

## Maintaining long term influence

While influence occurs through a number of pathways, achieving and maintaining this influence over the long term is underpinned by principles and values that are core to the work of AFAO and the AIDS Councils.

### Engagement within community

The strength of AFAO and the AIDS Councils community-controlled programs is that they participate within, rather than intervene on, their communities. This participation was recognised and expected by gay and bisexual men in the community. Effective community-led programs bring an authenticity and credibility based on a long-term relationship and trust with their communities. The visible advocacy and representation undertaken by community and peer leaders adds to these connections.

As one community member said, if his friend needed support, information or a place to go:

*"I just always point them towards the AIDS Council, because they've always helped me with big issues in my life."*

Community member

The ongoing and integrated engagement AIDS Councils and AFAO have with the community ensure they remain relevant and influential.

*"I think I just feel comfortable with it, like I think it's something that's been around for a long time and they're sort of organisations that I trust."*

Community member

Maintaining this engagement also meant being a visible participant and advocate on issues related to but broader than HIV, such as those that affected the broader health, well-being and human rights of gay and bisexual men.

*"I know (AIDS Council) does a bit of advocacy mainly around sexual health for queer people but I know that they were somewhat active when it came to the Yes Vote for the Marriage Equality Survey. They do a lot of raising awareness for mental illness among the queer community"*

Community member

### Alignment with the broader HIV partnership response

AFAO and the AIDS Councils are in a unique position to apply a community or peer lens to social, epidemiological, biomedical and policy developments in order to identify the implications (and viable solutions) for their communities and across the HIV partnership of clinical and health services, community organisations, research and policy.

AFAO and AIDS Councils were seen by participants as an intermediary in translating changes in research, health policy or health services to their communities. For AFAO and AIDS Councils this means maintaining trust and credibility within the broader HIV partnership and ensuring their messaging is relevant and aligned to the evidence.

*"It can be tricky you know. We have a responsibility to the community but then we also have a responsibility to ourselves as an organisation and to (research) ...it's a science...we always have to have that uncertainty or you know risk mitigation strategy and that can have problems for credibility both ways"*

Staff/volunteers

The high reputation AFAO and the AIDS Councils have within the HIV partnership, and the way their programs complement and enhance other health services, was illustrated by community members regularly describing being referred to AIDS Councils by other health services for further support and to translate detailed health information into accessible and relatable knowledge and skills.

In times of rapid change, insights from community-led organisations may be the sector's only source of real-time knowledge about emerging issues within communities or unintended consequences of policy or health services changes. AFAO and AIDS Councils play an important role in translating community insights into useful policy and service advice for the broader HIV partnership.

### Constant adaptation to changes in community, research and policy

The focus group and interview participants described organisations adapting to community needs, expectations and social movements by virtue of their close engagement with community and alignment with the HIV research, health service, and policy sector. This is an essential component of their influence and allows these organisations to adapt quickly with their communities in all their diversity and dynamism.

*"The example I'll use is around undetectable viral load and before I came to (AIDS Council) I kind of knew within my own networks that was a strategy being used by positive men not to pass on HIV yet when I started here at (AIDS Council) there still wasn't much energy around that and it struck me that the conversation was only happening within our sector a fair bit after it was already happening within the community, at least within the networks in which I was – and that happened with PrEP as well and that's not a slight on AIDS councils it just speaks to process and how good we are at following community in that space as well."*

Staff/volunteers

The community and the HIV sector expect AFAO and AIDS Councils to translate research in a way that is meaningful for the community, even when that research challenges past messages or long held beliefs. As one peer staff member said

*"I do think when people come to us looking for answers they're sometimes coming looking for their beliefs to be reflected back to them, even if those beliefs aren't actually what the evidence says as well."*

Staff/volunteers

The ability to draw on genuine, high quality and sustained engagement with their communities provides them with the capacity to respond quickly to new developments in their communities and to reach their communities with new messages.

## References/Footnote

1. Australian Government. Seventh National HIV Strategy 2014-2017. Canberra: Commonwealth Government of Australia, Department of Health; 2014.
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3. Haberer JE. Current concepts for PrEP adherence in the PrEP revolution: from clinical trials to routine practice. Current opinion in HIV and AIDS. 2016;11(1):10-7.
4. Brown G, Reeders D, Cogle A, Madden A, Kim J, O'Donnell D. A Systems Thinking Approach to Understanding and Demonstrating the Role of Peer-Led Programs and Leadership in the Response to HIV and Hepatitis C: Findings From the W3 Project. Frontiers in Public Health. 2018;6(231). <https://www.frontiersin.org/article/10.3389/fpubh.2018.00231>

Further details on W3 Project can be found at [w3project.org.au](http://w3project.org.au)

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# THE INFLUENCE OF AFAO, AIDS COUNCILS & COMMUNITIES: How, when and where are gay and bisexual men influenced about HIV?

## Conclusion

Influencing the health practices of communities is not a linear process. To be effective, community-controlled organisations must influence in direct and indirect ways at the individual, social, community and policy level. Underpinning the work of AIDS Councils and AFAO is the capacity to achieve genuine, high quality and sustained engagement within their communities, as well as maintain strong partnership

with research, health services and policy. This provides them with the capacity to identify and even pre-empt changes within communities of gay and bisexual men and adapt quickly to those changing needs and contexts. In times of rapid change, insights from community-led organisations may be the sector's only source of real-time knowledge about emerging issues or unintended consequences.

Community controlled organisations, such as AFAO and the AIDS Councils, are in a unique position to apply a community or peer lens to social, epidemiological, biomedical and policy developments in order to identify the implications (and viable solutions) for their communities. It is this deeper role that leads to strong and sustained influence within both their communities and the broader HIV response.



## Summary

The Australian Federation of AIDS organisations (AFAO) and the state and territory AIDS Councils play leading roles in the response to HIV in Australia, including among gay and bisexual men.

As the HIV response adapts to significant developments in HIV prevention, it is timely to investigate and articulate the diverse ways in which AFAO and the AIDS Councils influence the HIV prevention, testing and treatment practices of gay and bisexual men in the changing HIV response.

- peer engagement and education;
- community development;
- social marketing; and
- health and counselling services.

Their indirect influence occurs through:

- diffusion of knowledge by gay and bisexual men's through peer networks;
- influence on national and state policy, health services, research and other state and national initiatives.

These pathways of influence are built and sustained by deep engagement within their communities, strategic alignment between AFAO and the AIDS Councils and with other organisations in the HIV response, and the ability to adapt to changes in community, research and policy. This engagement has existed since the early years of the HIV epidemic and it is this historic and sustained engagement that strengthens AFAO and the AIDS Councils influence in community and policy environments.

This long-term engagement within communities underpins AFAO and the AIDS Council's capacity to influence. Together, they influence gay and bisexual men in direct ways through a broad range of health promotion interventions and services. These can include:

## Background

Australia's response to HIV is in the midst of the largest and most significant developments in over 20 years, with developments in prevention and treatment (1-3). These changes include the widescale availability of Pre-Exposure Prophylaxis (PrEP) and the improved understanding of Treatment as Prevention (TasP). PrEP and TasP are driving major policy and practice shifts to prioritise the incorporation of antiretroviral medications into combination HIV prevention. These developments are already re-shaping safer-sex norms, and have the potential to improve clinical outcomes, and contest stigma and moral judgements in relation to HIV.

As community-led HIV organisations, AFAO and state and territory AIDS Councils are evolving in tandem with their communities and adapting how they influence (and are influenced by) gay and bisexual men, their cultures and their practices. AIDS Councils (ACON, AIDS Action Council of the ACT, Northern Territory AIDS and Hepatitis Council, Queensland AIDS Council, Tasmanian Council on AIDS Hepatitis and Related Diseases, Thorne Harbour Health (formerly Victorian AIDS Council) and Western Australian AIDS Council) work within local communities to conduct a range of integrated programs and health services with a focus on their local jurisdictions and epidemics.

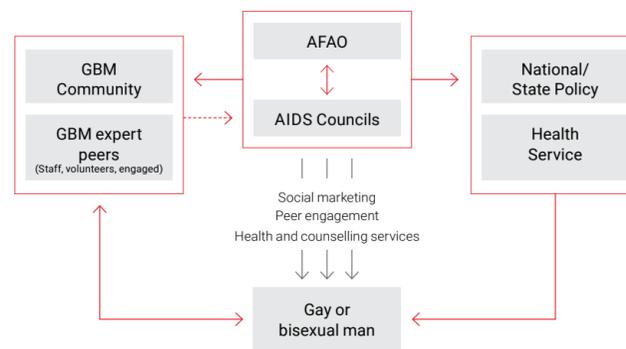
AFAO is the national federation for the HIV community response and provides leadership, coordination and support to Australia's policy, advocacy and health promotion response to HIV. AFAO

works closely with the AIDS Councils and other members, drawing on their local community expertise and insights to ensure an effective community-led response across Australia and advocates for legislative, policy and health service structures to support it. AFAO and the AIDS Councils serve as a link between their communities and mainstream service delivery, policy and research institutions.

This report describes a study commissioned by AFAO in consultation with the AIDS Councils to better understand and articulate the diverse ways in which AFAO and AIDS Councils influence the lives of gay and bisexual men and contribute to the HIV response. Four focus groups with gay and bisexual men from the community (23 participants) and three focus groups with peer staff of AFAO and the AIDS Councils (27 participants) were conducted in New South Wales,

Victoria and Western Australia. Eleven in-depth interviews were also conducted with gay and bisexual men from across Australia to strengthen cultural, geographic and experiential diversity. The total number of participants in the study was 61. The study drew on the W3 planning and evaluation framework for peer and community-led programs (4) to examine the direct and indirect influence of AFAO and the AIDS Councils. PrEP and TasP were used as contemporary issues to initiate discussions within the focus groups and interviews of the broader roles AFAO and the AIDS Councils in shaping gay and bisexual men's HIV prevention, testing and treatment practices.

## Direct and indirect influence in the lives of gay and bisexual men



— Direct pathways of Influence to GBM  
 - Indirect pathways of Influence to GBM

Figure 1. Pathways of influence of AFAO and AIDS councils to gay and bisexual men  
 Figure 1 draws on work of the W3 Project

Effective community-led health promotion involves operating at multiple levels and through direct and indirect pathways. AIDS Councils are part of, and continuously engage with gay and bisexual men through a broad range of direct means, such as peer engagement, social marketing, and health and counselling services. They engage indirectly with gay and bisexual men through the diffusion of knowledge through peers within networks of gay and bisexual men. The interactions between AFAO and the AIDS Councils and with their diverse communities results in a sharing of local and national insights and expertise.

There is a dynamic and reinforcing relationship between the direct and indirect influence as illustrated in Figure 1. This figure simplifies a complex system of actions and interactions and is not designed to illustrate all possible direct and indirect pathways, but to highlight those that are most salient. It also does not represent all possible sources of

influence for any individual component but articulates how and where AFAO and the AIDS Councils influence the lives of gay and bisexual men.

The more connections that a community member has within the system the stronger their knowledge and understanding. Similarly, this strengthens community members' ability to embed knowledge within their own networks and peer groups.

### Examples of direct pathways of influence

AIDS Councils utilise a range of health promotion and clinic-based interventions to directly engage and influence gay and bisexual men. These include: one-to-one outreach (typically gay venue or event based peer outreach); peer support; peer facilitated education workshops; one-to-one or group therapeutic change (such as counselling or group therapy); broadcast and digital media; social marketing or other forms of mass media; or, in some cases, direct provision of sexual health services, including HIV testing, PrEP, STI testing, diagnosis and treatment.

Social marketing and other media related activities were often complemented, or amplified, by engagement with men on an individual or group basis. This could occur in face-to-face settings or online.

*"I went to them for advice because I wanted to know more about it (living with HIV) and they said we have this workshop that you can do on the weekend for newly diagnosed people, and that was really good (...) You got to talk about how you felt about it and there were other people there that went through things like dating and you know how to tell people, if you should tell people and why."*  
 Community member

### Examples of Indirect pathways of influence

While some gay and bisexual men may not have regular contact with AIDS Council or AFAO services, programs or campaigns, they are influenced by their activities via other mechanisms.

### Influence through networks of gay and bisexual men

Through being connected to the communities they serve AFAO and the AIDS Councils have unique access and understanding of the sexual politics, practices and specifics of these communities. This is central to the capacity of these organisations to remain relevant and provides a level of credibility with the community. Those who have directly engaged with peer workers, social marketing interventions or health services in turn influence other gay and bisexual men.

*"I found out on the internet because people pass messages around and that having an undetectable viral load now virtually means that you're incapable of passing the virus on to a negative partner and I hadn't really known that before."*  
 Community member

Peer staff and the organisations' many volunteers act as major conduits of information through their wider personal networks.

*"A lot of my friends know I work in this space, I'm always the first point of contact when they have information that they need to ask you know"*  
 Peer staff/volunteers

*"It's the indirect notion we're talking about – it is the ripple effect, it is about communicating a lot of those concepts, ideas, into communities."*  
 Peer staff/volunteers

### Influence through policy advice and advocacy

The policy and advocacy efforts of AFAO and the AIDS councils drives progress towards a policy and legislative environment that meets the HIV prevention, treatment and health and social care needs of gay and bisexual men.

For example, community and peer staff participants felt that AFAO and AIDS Councils had been key players in helping to ensure access to PrEP for gay and bisexual men. They were described by some participants as mediators between the community and government, conveying information back and forth. Several participants observed that their work in relation to PrEP access and promotion of undetectable viral load as an effective strategy was initially influenced by listening to members of the community (including PrEP activists), illustrating the dynamic and interactive nature of community engagement, advocacy and policy influence.

*"But we've also got a very strong ministry of health and that's where a lot of the advocacy goes to, and they rely on (AFAO and AIDS Councils) to advise them on what the community needs and wants. And you have access to those needs and wants (...) on the ground all the time in so many different ways that you're able to pick up the information, not just from sending out a survey or having a community forum, but just from the talking amongst the constituents basically"*  
 Community member

Most community participants had an expectation that AFAO and the AIDS Councils would lead advocacy at a local and national level to achieve better outcomes for their communities.

### Case examples of influence pathways

Below are three examples from the community participants, which illustrate different and interacting pathways of influence (names are pseudonyms).

Description	Key Influences
Peter was an occasional volunteer with an AIDS Council. He found that the AIDS Council was a great fit to his interests. As a result of his engagement he became a source of influence for his friends who relied upon him for accurate and up to date information. He is directly influenced by the AIDS Council and through that engagement he is an influencer as an expert peer.	AIDS council
Steven lives in a regional town. He doesn't feel as connected or informed as he did when he lived in the city. He knew very little about PrEP and knew only a little about the principle of an undetectable viral load. When living in the city he went to the AIDS Councils medical clinic, but since moving back to the country he has been having less sex and is not being tested as regularly. When it came to information about sexual health his direct path of influence was with peers, who lived in the city and were directly connected to AIDS Councils.	Gay and bisexual men (GBM) community/ GBM expert peers
Lei grew up in a conservative Asian family. Since starting university and through meeting friends online he connected to a peer-led workshop specifically for Asian gay and bisexual men, run by an AIDS Council. Since participating in the workshop, he has become a volunteer and is involved in many events and opportunities in this role. Since connecting with the AIDS Council, he feels more comfortable discussing sexual health with peers and accessing gay friendly health services.	GBM expert peers, AIDS Council and medical services