an insert in the Star Observer in winter 2012. I wrote about the ongoing debate on the best time to start treatment, and Jane Costello and I reported on topical prevention from the Microbicides Conference in Sydney. David Menadue highlighted two common sexual dilemmas: unprotected sex and sexual dysfunction. There was also news from CROI; Australia’s latest once-a-day pill; and instructions...
on how to keep your heart healthy. Dr Louise Owen offered advice on early treatment; and Curt Mason wrote about Mindfulness in our new column on tackling anxiety and depression. The back cover featured an excerpt from a speech by the indomitable Ita Buttrose at the launch of NAPWA’s treatment campaign.

As well as being distributed in print, Positive Living is also available by email, via Facebook (Like us at https://www.facebook.com/positive livingmag) and on our website in various formats including a ‘flip-book’ that can be easily read online.

NAPWA also continues to compile regular media bulletins with links to HIV-related news from the region and abroad. In recent months, Jill Sergeant has been compiling the Media Digest after taking over from Paul Kidd. This valuable tool is prepared three times a week and relayed to email subscribers and our followers on Twitter.

We also produce an electronic NAPWA newsletter for members and those interested in the workings of the organisation.

Over the last year, we’ve endeavoured to keep the NAPWA website active and relevant, providing information on HIV treatments and issues. Graham Stocks continues to maintain the site, which has evolved into a highly effective vehicle for information dissemination. Most content comes from the quarterly editions of Positive Living, conference reports, media releases, and links to news stories around the world through ‘elsewhere on the Web’; as well as news on campaigns and positions vacant from our member organisations.
This year has seen significant changes to NAPWA’s administrative line-up.

Business Manager Craig Cooper left us in November to pursue new challenges in the Northern Territory.

I moved up to the role of Administration Coordinator in February, having already worked in admin roles for NAPWA and the Treataware project. My experience with the organisation gave me a sound base and the confidence to lead the team with a high-quality membership service focus.

In the middle of this year, after six years of dedicated service, Administration Officer Jose Machado moved to Positive Life NSW to take up the task of coordinating its positive speakers’ bureau.

We have now welcomed Gladys Jimenez to the role of Receptionist/Administration Officer. Gladys has recently completed studies in business administration and is now an enthusiastic contributor to the valuable work of NAPWA. Her tasks include coordinating events such as Board and network meetings, booking travel, accommodation and venues; as well as supporting the secretariat staff with their activities.

Doug Junor has been assisting with filing and the archive systems (which are now working better than ever) and also as backup admin person when needed.

We also welcome Wendy Moyse as a casual staff member, for those times when we need extra assistance to keep the wheels of admin turning. Wendy comes with a wealth of experience in office administration and organisational services.

We continue to appreciate the work of Christopher Barnes of Email Connect who keeps our computer systems working efficiently and advises us on the complex issue of information technology.

Our team strives to provide consistently high-quality and efficient service for the NAPWA Board, our members and staff.

This year has had its challenges, but with a great team on board we look forward to a professional and productive future.
STATE OF THE POSITIVE NATION
The big issues

A MAJOR FOCUS FOR NAPWA MEMBER ORGANISATIONS THIS YEAR HAS BEEN TREATMENT AS PREVENTION. THE COLLECTIVE TERM REFERS TO RECENT ADVANCES IN BIOMEDICAL TECHNOLOGIES SUCH AS RAPID HIV TESTING, TOPICAL MICROBICIDES AND PRE-EXPOSURE PROPHYLAXIS (PrEP), AS WELL AS TO RESEARCH FINDINGS THAT PLHIV ON SUPPRESSIVE TREATMENT ARE AT LOW RISK OF TRANSMITTING THE VIRUS.

When NAPWA’s campaign, asking positive people to ‘start a treatment conversation with your doctor’, launched in May this year, positive organisations around the country responded with forums and information on the subject.

It was the topic of conversation at NAPWA Chin Wag chat shows co-presented by PLWHA Victoria in Melbourne and Positive Life South Australia in Adelaide; and a treatment roadshow by Queensland Positive People in Cairns and Townsville.

The campaign theme was promoted throughout the Northern Territory via Facebook and an eNewsletter. Posters and resources also went to remote clinics, the Throb night club and sexual health services. Positive Life NSW included the topic as a part of their HIV rural roadshow which toured NSW in recent months; and has also incorporated the campaign’s messages in the work they do with peer groups and in their publication Talkabout.

President Malcolm Leech believes it is important to explain what is meant by the term ‘treatment as prevention’ and the various new acronyms (such as PrEP). His organisation is also planning a treatments ‘myth busting’ campaign, commencing with a series of discussion groups and interviews which will look at: barriers and incentives to treatment uptake; how our experiences and attitudes differ in the pre (1988), early (1989-1995) and post (1996) treatment eras; issues for the newly diagnosed; and the role HIV prescribers play in treatment decision-making.

Pozhet in NSW is developing a discussion paper on the implications of treatment as prevention for heterosexuals living with HIV.

PLWHA Victoria has made discussion of the topic a major part of their regular Phoenix groups for people who are newly diagnosed. The organisation’s expertise in running these groups was recognised when Peer Support Officer Vic Perri was asked to present the courses for the Tasmanian Council on AIDS, Hepatitis and Related Diseases and to positive people in the Northern Rivers area of NSW.

Stigma and discrimination has also been an important focus for PLWHA Victoria this year with their launch of
ENUF. This online campaign encourages PLHIV to share their stories about living with or being affected by the stigma of HIV with the long-term aim of changing people’s attitudes towards us. It was well received at the recent AIDS 2012 conference in Washington. Check it out at www.enuf.org.au.

Executive Officer Brent Allan says there are still unacceptable levels of discrimination against people with HIV, including from the gay community — and sometimes even from positive people themselves.

‘We should not be judgmental, sexist or ageist towards our peers when we are calling others for discriminatory behaviour,’ he says.

The organisation is interested in developing programs to build resilience in positive people to help them withstand any negativity they experience because of their status.

**Positive Women Victoria** has begun a process under their new Strategic Plan of networking with other groups in women’s health and chronic illness. Their mission is to work from a ‘strengths-based’ model to enable positive women to deal with stigma and discrimination and develop a resilient approach to life.

Disclosure of HIV status is still a major issue around the country. **Positive Life SA** included the topic in their four ‘Big Issues’ forums held during the year and with the help of the HIV/AIDS Legal Centre (HALC) are developing a guide on disclosure.

**Positive Life NSW** produced a video as a part of their Sero Disco 2 campaign, which includes the topic of disclosing to partners. The video is available to view on YouTube and on the Manhunt website and so far has had over 16,000 hits.
Disclosing to children is a major issue for members of Straight Arrows and led to them producing the booklet, *Disclosing to Your Child*, an edited version of a Positive Life NSW resource.

Pozhet finds it is the most common concern discussed in groups, at events and on their telephone support line.

With Victoria having the highest number of prosecution cases against people with HIV, including several recent cases, criminalisation of HIV has been an advocacy issue which PLWHA Victoria has continued to pursue this year. They held a forum on the subject in October which included a lawyer and the Chief Health Officer.

The organisation is working with VAC/GMHC to progress discussions with the Office of Public Prosecutions in Victoria to develop a protocol whereby it is clear when HIV positive people accused of putting others at risk of HIV are to be subject to criminal law or better handled under public health management.

After their forum on HIV criminalisation last year, Positive Life SA has now developed a position statement on their response to South Australian laws and the case for reform. The statement can be viewed on their website, www.hivsa.org.au

HIV and ageing also remains a concern, with Queensland Positive People continuing a major research project with the University of Queensland to find out how positive people are experiencing the effects of ageing co-morbidities, including in rural and regional areas. This four-year project will also look at the need for social supports, barriers to access to services and how the social determinants of health — finances, housing and friendship networks — play a role in a positive person’s wellbeing.
STATE OF THE POSITIVE NATION

Promoting good health

WITH RESEARCH TELLING US THAT WE CAN NOW LIVE NEAR NORMAL LIFE SPANS — PROVIDING WE KEEP THE VIRUS UNDER CONTROL — IT IS EVEN MORE IMPORTANT THAT WE MAINTAIN A GOOD QUALITY OF LIFE. AND PLHIV ORGANISATIONS AROUND THE COUNTRY ARE SUPPORTING US TO DO THIS THROUGH A RANGE OF HEALTH PROMOTION ACTIVITIES.

One of the most comprehensive campaigns this year was ‘Sero Disco 2: Why let HIV get in the way of a good relationship?’ Developed by Positive Life NSW, this second phase helps people in serodiscordant relationships negotiate safe and satisfying sexual lives. It also busts some myths about HIV status and answers some common questions about viral load and infectivity.

The campaign magazine tells the stories of a number of gay couples and how they negotiated their serodiscordancy. Common themes include disclosing to partners (and how to handle rejection), using condoms, and current research about viral load.

They also have a campaign website (sdz.positivelife.org.au) and a feature on the Manhunt gay chat site (manhuntcares.com). The two Sydney-based gay papers, SX and Stor Observer, ran a series of articles on the campaign and its messages. Stor Observer also ran banner headlines on the campaign and uploaded the magazine on their website and it was featured on www.same same.com.au, a website frequently accessed by young gay men.

Malcolm Leech, President of Positive Life NSW says that the campaign has been a remarkable success, with the majority of magazines being distributed and numerous hits on websites where it was featured.

‘We know the number of serodiscordant couples
is increasing. This campaign is about breaking down barriers and helping people enjoy satisfying and supportive relationships.’

Pozhet is also developing a resource on serodiscordant relationships for heterosexual couples. A resource on reproductive options for men and women with HIV is also being produced, and both are likely to be launched in November 2012.

Positive Life NSW is also developing a second phase of their successful ‘Wrapped or raw: pos-pos sex’. This web-based campaign looks at the choices made by positive gay men about using condoms in seroconcordant relationships; and offers some options on how to manage disclosure, minimise risk and maximise pleasure. Some new video stories reproduce ways of relating and learning about sex, risk and pleasure. The FACTS series offers information on syphilis, sexually acquired hepatitis C, gonorrhoea and risk-reduction strategies, such as viral load monitoring. Knowing the facts and talking with each other means HIV positive gay men can make informed decisions about the type of sex they want and identify situations in which they may take greater risks.

Their popular ‘Health Promotion Fact Sheet’ series has also been redesigned. Updated fact sheets include: ‘Balancing act: HIV and cancer’, ‘Living with HIV and hepatitis C’, ‘HIV and your mouth’, ‘Disclosing to your child’ and ‘Dealing with diarrhoea’. They are also working on mental health resources after their ‘Making sense of mental health’ consultations with positive people.

PLWHA Victoria ran a forum on hepatitis C and sexual transmission after reports in the state emerged of a high number of hepatitis C cases among HIV positive people. Their main target was sexually adventurous men, and the SAM Project, based in the organisation, is developing education messages about sexual transmission of hepatitis C and how to prevent it. The organisation is also helping to run a support group for people living with both HIV and hepatitis C.

Their Phoenix groups develop strategies for newly diagnosed people to maintain their health, giving information on treatments (including when to treat), healthy living and the various psychosocial aspects of living with the virus. GPs from local high-caseload practices, counsellors from the Victorian AIDS Council and sexual health nurses from the Melbourne Sexual Health Centre all help to deliver a very comprehensive view on HIV.

Facilitator of the Phoenix groups, Vic Perri, says he is surprised how little many newly diagnosed people know about modern HIV treatment. And how many think they will become sick in the near future.

‘It’s great to see the change come over participants once they

‘WE KNOW THE NUMBER OF SERODISCORDANT COUPLES IS INCREASING. THIS CAMPAIGN IS ABOUT BREAKING DOWN BARRIERS AND HELPING PEOPLE ENJOY SATISFYING AND SUPPORTIVE RELATIONSHIPS.’

Positive Life NSW’s Sero Disco 2
realise that their prognosis is much better than they had first thought.’

Quitting Smoking courses (QUIT) have become a feature of the health promotion work of PLWHA Victoria, with the peer support model developed over a number of years proving very successful in helping positive people reduce their risk of cardiovascular disease and cancer.

Straight Arrows included quitting smoking as a part of their adults’ retreat held during the year.

Executive Officer Rebecca Matheson says that this year’s retreat had a health promotion focus. It included a doctor from the Alfred Hospital talking about keeping the heart healthy, a workshop on quitting smoking and a therapeutic group.
facilitated by counsellors from the Victorian AIDS Council.

The organisation was delighted to receive recurrent funding from the Department of Health for their Health Promotion Officer position. While Deanna Blegg was in the position, she worked hard to increase the exercise opportunities for members, including showing people how to use Melbourne’s Bike Share program and to navigate the city’s many bike trials.

Positive Women Victoria has just employed a new Health Promotion Coordinator, Jasmin Lesiak. One of her main tasks this year has been to work with Project Worker Stephanie Christian to develop a major resource kit called My Journey. The resource will include stories of the lived experience of women with HIV and address issues such as disclosing to children, reproductive options, treatment issues, ageing, getting peer support and services for positive women.

Queensland Positive People has worked hard to get health promotion messages to positive people around their very large state. They held a Wellness Weekend with the local sexual health service in Cairns; information days on the Sunshine Coast and a Treatment Roadshow visited Cairns, Townsville and Brisbane. Planning is also well underway for their second Women’s Conference to be held in September 2012.

Positive Living ACT runs a quarterly Dietician Clinic for its members, with assistance from NAPWA. They are also providing opportunities for positive people to increase their exercise (as well as get to know each other) with regular ten pin bowling nights followed by dinner. In cooperation with the AIDS Action Council of the ACT (AACACT), they have developed a community garden; many positive people providing seedlings and using the produce. The organisation is grateful to AACACT for continuing to provide reduced-cost vitamins through their Vitamin Cooperative.

Eat-Indulge-Connect is an interactive food event for PLHIV, their carers, friends and family held by NT AH C in the Northern Territory. They happen on a quarterly basis and align with visits from interstate dietician Jenny McDonald.

HIV positive people in Tasmania also benefitted from a forum on the latest in health and treatments sponsored by NAPWA and the Tasmanian Council of AIDS, Hepatitis and Related Diseases. The forum went for two days and involved positive people from rural and regional parts of the state. It involved presentations from dietician Jenny McDonald and other health specialists and was facilitated with the help of Vic Perri from PLWHA Victoria and NAPWA’s President Robert Mitchell.

The mental health needs of the local HIV positive population have received a lot of attention from Positive Life SA (PL SA), with the establishment of a Mental Health Professionals Network in South Australia. PL SA has led the network, organising quarterly meetings with mental health clinicians and community workers and people with HIV. The professionals who attend have reported that they found the meetings important for their professional development and understanding the psychosocial issues of those living with HIV.

‘IT’S GREAT TO SEE THE CHANGE COME OVER PARTICIPANTS ONCE THEY REALISE THAT THEIR PROGNOSIS IS MUCH BETTER THAN THEY HAD FIRST THOUGHT.’

Phoenix group facilitator Vic Perri describing the reaction of the many newly diagnosed who think they will become sick in the near future

NAPWA ANNUAL REPORT 2011-2012

'It’s great to see the change come over participants once they realise that their prognosis is much better than they had first thought.' Phoenix group facilitator Vic Perri describing the reaction of the many newly diagnosed who think they will become sick in the near future.
STATE OF THE POSITIVE NATION

Future directions

This year a number of PLHIV organisations prepared their strategic plans or decided on new paths to set their future directions.

Positive Living ACT developed a new strategic plan that concentrates on four major issues: stigma and discrimination, mental health, legal issues and ageing with HIV.

The three positive organisations in Victoria, PLWHA Victoria, Positive Women Victoria and Straight Arrows co-located to the one building during the year and everyone is enjoying vastly improved office spaces. This was a major move for the organisations, motivated by a desire on their part to work more closely on advocacy, health promotion and other joint concerns.

Positive Women Victoria has begun a major process of change, both in their governance and model of operation. Last year they changed their constitution to allow for a number of HIV negative women to join the Board to contribute their expertise to the organisation — ensuring that there will still be a majority of places for positive women.

The organisation has just signed off on a new strategic plan which aims to strengthen their governance model, review policies and develop new strategic partnerships. They believe it will also help them engage more effectively with women in harder-to-reach communities such as those from CALD and Aboriginal backgrounds.

Executive Officer Tania Phillips says that greater networking with women’s health groups, CALD, chronic illness and broader community organisations will assist their organisation to develop a ‘strengths-based’ model of peer support and health promotion.

‘We have had less call for crisis management and more requests for information on health, HIV and ageing, and on dealing with things like stigma and discrimination.’

‘Our strategic plan prepares us for the likelihood of more mainstreaming of services away from the HIV sector and we are aiming to do more training of the workforce in the way they deal with women with HIV.’

PLWHA Victoria is working with a Canadian HIV organisation to try to develop leadership courses for positive people in Victoria. If this initiative is able to be taken up by the organisation it will equip positive people with leadership skills that they could use in their workplace or if they were to seek governance roles with the organisation.

Straight Arrows are considering running Camp Seaside as a national project; there has been interest from other states to work in partnership to deliver opportunities for families to share their experiences. Executive Officer Rebecca Matheson said such an idea would only get off the ground if PLHIV organisations around the nation agreed to collaborate.

A new Heterosexual HIV Service Consumer Reference Group has been formed in NSW to help inform the work of Pozhets and keep that organisation aware of emerging issues for its membership. The organisation also runs a Women and Families group in partnership with ACON; and an increasing number of women from CALD backgrounds are attending these groups.

Last year, Malcolm Leech, President of Positive Life NSW, was part of a new initiative to visit rural and regional
members in Dubbo in central NSW. He and staff of the organisation were so struck by the enthusiastic response and the clear need for greater information flow to these communities that their Board decided to focus more on engaging with their rural and regional constituents.

Consequently, an HIV Road Show visited Dubbo, Bangalow, Tamworth, Lismore and Newcastle with speakers from Positive Life NSW, NAPWA and the HIV/AIDS Legal Service (HALC). Malcolm says the success of this new strategy will be built upon, including through improving website connections with their rural and regional members.

Likewise, Positive Life SA held Rural Life +, a weekend workshop for rural and outer metropolitan members to discuss the issues (including disclosure) of those living rurally with HIV. Health and treatments information was shared with people who, to date, had little or no contact with an HIV organisation.

Queensland Positive People (QPP) has been working within a changed political climate. Executive Officer Simon O’Connor is sitting on the new Ministerial Advisory Committee on HIV where he is trying to ensure that services to positive people are maintained, and where necessary, improved.

Simon says QPP has worked hard to get road shows and information sessions to as many parts of the state as possible, although he is pleased that local groups have also taken the initiative to advocate on issues in their own regions. One example is Positive Action Cairns, where a group of positive people is working with QPP to run drop-ins and visits to areas in the hinterland.

A significant loss of funding (17%) for Positive Life SA, has made it harder for the organisation to achieve its goals this year. Their response to HIV and ageing issues, especially around looking at the need for appropriate accommodation and home care has had to be put on hold due to these funding cuts. However, the Board and staff continue to advocate for all positive people.

There has also been a loss of 40% of funding for the Tasmanian Council on AIDS Hepatitis, and Related Diseases (TasCAHRD), which is likely to have an impact on services for HIV positive people, with some of the outreach to people in rural and regional areas likely to be limited. The service will also no longer be able to support clients with hepatitis C.

On a brighter note though, Straight Arrows has been working closely with TasCAHRD, helping the organisation work with the growing population of positive heterosexuals in the state. Straight Arrows plans to facilitate two dinners in Hobart in the coming year.
THESE DAYS, MANY OF OUR MEMBERS NOW PREFER TO ENGAGE BY EMAIL OR TO INTERACT VIA THE NET. THIS HAS MEANT WE HAVE ALL HAD TO EMBRACE NEW WAYS TO OUTREACH; ADDING SOCIAL MEDIA TO OUR MIX OF NETWORKING OPPORTUNITIES.

QPP Executive Officer Simon O’Connor is pleased with the way his organisation has responded. ‘These days, people want to be able to access information and to contact you from their computer or phone.’

‘QPP’s strategic directions propose we deliver the same level of service to a positive person online as if they were walking in the front door.’

People can now talk to staff or participate in group work or other discussions over Skype. Simon is even hoping to be able to link people live via the internet to their Treatment Roadshows. Their website is now active and includes a Live Assist component to help people with questions or to navigate the site. (See qpp.net.au)

This is a common theme around the country; Positive Living ACT, Positive Life NSW and PLWHA Victoria have all developed new websites and added new technology. Most organisations now carry extensive health and treatment information and issues to do with living with HIV with links to the NAPWA website. Several organisations are also using Facebook and Twitter to get their messages out to members.

PLWHA Victoria updated their popular resource, Your Local: Victorian services for people living with HIV and AIDS for people newly diagnosed or who have just moved to Victoria. The resource is distributed by HIV nurses, doctors, dieticians and social workers.

Getting positive people together to socialise and share their experiences is still an important form of support and an essential way for organisations to understand their members’ needs.

PLHIV come together on a monthly basis for a meal. This decreases social isolation and provides a space where positive people can share and receive information.

PLWHA Victoria runs Planet Positive social afternoons at a hotel in Richmond, attracting 80-100 people at each event. Queensland Positive People also runs regular Planet Positive events in Cairns, Brisbane and the Gold Coast and they remain a popular event in Sydney for Positive Life NSW.

Poz Day Out is a twice-yearly social connectivity event run by Positive Life SA. It is held during the school holidays and gathers a diversity of positive people and their families.

‘Poslit’ is a creative writing project which QPP ran during the year to encourage positive people to tell their stories of the lived experience of HIV. It was well received and stories will be compiled into a book next year.

Positive Life SA also held a pos arts program and exhibition in June this year. It was in
partnership with the Workers’ Educational Association who provided arts and writing courses for a range of positive people to use.

The Northern Territory hosted numerous events and activities for World AIDS Day. A stall in the Smith St Mall was a huge success, attracting a range of interested people who were more than happy to engage in discussions around HIV. Alice Springs had community stalls in Todd Mall and Yepeyenre as well as an event at the Alice Springs Library.

In May, the annual AIDS Candlelight Vigil was hosted in Darwin with a screening of the critically-lauded documentary ‘We Were Here’. The event had an unprecedented attendance, bringing many older positive community members, and new younger community participants together.

Retreats have always played an important role in bringing positive people and their families together to develop friendships and social supports in a safe space. Straight Arrows has been running Camp Seaside for a number of years. Last year there were 65 attendees from around Australia, plus a family from Timor Leste. Positive gay men and their children have been
attending the camp in recent years, following acknowledgement by the organisation that the issues they face, including disclosure, are much the same as other families.

The organisation also ran a two-day adult retreat for their local members where health promotion topics were part of the agenda. Straight Arrows would like to acknowledge the significant help they have received from staff and volunteers at VAC/GMHC, PLWHA Victoria and Positive Women Victoria to help with these retreats.

Pozhet runs two retreats a year and this year held them in regional areas north and south of Sydney. Their outreach work also extends to providing scholarships for people to attend full-day workshops on a range of issues, including health promotion. They also hold African Women’s Days along with other agencies and partners.

PLWHA Victoria has extended their outreach to schools in rural and regional parts of Victoria with their Positive Speakers’ Bureau, HIV and Sexual Health project. This year the program was extended to TAFE campuses in regional areas.

This year, the bureau delivered 204 individual talks to an audience of 6,566 people. More than half these talks were presented by female speakers. The high percentage of talks by positive women has been made possible by a Memorandum of Understanding between PLWHA Victoria, Positive Women Victoria and Straight Arrows to form the one bureau and to pursue collective training and funding opportunities.

The bureau has presented to the Victorian Police Academy on numerous occasions, as well as to Rotary Clubs and to volunteers and peer groups at the VAC/GMHC. The bureau now trains people with hepatitis B and C as part of its partnership with Hepatitis Victoria.

Queensland Positive People continues to host the Queensland Positive Speakers’ Bureau in a partnership with the University of Queensland, Hepatitis Queensland and the Ethnic Communities Council of Queensland. This partnership ensures there is a diversity of speakers to talk to a range of audiences about the experience of living with HIV. This year the Bureau also formed a partnership with Youth Empowerment Against HIV (YEAH), to increase the number of young speakers who can talk about the impact of HIV in schools.

Positive Life NSW has now employed a full-time Speakers’ Bureau Coordinator, Jose Machado, who is leading a process of reinvigorating their work and engaging with the broader community.

STATE OF THE POSITIVE NATION was prepared by David Menadue, based on interviews he conducted with Brent Allan (PLWHA Vic), Mandi Collins (Positive Living ACT), Craig Cooper (NTAHC), Wayne Hornsby (Tasmania), Malcolm Leech (Positive Life NSW), Rebecca Matheson (Straight Arrows Vic), Susan McGuckin (Pozhet NSW), Tony Minge (Positive Life SA), Simon O’Connor (Queensland Positive People) and Tania Philips (Positive Women Vic)
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Secretary/Treasurer Craig Cooper
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Dianne Lloyd, Jo Watson (Ex-officio)
Staff representative Scott Lockhart

National Network of Women Living with HIV
Chair Katherine Leane
Total members including state and territory representatives: 13

Positive Aboriginal and Torres Strait Islander Network (PATSIN)
Chair Wilo Muwadda
Total members including state and territory representatives: 13

Treataware Outreach Network (TON)
Co-chairs John Daye, Adrian Ogier
Brent Beadle (Staff), Kate Bennett, Joe Condon, Panos Couros,
Dimitri Daskalakis, Simon Donohoe, Laura Jones, Cipri Martinez,
Jennifer McDonald, Mark Stephens, Neil McKellar-Stewart, Vic Perri,
Nada Ratcliffe, Peter Watts

Positive Living Reference Group
Editor Adrian Ogier
Deputy editor David Menadue
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Graham Douglas-Meyer, Neil McKellar-Stewart, Shannen Myers,
Dr Louise Owen, Vic Perri,
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Senior Project Officer/Health and Treatments Adrian Ogier
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Strategic Advisory Group on Education
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David Menadue

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Antiretrovirals Guidelines Commentary Panel
Bill Whittaker
National Conference Program Committee
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Australian Centre for HIV and Hepatitis Virology
Research Advisory Board
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Australian Federation of Disability Organisations
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ImmunoVirology Research Network Committee
Jo Watson

INSIGHT Community Advisory Board
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Janssen Advisory Board
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Neurology Working Group
Jo Watson, Peter Watts
Oncology Working Group
David Menadue
Primary Infections Working Group
Adrian Ogier
PRESENTATIONS

Toxicology/Pharmacology Working Group John Daye

Microbicides 2012 Conference Program Committee/Scientific Committee Adrian Ogier

Ministerial Advisory Committee on Blood Borne Viruses and STIs HIV/STI subcommittee Robert Mitchell Legal Working Group Sean Slavin

MSD Advisory Board Jo Watson/Bill Whittaker

National BBV & STI Surveillance Committee Jo Watson

National Centre in HIV Social Research (NCHSR) Scientific Advisory Committee Sean Slavin ‘Investigating the capacity of the general practitioner workforce to meet ongoing HIV primary care needs in Australia’ Project Expert Committee Scott Lockhart

New South Wales HIV Testing Working Group Phillip Keen

New South Wales Metropolitan Gay Men’s HIV Testing Working Group Phillip Keen

Pozhet Reference Group Scott Lockhart

ViV Advisory Board Jo Watson/Bill Whittaker

JULY 2011
Treataware Industry Short Course in HIV Medicine
• HIV stigma Sean Slavin
• PEP, PrEP and treatment as prevention Sean Slavin
• Subpopulations and complications Adrian Ogier

Treataware Community Short Course in HIV Medicine
• Access to antiretrovirals in Australia Adrian Ogier
• HIV stigma Sean Slavin
• PEP, PrEP and treatment as prevention Sean Slavin

AUGUST 2011
IAS2011 conference reportback to Melbourne clinicians
• Treatment as prevention Adrian Ogier

International Conference on AIDS in Asia/Pacific
• HIV Stigma in Australia, a report on the HIV stigma audit Sean Slavin

SEPTEMBER 2011
ASHM Australasian HIV/AIDS Conference presentations
• ATRAS and people who cannot access Medicare Jo Watson
• Australia’s commitment to the UN HIV targets Bill Whittaker
• HIV Stigma in Australia a report on the HIV stigma audit Sean Slavin
• HIV, the criminal law and stigma in Australia Sean Slavin

HIV and the criminal law symposium
• The criminal law and its effects on people living with HIV Sean Slavin

OCTOBER 2011
Kirby Institute Combined Working Group’s Plenary
• A model for the future of the Combined Working Groups Jo Watson

NOVEMBER 2011
BBVSS
• Policy implications of s100 dispensing issues Jo Watson

NSW HIV Think Tank
• Partners in prevention: implications of treatment as prevention for PLHIV Sean Slavin

FEBRUARY 2012
Lecture to visiting Chinese Communist Party officials
• The community HIV response in Australia Sean Slavin

MARCH 2012
Treataware Industry Short Course in HIV Medicine
• Access to antiretrovirals in Australia Adrian Ogier

Treataware Outreach Network meeting
• HIV rapid testing and late HIV diagnosis among MSM Phillip Keen
• Treatments policy overview Jo Watson

APRIL 2012
HIV and Related Diseases Conference, NCHSR
• Qualitative results from the HIV Stigma Audit Sean Slavin

2012 International Microbicides Conference presentations
• Pre-exposure Prophylaxis and the Australian PBS Phillip Keen
• HIV and the criminal law in Australia: effects and stigma Sean Slavin
RESEARCH ACTIVITY AND COLLABORATIONS

MAY 2012

Heterosexual HIV/AIDS Service (Pozhet) staff in-service
- HIV treatments update
  Adrian Ogier

NSW Ministerial Advisory Committee on HIV Health Promotion Sub-committee
- Barriers to HIV treatment uptake and the NAPWA HIV treatments campaign
  Phillip Keen

AFAO HIV Educators Conference
- Barriers to HIV treatment uptake and the NAPWA HIV treatments campaign
  Phillip Keen
- Festina Lente (hasten slowly) implications of treatment as prevention for PLHIV Sean Slavin
- Rapid HIV testing and HIV testing: current policy and program challenges
  Phillip Keen

AFAO HIV Educators Conference
- Barriers to HIV treatment uptake and the NAPWA HIV treatments campaign
  Phillip Keen
- Festina Lente (hasten slowly) implications of treatment as prevention for PLHIV
  Sean Slavin
- Rapid HIV testing and HIV testing: current policy and program challenges
  Phillip Keen

ALFRED/BURNET
Vorinostat pilot study

ALFRED HOSPITAL
Health Map Project

AUSTRALIAN RESEARCH CENTRE IN SEX, HEALTH & SOCIETY (ARCSHS)
HIV Futures 7

CLINICAL AUDITS
(HIV 5100 sites)

HIV NEUROCOGNITIVE SCREENING STUDY
(HIV 5100 sites)

INSIGHT
START

KIRBY INSTITUTE
- AHOD Temporary Residents Access Study (ATRAS)
- HIV Population and Jurisdictional Distribution Modelling Project
- HIV Seroconversion Study
- Home HIV Testing Study
- Sydney Rapid HIV Testing Study
- Taxi-KAB Study

NAPWA HIV STIGMA AUDIT

NATIONAL CENTRE IN HIV SOCIAL RESEARCH (NCHSR)
- Cybersex Study
- PLHIV who do not use ART

NATIONAL CLINICAL TRIALS DATABASE

PUBLICATIONS

Adherence to HIV Treatment Guidelines for Comorbid Disease Assessment and Initiation of Antiretroviral Therapy JAIDS, 59 (5) 478-488

HIV and age: an overview of an emerging issue Sexual Health 8(4) 449-451

Watson J PBS deferrals CHF Journal

NAPWA RESEARCH GRANT APPLICATIONS

Positive perspectives: a study investigating the impact of an HIV diagnosis on identity
Submitted to the National Health and Medical Research Council through the NCHSR

SUBMISSIONS AND FORMAL BRIEFS

Implementing the UN Political Declaration in Australia: turning political will into action (AFAO, AIVL, NAPWA and Scarlet Alliance)

Senate Inquiry into Government Administration of the PBS

Health care workers with blood borne viruses
CDNA Guidelines Review

Mid-term review of national BBVSS strategies

Australia’s HIV response
Health Minister briefing
SPONSORS

Abbott Virology

Australian Government
AusAID

Boehringer Ingelheim

Australian Government
Department of Health and Ageing

Bristol-Myers Squibb Pharmaceuticals

Gilead

Janssen

Levi's

MERCK SHARP & DOHME

ViiV Healthcare
AUDITED REPORT

Financial Report
2011-2012
Your Board of Directors submit the financial report of the National Association of People Living with HIV/AIDS (NAPWA) Incorporated for the financial year ended 30 June 2012.

Board of Directors

The names of the Directors throughout the year and at the date of this report are:

- President: Robert Mitchell
- Vice President: Sonny Williams
- Secretary/Treasurer: Robert Langdon (resigned 19/11/11)
  Craig Cooper (appointed 19/11/11)
- Directors: Des Hargreaves, Geoff Honnor, Peter Fenoglio, Diane Lloyd, Ash Jones (appointed 19/11/11)
- Staff Rep: Scott Lockhart

Principal Activities

The principal activities of the Association during the financial year were:

1. Advancing the human rights and dignity of people with HIV/AIDS, including their right to participate in the Australian Community without discrimination and their right to comprehensive and appropriate treatment, care support and education;

2. Advocacy on national issues concerning people with HIV/AIDS;

3. Provision of assistance to people affected by HIV/AIDS, including the provision of material, emotional and social support;

4. Encouragement, assistance, monitoring and promotion of medical and scientific research into the causes, prevention and cure of HIV/AIDS;

5. Formulation of policies for member organisations on matters concerning HIV/AIDS at a national and international level;

6. Representation of member organisations on all matters concerning HIV/AIDS at a national and international level; and

7. Collection and dissemination of information and resources for distribution to member organisations.
DIRECTORS’ REPORT

Significant Changes

No significant change in the nature of these activities occurred during the year.

Operating Result

The surplus from ordinary activities amounted to $47,708 (2011: surplus $24,902).

Signed in accordance with a resolution of the Members of the Executive:

Robert Mitchell
President

Craig Cooper
Secretary/Treasurer

Dated this 6th day of October 2012.
INCOME STATEMENT FOR THE YEAR ENDED 30 JUNE 2012

<table>
<thead>
<tr>
<th>Note</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Revenue</td>
<td>2</td>
<td>1,734,877</td>
</tr>
<tr>
<td>Employee expenses</td>
<td></td>
<td>626,347</td>
</tr>
<tr>
<td>Depreciation and amortisation expenses</td>
<td></td>
<td>16,993</td>
</tr>
<tr>
<td>Other expenses from ordinary activities</td>
<td></td>
<td>1,043,829</td>
</tr>
<tr>
<td>Surplus (Deficit) from operations</td>
<td>3</td>
<td>47,708</td>
</tr>
</tbody>
</table>

BALANCE SHEET AS AT 30 JUNE 2012

<table>
<thead>
<tr>
<th>Note</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash Assets</td>
<td>4</td>
<td>350,309</td>
</tr>
<tr>
<td>Receivables</td>
<td>5</td>
<td>295,801</td>
</tr>
<tr>
<td>Other</td>
<td>6</td>
<td>10,940</td>
</tr>
<tr>
<td>Total Current Assets</td>
<td></td>
<td>657,050</td>
</tr>
<tr>
<td>Non-Current Assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property</td>
<td>7</td>
<td>743,445</td>
</tr>
<tr>
<td>Plant and equipment</td>
<td>7</td>
<td>164,453</td>
</tr>
<tr>
<td>Accumulated Depreciation</td>
<td></td>
<td>(135,977)</td>
</tr>
<tr>
<td>Stock on Hand</td>
<td></td>
<td>-</td>
</tr>
<tr>
<td>Total Non-Current Assets</td>
<td></td>
<td>771,921</td>
</tr>
<tr>
<td>Current Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payables</td>
<td>8</td>
<td>446,613</td>
</tr>
<tr>
<td>Provisions</td>
<td>9</td>
<td>103,766</td>
</tr>
<tr>
<td>Total Current Liabilities</td>
<td></td>
<td>550,379</td>
</tr>
<tr>
<td>Non-Current Liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payables</td>
<td>8</td>
<td>412,047</td>
</tr>
<tr>
<td>Provisions</td>
<td>9</td>
<td>10,553</td>
</tr>
<tr>
<td>Total Non-Current Liabilities</td>
<td></td>
<td>422,598</td>
</tr>
<tr>
<td>Net Assets</td>
<td></td>
<td>455,994</td>
</tr>
</tbody>
</table>

Equity

<table>
<thead>
<tr>
<th>Note</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Retained Earnings</td>
<td>10</td>
<td>455,994</td>
</tr>
<tr>
<td>Total Equity</td>
<td></td>
<td>455,994</td>
</tr>
</tbody>
</table>

The accompanying notes form part of this financial report.
STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2012

<table>
<thead>
<tr>
<th>Retained Earnings</th>
<th>$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance at 1 July 2011</td>
<td>408,286</td>
</tr>
<tr>
<td>Surplus attributable to activities</td>
<td>47,708</td>
</tr>
<tr>
<td><strong>Balance at 30 June 2012</strong></td>
<td><strong>455,994</strong></td>
</tr>
</tbody>
</table>

CASH FLOW STATEMENT FOR THE YEAR ENDED 30 JUNE 2012

<table>
<thead>
<tr>
<th>Note</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>$</td>
<td></td>
</tr>
<tr>
<td>Operating Grant Receipts</td>
<td>738,597</td>
<td>920,629</td>
</tr>
<tr>
<td>Donations &amp; Other Income Received</td>
<td>797,605</td>
<td>721,036</td>
</tr>
<tr>
<td>Interest Received</td>
<td>17,520</td>
<td>14,651</td>
</tr>
<tr>
<td>Payments to suppliers and employees</td>
<td>(1,516,829)</td>
<td>(1,468,278)</td>
</tr>
<tr>
<td><strong>Net Cash Provided by Operating Activities</strong></td>
<td><strong>36,892</strong></td>
<td><strong>188,038</strong></td>
</tr>
<tr>
<td>Cash Flows from Investing Activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Capital Asset Purchase</td>
<td>(280,817)</td>
<td>(4,592)</td>
</tr>
<tr>
<td>Receipts from Disposal of Assets</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Net Cash Provided by Investing Activities</strong></td>
<td><strong>(280,817)</strong></td>
<td><strong>(4,592)</strong></td>
</tr>
<tr>
<td><strong>Net Increase/(Decrease) in Cash Held</strong></td>
<td><strong>(243,925)</strong></td>
<td><strong>183,446</strong></td>
</tr>
<tr>
<td>Cash at the Beginning of the Financial Year</td>
<td>594,234</td>
<td>410,788</td>
</tr>
<tr>
<td><strong>Cash at the End of the Financial Year</strong></td>
<td><strong>350,309</strong></td>
<td><strong>594,234</strong></td>
</tr>
</tbody>
</table>

The accompanying notes form part of this financial report.
Note 1: Statement of Significant Accounting Policies

The following is a summary of the material accounting policies adopted by the Association in the preparation of the financial report. The accounting policies have been consistently applied, unless otherwise stated.

(A) BASIS OF PREPARATION

This financial report is a general purpose financial report that has been prepared in accordance with Australian Accounting Standards, Urgent Issues Group Consensus Views and other authoritative pronouncements of the Australian Accounting Standards Board and the requirements of the Australian Capital Territory Associations Incorporation Act 1991.

The financial report covers the National Association of People Living with HIV/AIDS (NAPWA) Incorporated including the AIDS Treatment Project Australia (ATPA). The National Association of People Living with HIV/AIDS (NAPWA) Incorporated is an association incorporated under the Australian Capital Territory Associations Incorporation Act 1991.

The financial report has been prepared on an accruals basis and is based on historical costs and does not take into account changing money values or, except where stated, current valuations of non-current assets. Cost is based on the fair values of the consideration given in exchange for assets.

(B) INCOME TAX

As a Public Benevolent Institution for the purposes of Subdivision 30-B of the Income Tax Assessment Act 1997 the Association is exempt from income tax.

(C) PROPERTY, PLANT AND EQUIPMENT

Property, Plant and Equipment is carried at deemed cost less, where applicable any accumulated depreciation.

Property
Freehold land and buildings are shown at their deemed cost. The actual purchase price and relevant incidentals of acquisition have been aggregated to derive the deemed cost.

Plant and Equipment
Plant and equipment are measured at Directors Valuation.

The carrying amount of plant and equipment is reviewed annually by the Association to ensure it is not in excess of the recoverable amount from those assets. The recoverable amount is assessed on the basis of the expected net cash flows which will be received from the assets employment and subsequent disposal. The expected net cash flows have not been discounted to present values in determining recoverable amounts.
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2012

Depreciation

The depreciable amount of all fixed assets are depreciated on a straight line basis over the useful lives of the assets to the Association commencing from the time the asset is held ready for use.

The depreciation rates used for each class of depreciable assets are:

<table>
<thead>
<tr>
<th>CLASS OF FIXED ASSET</th>
<th>DEPRECIATION RATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plant and Equipment</td>
<td>10% - 33.33%</td>
</tr>
</tbody>
</table>

(D) EMPLOYEE ENTITLEMENTS
Provision is made for the Association’s liability for employee entitlements arising from services rendered by employees to balance date. Entitlements arising from wage and salaries and annual leave which will be settled within one year have been measured at their nominal amount. Other employee entitlements payable have been measured at an amount approximately equivalent to the present value of the estimated future cash outflows to be made for those entitlements.

(E) CASH
For the purposes of the Statement of Cash Flows, cash includes cash on hand, at banks and on deposit.

(F) REVENUE
All revenue is stated net of the amount of goods and services tax (GST).

(G) GOODS AND SERVICES TAX
Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the balance sheet are shown inclusive of GST.

(H) COMPARATIVE FIGURES
When required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

(I) IMPAIRMENT OF ASSETS
At each reporting date, the Association reviews the carrying values of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset’s fair value less costs to sell and value-in-use, is compared to the asset’s carrying value. Any excess of the asset’s carrying value over its recoverable amount is expensed to the income statement.
J) FINANCIAL INSTRUMENTS

Recognition and initial measurement
Financial instruments, incorporating financial assets and financial liabilities, are recognised when the Association becomes a party to the contractual provisions of the instrument. Trade date accounting is adopted for financial assets that are delivered within timeframes established by marketplace convention.

Financial instruments are initially measured at fair value plus transactions costs where the instrument is not classified as at fair value through profit or loss. Transaction costs related to instruments classified as at fair value through profit or loss are expensed to profit or loss immediately. Financial instruments are classified and measured as set out below.

Derecognition
Financial assets are derecognised where the contractual rights to receipt of cash flows expires or the asset is transferred to another party whereby the Association no longer has any significant continuing involvement in the risks and benefits associated with the asset. Financial liabilities are derecognised where the related obligations are either discharged, cancelled or expire. The difference between the carrying value of the financial liability extinguished or transferred to another party and the fair value of consideration paid, including the transfer of non-cash assets or liabilities assumed is recognised in profit or loss.

Classification and subsequent measurement

(I) FINANCIAL ASSETS AT FAIR VALUE THROUGH INCOME STATEMENT
Financial assets are classified at fair value through profit or loss when they are held for trading for the purpose of short term profit taking, where they are derivatives not held for hedging purposes, or designated as such to avoid an accounting mismatch or to enable performance evaluation where a group of financial assets is managed by key management personnel on a fair value basis in accordance with a documented risk management or investment strategy. Realised and unrealised gains and losses arising from changes in fair value are included in profit or loss in the period in which they arise.

(II) LOANS AND RECEIVABLES
Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market and are subsequently measured at amortised cost using the effective interest rate method.

(III) HELD-TO-MATURITY ASSETS
Held-to-maturity investments are non-derivative financial assets that have fixed maturities and fixed or determinable payments, and it is the Association’s intention to hold these investments to maturity. They are subsequently measured at amortised cost using the effective interest rate method.
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2012

(IV) AVAILABLE-FOR-SALE FINANCIAL ASSETS
Available-for-sale financial assets are non-derivative financial assets that are either designated as such or that are not classified in any of the other categories. They comprise investments in the equity of other entities where there is neither a fixed maturity nor fixed or determinable payments.

(V) FINANCIAL LIABILITIES
Non-derivative financial liabilities (excluding financial guarantees) are subsequently measured at amortised cost using the effective interest rate method.

Impairment
At each reporting date, the Association assesses whether there is objective evidence that a financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in the value of the instrument is considered to determine whether an impairment has arisen. Impairment losses are recognised in the income statement.

Note 2: Revenue

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Operating Activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commonwealth DoHA Grants</td>
<td>643,550</td>
<td>632,790</td>
</tr>
<tr>
<td>CSSS Grants</td>
<td>166,840</td>
<td>163,954</td>
</tr>
<tr>
<td>Pharmaceutical Co Sponsorship</td>
<td>507,500</td>
<td>355,470</td>
</tr>
<tr>
<td>Projects Funding</td>
<td>302,877</td>
<td>204,957</td>
</tr>
<tr>
<td>Grants and Research Funding</td>
<td>44,499</td>
<td>14,500</td>
</tr>
<tr>
<td>Travel Reimbursement and Honorariums</td>
<td>21,216</td>
<td>39,788</td>
</tr>
<tr>
<td>Course and Conference Registrations</td>
<td>29,600</td>
<td>44,286</td>
</tr>
<tr>
<td>CD Sales</td>
<td>-</td>
<td>375</td>
</tr>
<tr>
<td>Donations</td>
<td>900</td>
<td>4,000</td>
</tr>
<tr>
<td>Miscellaneous</td>
<td>375</td>
<td>3,342</td>
</tr>
<tr>
<td>Total</td>
<td>1,717,357</td>
<td>1,463,462</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Non-Operating Activities</td>
<td>17,520</td>
<td>16,282</td>
</tr>
<tr>
<td>Interest Received</td>
<td>17,520</td>
<td>16,282</td>
</tr>
<tr>
<td>Total Revenue</td>
<td>1,734,877</td>
<td>1,479,744</td>
</tr>
</tbody>
</table>
Note 3: Profit from Ordinary Activities

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Profit (Loss)</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>from ordinary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Expenses:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administration</td>
<td>262,700</td>
<td>278,508</td>
</tr>
<tr>
<td>Treataware</td>
<td>82,582</td>
<td>55,347</td>
</tr>
<tr>
<td>Executive</td>
<td>95,759</td>
<td>94,887</td>
</tr>
<tr>
<td>Committee</td>
<td>95,759</td>
<td>94,887</td>
</tr>
<tr>
<td>Employment Costs</td>
<td>626,347</td>
<td>636,878</td>
</tr>
<tr>
<td>Media Monitoring</td>
<td>10,444</td>
<td>7,689</td>
</tr>
<tr>
<td>Networks/Portfolios</td>
<td>25,476</td>
<td>15,334</td>
</tr>
<tr>
<td>Policy</td>
<td>98,988</td>
<td>151,782</td>
</tr>
<tr>
<td>Positive Living</td>
<td>81,620</td>
<td>82,525</td>
</tr>
<tr>
<td>Projects</td>
<td>279,249</td>
<td></td>
</tr>
<tr>
<td>Projects - External</td>
<td>116,005</td>
<td>123,892</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,679,169</strong></td>
<td><strong>1,446,842</strong></td>
</tr>
</tbody>
</table>

(b) Auditors Remuneration
- Auditing or reviewing the financial report | 8,000 | 8,000 |
- Other | - | - |

Note 4: Cash Assets

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash at Bank</td>
<td>338,710</td>
<td>583,374</td>
</tr>
<tr>
<td>Cash on Deposit</td>
<td>11,349</td>
<td>10,720</td>
</tr>
<tr>
<td>Cash on Hand</td>
<td>250</td>
<td>140</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>350,309</strong></td>
<td><strong>594,234</strong></td>
</tr>
</tbody>
</table>

Note 5: Receivables

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sundry Debtors</td>
<td>295,801</td>
<td>114,371</td>
</tr>
</tbody>
</table>

Note 6: Other Assets

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accrued Income</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Deposits Paid</td>
<td>655</td>
<td>79,695</td>
</tr>
<tr>
<td>Prepayments</td>
<td>10,285</td>
<td>23,533</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>10,940</strong></td>
<td><strong>103,228</strong></td>
</tr>
</tbody>
</table>
Note 7: Property, Plant & Equipment

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Property</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G5/1 Erskineville Road, Newtown - at cost</td>
<td>$743,445</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>$743,445</td>
<td>-</td>
</tr>
<tr>
<td>Plant &amp; Equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Office Equipment - at Executive Committee Valuation</td>
<td>$164,453</td>
<td>$155,946</td>
</tr>
<tr>
<td>Less accumulated depreciation</td>
<td>(135,977)</td>
<td>(118,985)</td>
</tr>
<tr>
<td>Stock on Hand</td>
<td>1,156</td>
<td>38,117</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(a) Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Office Equipment

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance at the beginning of year</td>
<td>$36,961</td>
<td>$49,997</td>
</tr>
<tr>
<td>Additions</td>
<td>$8,507</td>
<td>$6,195</td>
</tr>
<tr>
<td>Disposals</td>
<td>-</td>
<td>(299)</td>
</tr>
<tr>
<td>Depreciation expense</td>
<td>(16,992)</td>
<td>(18,932)</td>
</tr>
<tr>
<td>Carrying amount at the end of year</td>
<td>$28,476</td>
<td>$36,961</td>
</tr>
</tbody>
</table>

Stock on Hand

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance at the beginning of year</td>
<td>$1,156</td>
<td>$1,198</td>
</tr>
<tr>
<td>Additions</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Sales</td>
<td>-</td>
<td>(42)</td>
</tr>
<tr>
<td>Stock written-off</td>
<td>(1,156)</td>
<td>-</td>
</tr>
<tr>
<td>Carrying amount at the end of year</td>
<td>-</td>
<td>$1,156</td>
</tr>
</tbody>
</table>

Note 8: Payables

Current

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade creditors and accruals</td>
<td>126,112</td>
<td>86,975</td>
</tr>
<tr>
<td>Income received in advance</td>
<td>261,413</td>
<td>260,339</td>
</tr>
<tr>
<td>WBC - Fixed Rate Business Loan</td>
<td>29,748</td>
<td>-</td>
</tr>
<tr>
<td>WBC - Floating Rate Business Loan</td>
<td>29,340</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>$446,613</td>
<td>$347,314</td>
</tr>
</tbody>
</table>

Non-Current

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>WBC - Fixed Rate Business Loan</td>
<td>204,660</td>
<td>-</td>
</tr>
<tr>
<td>WBC - Floating Rate Business Loan</td>
<td>207,387</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>$412,047</td>
<td>-</td>
</tr>
</tbody>
</table>
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2012

Note 9: Provisions

<table>
<thead>
<tr>
<th>Current</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision for Annual Leave</td>
<td>40,765</td>
<td>34,600</td>
</tr>
<tr>
<td>Provision for Long Service Leave</td>
<td>63,001</td>
<td>58,977</td>
</tr>
<tr>
<td>Retained surplus at the end of the financial year</td>
<td>103,766</td>
<td>93,577</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Non-Current</th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provision for Long Service Leave</td>
<td>10,551</td>
<td>773</td>
</tr>
</tbody>
</table>

Number of employees at year end (FTE) | 7.25 | 8.0 |

Note 10: Retained Surplus

Retained surplus at the beginning of the financial year | 408,286 | 383,384 |
Net surplus/(deficit) attributable to the Association | 47,708 | 24,902 |
Retained surplus at the end of the financial year | 455,994 | 408,286 |

Note 11: Cash Flow Information

(a) Reconciliation of cash
Cash at bank | 350,309 | 594,234 |

(b) Reconciliation of net cash provided by operating activities to profit from ordinary activities
(Deficit)/Surplus from ordinary activities | 47,708 | 24,902 |
Non-cash flows in Profit from ordinary activities
Depreciation | 16,993 | 18,932 |
(Profit)/Loss on Sale of NCA | - | 299 |
In-specie Donations | - | (1,200) |
DD Reimbursements | 500 | - |
Changes in assets and liabilities
Receivables | (181,979) | 32,257 |
Accrued Income | - | 47,190 |
Income in Advance | 1,074 | 130,849 |
Inventories | 1,156 | 42 |
Deposits and Bonds Paid | 79,040 | (68,961) |
Prepayments | 13,248 | (11,340) |
Accruals & Payables | 39,184 | 16,885 |
Provisions | 19,968 | (1,817) |
Net Cash Provided by Operating Activities | 36,892 | 188,038 |

(c) The Association has no credit stand-by or financing activities in place.
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2012

Note 12: Segment Reporting

The Association operates in the community sector providing advocacy and support to Members of the Association within Australia.

Note 13: Events After The Balance Sheet Date

There have been no events which have occurred subsequent to balance sheet date and up to the date of this report that may or are likely to significantly affect the results as presented in this financial report.

Note 14: Contingencies

There are no known contingent liabilities nor contingent assets at balance date or at the date of this report.

Note 15: Capital Management

The directors control the capital of the Association in order to maintain a good debt-to-equity ratio and to ensure that the Association can fund its operations and continue as a going concern. The Association’s debt and capital includes financial liabilities, supported by financial assets. There are no externally imposed capital requirements.

The directors effectively manage the Association’s capital by assessing the Association’s financial risks and adjusting its capital structure in response to changes in these risks and in the market. These responses include the management of debt levels.

There have been no changes in the strategy adopted by management to control the capital of the Association since the prior year. This strategy is to ensure that there is sufficient cash to meet trade and sundry payables and borrowings.

As the entity has no financial debit the gearing ratio is not applicable.

Note 16: Association Details

The principal place of business of the Association is:

National Association of People Living with HIV/AIDS (NAPWA) Inc.
Suite G5
1 Erskineville Road
Newtown NSW 2042
NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2012

Note 17: Leasing Commitments

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operating Leases</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• not later than one year</td>
<td>11,959</td>
<td>17,796</td>
</tr>
<tr>
<td>• later than one year but not later than five years</td>
<td>17,464</td>
<td>23,285</td>
</tr>
<tr>
<td>• later than five years</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>29,423</td>
<td>41,081</td>
</tr>
</tbody>
</table>

There is an operating lease commitment for a Kyocera MK3060 Photocopier. The lease expires on 8/6/2015. Quarterly rental commitment per the lease is $485.10.

There is an office cleaning agreement with Clean City Living with 1 month termination notice commitment of $511.50.

Note 18: Financing Commitments

There is a Fixed Rate Business Loan to fund the purchase of the Association’s premises with a commitment of $2,479 per month. Current interest rate is 7.40%.

There is a Floating Rate Business Loan to fund the purchase of the Association’s premises with a commitment of $2,445 per month. Current interest rate is 7.41%.

Note 19: Economic Dependency & Going Concern

The financial report has been prepared on a going concern basis, which contemplates continuity of normal operating activities and the realisation of assets and the settlement of liabilities in the normal course of operations.

The National Association of People Living with HIV/AIDS Incorporated’s continued operation is financially dependent upon the continued support of the funding bodies for recurrent grant income. Without the continued support of the funding bodies, the Incorporation may not be able to continue as a going concern with its existing programs and structure.

Should the Incorporation be unable to continue as a going concern, it may be required to realise its assets and extinguish its liabilities other than in the normal course of business and at amounts different from those as stated in the financial report.
Note 20: Financial Instruments

(A) INTEREST RATE RISK
The Association’s exposure to interest rate risk, which is the risk that a financial instrument’s value will fluctuate as a result of changes in market interest rates and the effective weighted average interest rates on those financial assets and financial liabilities, is as follows:

<table>
<thead>
<tr>
<th>Cash</th>
<th>Weighted Average Effective Interest Rate</th>
<th>Floating Interest Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance $0 - $49,999</td>
<td>1.50%</td>
<td>1.50%</td>
</tr>
<tr>
<td>Balance $50,000 -</td>
<td>4.90%</td>
<td>4.90%</td>
</tr>
</tbody>
</table>

(B) CREDIT RISK
The maximum exposure to credit risk, excluding the value of any collateral or other security, at balance date to recognised financial assets is the carrying amount, net of any provisions for doubtful debts, as disclosed in the Balance Sheet and notes to the financial statements.

The Association does not have any material credit risk exposure to any single debtor or group of debtors under financial instruments entered into by the Association.

(C) FOREIGN CURRENCY RISK
The Association is not exposed to fluctuations in foreign currencies.

(D) LIQUIDITY RISK
The Association manages liquidity risk by monitoring forecast cash flows and by maintaining sufficient cash resources.

(E) PRICE RISK
The Association is not exposed to any material commodity price risk.

(F) NET FAIR VALUES
Methods and assumptions used in determining net fair value.

The net fair values of listed investments have been valued at the quoted market bid price at balance date adjusted for transaction costs expected to be incurred. For other assets and other liabilities the net fair value approximates their carrying value. No financial assets and financial liabilities are readily traded on organised markets in standardised form other than listed investments. Financial assets where the carrying amount exceeds net fair values have not been written down as the economic entity intends to hold these assets to maturity.

The aggregate net fair values and carrying amounts of financial assets and financial liabilities are disclosed in the Balance Sheet and in the notes to the financial statements.

(G) SENSITIVITY ANALYSIS
The Association has performed a sensitivity analysis relating to its exposure to interest rate risk and has determined that any fluctuations would not have a material impact on profit or equity. The Association has no borrowings and hence is not affected by changes in market interest rates. Any changes affecting cash and cash equivalents would be minimal. The Association is not exposed to any other market rate fluctuations.
### NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2012

<table>
<thead>
<tr>
<th>Floating Interest</th>
<th>Fixed interest</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rate</td>
<td>1 year or less</td>
</tr>
<tr>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

#### 2012

**Financial Assets**
- Cash and cash equivalents: 338,710, 11,349, 0, 250, 350,309
- Receivables: -
- Other financial assets: -

- Weighted average interest rate: 1.50%, 5.1%

**Financial Liabilities**
- Payables: -
- Bank Loan: 236,727, 29,748, 204,660, -

- Net financial assets (liabilities): 101,983, (18,399), (204,660), 169,939, 48,863

#### 2011

**Financial Assets**
- Cash and cash equivalents: 583,374, 10,720, 0, 140, 594,234
- Receivables: -
- Other financial assets: -

- Weighted average interest rate: 1.50%, 6.05%

**Financial Liabilities**
- Payables: -
- Bank Loan: 86,975, 86,975

- Net financial assets (liabilities): 583,374, 10,720, -

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### N APWA AN N UAL RE PO RT 2011-2012

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Statement by Board of Directors

In the opinion of the Executive the financial report as set out on pages 3 to 18:

1. Presents a true and fair view of the financial position of the National Association of People Living with HIV/AIDS (NAPWA) Incorporated as at 30 June 2012 and its performance for the year ended on that date in accordance with Australian Accounting Standards, mandatory professional reporting requirements and other authoritative pronouncements of the Australian Accounting Standards Board.

2. At the date of this statement, there are reasonable grounds to believe that the National Association of People Living with HIV/AIDS (NAPWA) Incorporated will be able to pay its debts as and when they fall due.

This statement is made in accordance with a resolution of the Executive and is signed for an on behalf of the Executive by:

Robert Mitchell
President

Craig Cooper
Secretary/Treasurer

Dated this sixth day of October 2012.
National Association of People Living With HIV/AIDS (NAPWA) Incorporated  
ABN: 79 052 437 899  
Independent Auditors' Declaration

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2012 there have been:

(i) no contraventions of the auditor independence requirements in relation to the audit; and

(ii) no contraventions of any applicable code of professional conduct in relation to the audit.

Ashby & Co.  
Chartered Accountants

Anthony Ashby  
Partner  

SYDNEY  
6 October 2012
National Association of People Living With HIV/AIDS (NAPWA) Incorporated
ABN: 79 052 437 899
Independent Audit Report

We have audited the accompanying financial report, being a special purpose financial report, of the National Association of People Living With HIV/AIDS Incorporated (the association), as set out on pages 1 to 19, for the financial year ended 30 June 2012.

Committee’s Responsibility for the Financial Report
The committee of the association is responsible for the preparation of the financial report, and has determined that the basis of preparation described in Note 1 is appropriate to meet the requirements of the Australian Capital Territory Associations Incorporation Act 1991 and is appropriate to meet the needs of the members. The committee’s responsibility also includes such internal control as the committee determines is necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Auditor’s Responsibility
Our responsibility is to express an opinion on the financial report based on our audit. We have conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor’s judgment, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the association’s preparation of the financial report that gives a true and fair view, in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association’s internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the committee, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.
National Association of People Living With HIV/AIDS (NAPWA) Incorporated
ABN: 79 052 437 899
Independent Audit Report

Opinion
In our opinion, the financial report presents fairly, in all material respects, the financial position of National Association of People Living With HIV/AIDS Incorporated as at 30 June 2012 and its financial performance for the year then ended in accordance with the accounting policies described in Note 1 to the financial statements, and the Australian Capital Territory Associations Incorporation Act 1991.

Basis of Accounting and Restriction on Distribution
Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist National Association of People Living With HIV/AIDS Incorporated to meet the requirements of Australian Capital Territory Associations Incorporation Act 1991. As a result, the financial report may not be suitable for another purpose.

Ashby & Co.
Chartered Accountants

Anthony Ashby
Partner

SYDNEY
6 October 2012