

"OUTspoken" a case study from AFAO

This case study demonstrates the theory of change working in practice. Through their engagement with their communities, alignment with the sector and their adaptation, the Australian Federation of AIDS Organisations was able to achieve increased reach, increased effectiveness, increased efficiency, and stronger partnerships – all of which, led to better outcomes for their communities.

The Australian Federation of AIDS Organisations (AFAO) is the peak national organisation for Australia's community HIV response. AFAO's members are the AIDS Councils in each state and territory and peak national organisations representing key populations in Australia's community response, including the National Association of People with HIV Australia (NAPWHA); Scarlet Alliance, the Australian Sex Workers Association; the Anwernekenhe National HIV Alliance (ANA) and the Australian Injecting and Illicit Drug Users League (AIVL). AFAO combines insights from the community, research and policy environment and draws on its organisational relationships to simultaneously provide leadership, coordination and support to AIDS Councils and other AFAO members; provide timely and accurate policy advice to government; provide a voice for the national community response to HIV and implement programs to prevent HIV and reduce its impacts.

As the national federation of a network of community-embedded organisations, AFAO is in a unique position to collect and collate insights drawn from communities affected by HIV across Australia. This positions AFAO optimally to identify national trends and respond rapidly at the community-level through AIDS Councils located around the country.

The issue of young gay men's HIV risk and health promotion needs is one that was identified by AIDS Councils and brought to the attention of AFAO through member meetings. The information AIDS Councils were receiving from their communities (**engagement**) raised questions about the nature and degree of young gay men's HIV risks relative to their older counterparts, but the information was not conclusive. AFAO closely monitored surveillance data and analysed behavioural research looking for indications of young people's HIV risk (**alignment**). Between 2010 and 2012, epidemiological data appeared to reflect an increase in HIV diagnoses among young gay men. AFAO **responded rapidly** to this emerging trend by conducting a comprehensive research and consultation process to better understand the nature of this risk, and the health promotion needs of young gay men. AFAO analysed and consolidated findings from epidemiological data, social and behavioural research, laws and policy mechanisms and targeted programs and services (**alignment**) to create the discussion paper *"Are young gay men really so different? Considering the HIV health promotion needs of young gay men"*. As a highly **credible** organisation, AFAO was able to bring together

experts in the field and convene a seminar on young gay men and HIV risk at the 2014 'Promises & Limitations' Social Research Conference on HIV to raise public profile and debate of the issue.

Both the discussion paper and expert presentations during the seminar suggest that the increase in HIV diagnoses appears small and is probably a 'glitch', although future surveillance data will be monitored closely. AFAO's research found that young gay men have greater vulnerability to HIV due to a number of factors, such as their inexperience with sex and relationships, including negotiating safe sex; less exposure to education on sex and HIV prevention; reticence to commence HIV testing; reduced profile of HIV within gay communities; and differences in their social relationships that mean the 'gay community' is not a central connection point. In response to these findings AFAO drew on its membership network and strong relationships in the sector (**alignment**) to conduct a thorough consultation process with the AFAO and NAPWHA membership and youth and mental health service providers to explore current health promotion practice aiming to address young men's HIV health promotion needs and identify best practice. This process led to the creation of **AFAO's Guiding Principles of Young Gay Men's HIV Health Promotion**, which aims to support HIV and other health promotion workers to effectively target health promotion messages and activities to young gay and same-sex attracted men. AFAO's work to strengthen the sector builds their **credibility** and fosters **stronger partnerships**.

AFAO brought together its member network of community-embedded organisations and key LGBTIQ youth organisations to design a health promotion campaign targeting young gay and same-sex attracted men. The nation-wide campaign, "OUTspoken", is based around the website www.outspoken.org.au, which features a series of videos about the experiences of five young gay men. The campaign strategy responds to the findings of AFAO's research and consultation processes, which indicated that to be effective, HIV prevention messaging must be linked to the priorities of young gay and same-sex attracted men and must meet them where and how they live their lives (**adaptation**). This strategy also empowers young people to take ownership of, and lead, HIV prevention in their communities (**peer leadership**).

Fifteen videos are featured on the campaign website (www.outspoken.org.au), which also hosts educational material

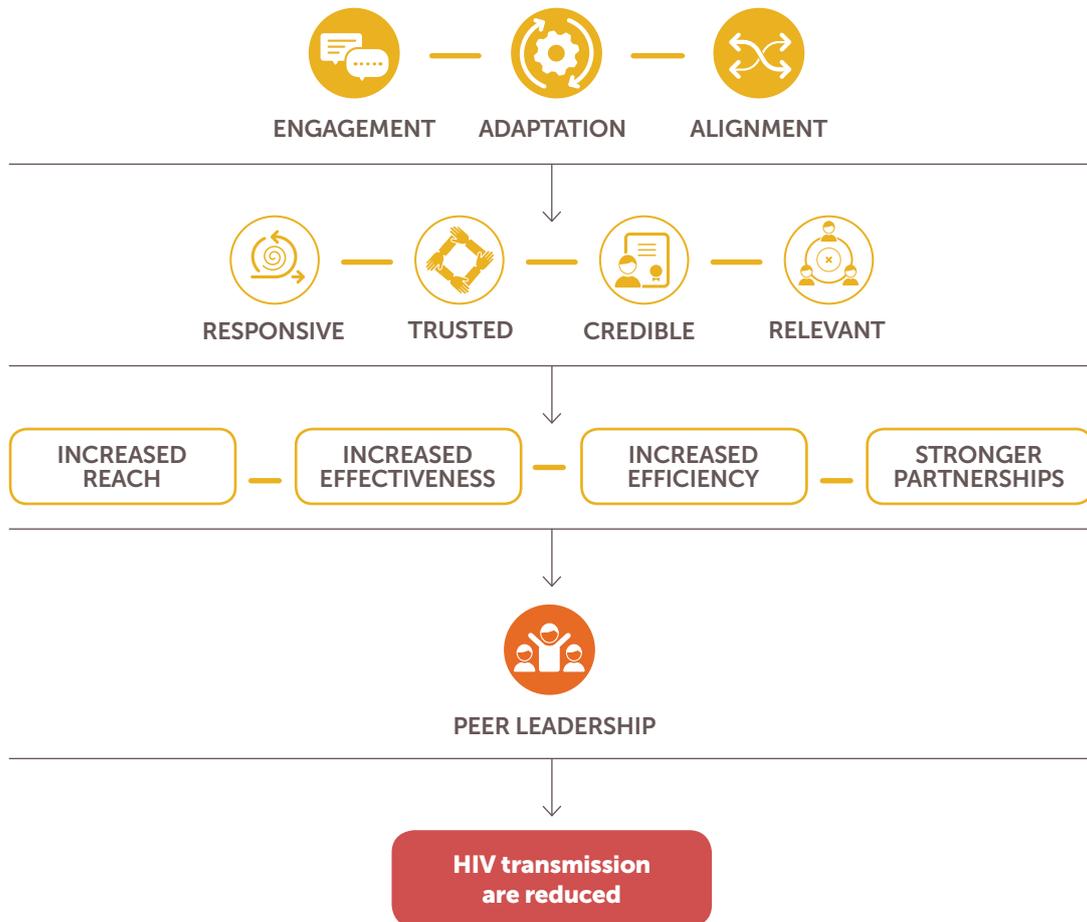
about the key topics raised in the videos, including coming out; relationships, sex and meeting people; disclosing your status; having a positive partner; sexual health; testing; and HIV. The campaign was advertised on dating apps such as Grindr, Facebook and other social media by AFAO and state and territory organisations. AFAO also produced a range of promotional materials, including posters and banners to support state and territory organisations to promote the campaign. The campaign aims to: 1) increase HIV awareness among young gay men, 2) increase the number of young gay men who engage with HIV and sexual health testing, 3) increase HIV risk reduction knowledge of young gay men, 4) increase knowledge of youth services relating to mental health and sexual health, and 5) reduce stigmatising language and attitudes amongst young gay men.

AFAO received excellent feedback about the campaign through their networks. In the three months after the launch of the campaign, the website had been viewed 6,894 times and gay and same sex attracted men were sharing the videos through their social media accounts, evidencing that the campaign was **relevant** to the target

audience. Further, one of the videos was selected to screen as a short film before a youth themed movie at the 2017 Mardi Gras Film Festival in 2017.

The community-embeddedness of AFAO's membership network was critical to the success of this campaign (**increased effectiveness**). Their deep knowledge of young gay men and their needs informed the design of the campaign; their **reach** into this community enabled them to test campaign messages with diverse young gay men across multiple jurisdictions, in both metropolitan and regional areas – ensuring campaign **relevance** despite the enormous diversity of young gay and same sex attracted men and the existence of many different 'youth cultures'. It is because of the **trust** that AFAO and their member organisations have earned with their communities that this project was successful in recruiting five young gay men to feature in their videos and so openly discuss very personal and sensitive issues. Further, the community-embeddedness of AFAO's membership enabled AFAO to promote the campaign nationally and within existing community networks (**increased efficiency**).

CASE STUDY THEORY OF CHANGE



A[TEST]: a case study from ACON

This case study demonstrates the theory of change working in practice. Through their engagement with their communities, alignment with the sector and their adaptation, ACON were able to achieve increased reach, increased effectiveness, increased efficiency, and stronger partnerships – all of which, led to better outcomes for their communities.

One of the most important public health interventions for reducing the transmission of HIV is increasing the rate of HIV testing among gay and bisexual men, and increasing how often these men get tested.¹ In 2015, over one quarter of people diagnosed with HIV in 2015 had a late diagnosis, meaning that they were likely to have been living with HIV for at least four years before they were tested.² Reducing late diagnoses is important because transmissions are most likely to occur when people are unaware of their status.³

Research has shown that traditional testing in clinical environments presents numerous barriers that prevent some gay and bisexual men getting tested as often as recommended. These barriers include stigma, fear of a positive result, the wait time for results and the inconvenience of testing.⁴

ACON (formally known as the AIDS Council of NSW) draws on its deep knowledge of the Lesbian, Gay, Bisexual, Trans, Intersex and Queer (LGBTIQ) community (**engagement**) to provide quality policy advice to government about the impact of the policy and legislative environment on testing rates (**alignment**). ACON have been at the forefront of efforts to increase access to new testing technologies in NSW, including advocating that the government play a proactive role in making rapid HIV testing available.

ACON has a strong reputation and **credibility** in the sector, enabling them to build **strong partnerships** between the community, clinicians

and researchers. They played a lead role in the first community-based rapid HIV testing trial in NSW. In 2013, ACON, Sydney Sexual Health Centre and the Kirby Institute trialled the first community-based testing service. Following the success of this trial, ACON developed a partnership with NSW Ministry of Health, South East Sydney Local Health District, Sydney Sexual Health Centre and the NSW State Reference Laboratory to establish Sydney's first peer-based HIV rapid-testing service: a[TEST] Oxford Street, which opened in 2015.

a[TEST] Oxford Street addresses many of the barriers to HIV testing (**adaptation**). A peer educator and a nurse work together to provide comprehensive sexual health screening. The peer educator walks the client through the process and addresses any concerns they have and then conducts the rapid HIV test (**peer service delivery**). While they are waiting for their results, the nurse takes blood for other STI tests and for a laboratory test to confirm the rapid HIV test results. The peer educator provides health promotion education and gives the client their results.

An evaluation of the service in June 2015 found exceptionally high satisfaction with the service with 100% of 221 evaluation participants indicating they would use the service again and 100% indicating they would recommend the service to others. One third of service users learned about the service from a friend, demonstrating that a high percentage of service users were recommending

1 Wilson DP, Hoare A, Regan DG, Law MG. Importance of promoting HIV testing for preventing secondary transmissions: modelling the Australian HIV epidemic among men who have sex with men. *Sex Health*. Mar 2009;6(1):19-33.

2 <https://www.afao.org.au/about-hiv/hiv-statistics/australia/>

3 AFAO (2014) Discussion Paper: HIV testing among gay men and other men who have sex with men. Available from https://www.afao.org.au/library/topic/msm/HIV_Testing_DP_ONLINE-July-2014.pdf

4 Wilcock, B. & Frommer, M. (2014) 'HIV testing among gay men and other men who have sex with men, *AFAO Discussion Paper*.

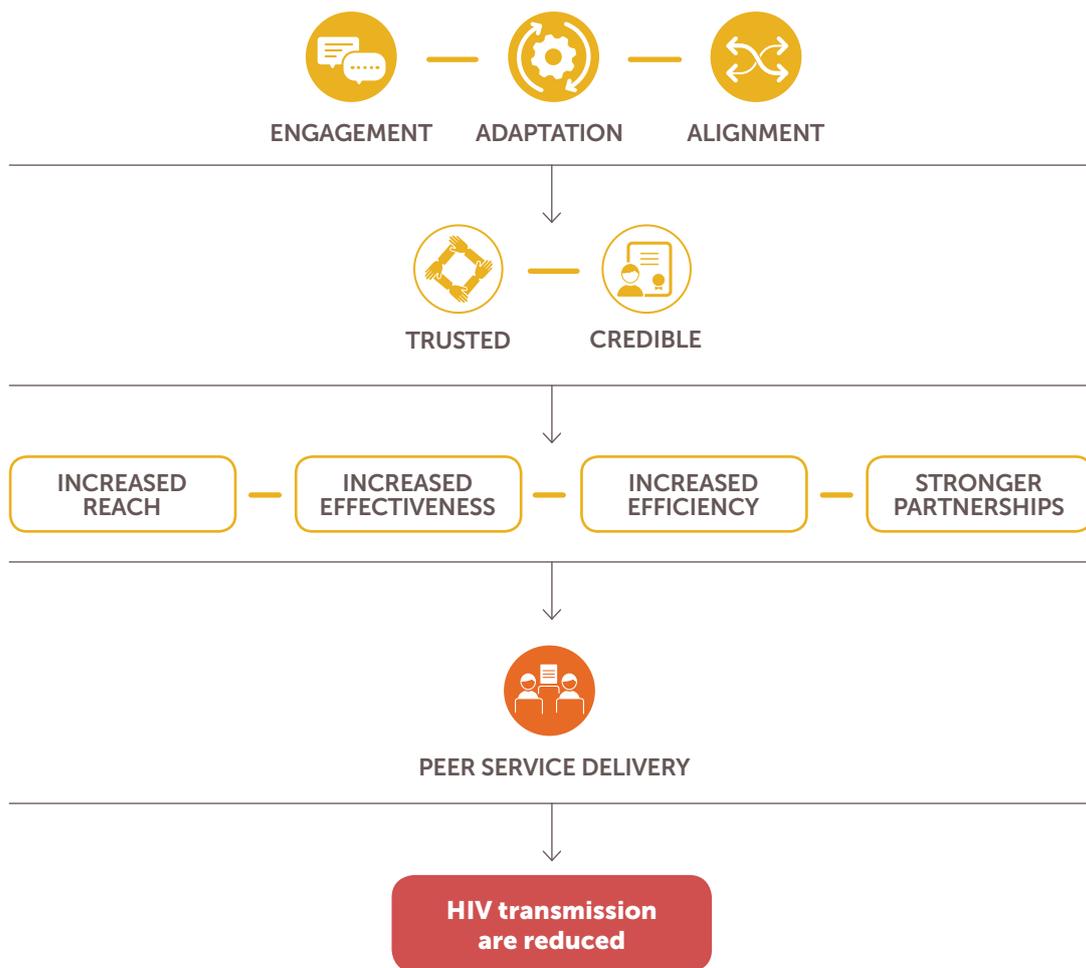
a[TEST] to their peers. These personal recommendations demonstrate that service users **trust** the service and are confident that their friend will have a positive experience.

The **peer service delivery** model is highly effective at reaching hard-to-reach and high-risk groups (**reach**), and this was supported by a strong promotional campaign that drew on ACON's experience in social marketing and community engagement. Data from the service's first year show that they are reaching men who have never been tested for HIV (12% of service users) and men who do not test as often as recommended (14% had not tested in the last 12 months). The service is also reaching men who are at relatively high risk of becoming infected with HIV: 31% had more than

five partners in the previous three months and 43% had inconsistent condom use with casual partners. Between 2015 and 2016, 0.9% of those tested at a[TEST] Oxford Street were HIV positive, compared to 0.3% across other services in the same local health district. Therefore, a[TEST] Oxford Street provides an **efficient** service that is successfully reaching those most at risk of HIV.

Through understanding the needs of their communities, ACON have delivered an **effective** program that meets its goal of increasing the rate and frequency of HIV testing, particularly among men at high risk of becoming infected with HIV, making an important contribution to the goal of **reducing HIV transmission**.

CASE STUDY THEORY OF CHANGE



Responding rapidly to threats to community safety: a case study from the AIDS Action Council of the ACT

This case study demonstrates the theory of change working in practice. Through their engagement with their communities, alignment with the sector, and their adaptation, the AIDS Action Council of the ACT were able to achieve increased reach, increased effectiveness and stronger partnerships – all of which, led to better outcomes for their communities.

The AIDS Action Council of the ACT has earned and retained the trust of the Canberra community by providing culturally safe services that foster shared respect (**engagement**). This **trust** was demonstrated when several people contacted the Council to report that they had been targeted by a blackmail and extortion scam on *Grindr* – an online sex and dating app for gay and bisexual men.

The Council had an important role in bringing this issue to the attention of the police. Over the years, the Council has built a strong relationship (**alignment**) with the Gay and Lesbian Liaison Officers at the Australian Federal Police (AFP). The relationship between the AFP and the Lesbian, Gay, Bisexual, Trans, Intersex and Queer (LGBTIQ) communities has been tense at times, due to stigma and discrimination, and issues related to the policing of beats. As a trusted member of LGBTIQ communities and a reputable, **credible** organisation with **strong relationships** with the AFP, the Council played an important – and new – role as the liaison between victims of the scam and the police to ensure that victims were able to access justice mechanisms (**adaptation**). The Council raised awareness of the scam through its peer-based communication channels and encouraged victims to come forward. This increased the **reach** of police communication about the scam. The Council facilitated meetings between the police and victims at the AIDS Action Council office, which is seen as a safe space by LGBTIQ communities, reducing barriers to reporting. With the support of the Council, a number of people came forward and made formal statements to police.

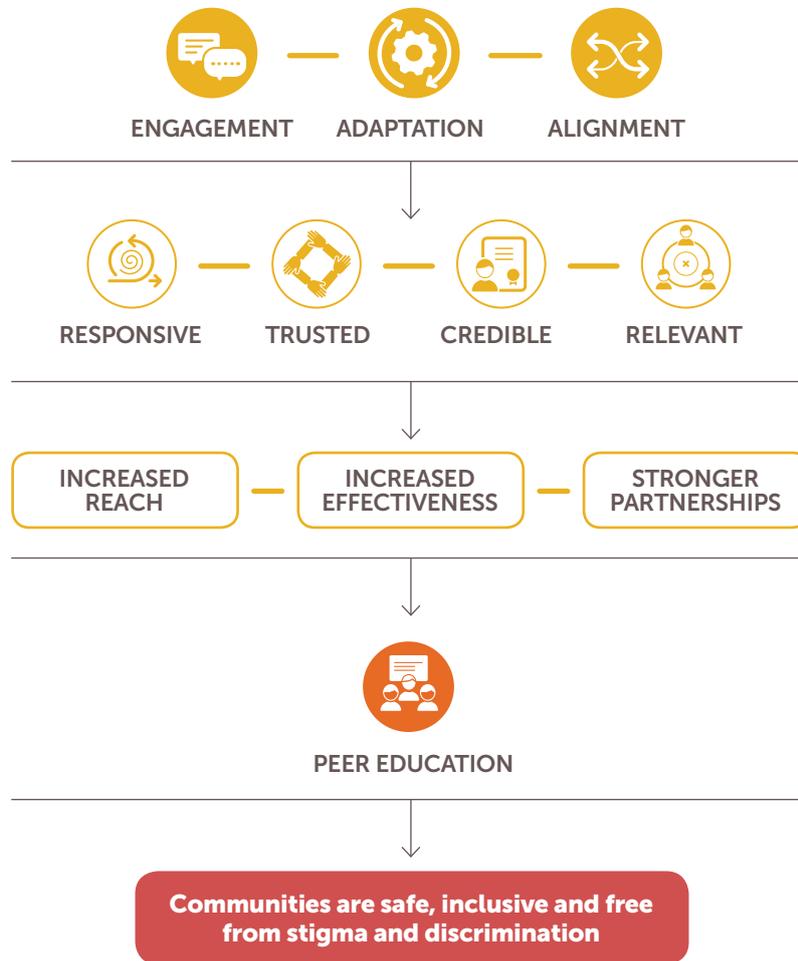
The collaboration with the AFP was highly **effective** and the Council and the AFP have agreed to work together to address barriers that LGBTIQ communities may face to reporting crimes and accessing other police services (**stronger partnerships**).

In addition to working with police to ensure victims could access justice, the Council also identified the need to provide support to those affected by the scam. For example, the Council received several calls from community members looking for support after the suicide of one of the victims. The man was well known within the Canberra LGBTIQ community and his death had wide reaching impacts. The Council was **responsive** to these needs, providing additional counselling to anyone affected by the scam, facilitating forums for community members to come together, support each other and discuss strategies for protecting their safety. The forums were facilitated by peers who had a deep understanding of the issues (**peer education**). This helped to create a safe space for participants to talk openly about their experiences and needs, which ensured the forum was **relevant** to those in attendance.

The Council also became aware that community perceptions of safety had been shaken by the scam. The Council implemented an Online Safety Campaign to raise awareness among LGBTIQ communities and people living with HIV that online threats and harassment are against the law, and that the Council will support victims to access justice mechanisms. It also raised awareness of strategies for reducing risk when using sex and dating apps, and built the capacity of service providers, in particular sexual health clinics, to provide information and referrals to anyone experiencing online harassment in the future.

These programs, and the liaison work of the Council, contribute to **building safe, inclusive and stigma-free communities**, where people living with HIV and men who have sex with men are protected from extortion and blackmail.

CASE STUDY THEORY OF CHANGE



Silver Rainbow: A case study from Northern Territory AIDS & Hepatitis Council (NTAHC)

This case study demonstrates the theory of change working in practice. Through their engagement with their communities, alignment with the sector and their adaptation, the Northern Territory AIDS & Hepatitis Council (NTAHC) was able to achieve increased reach, increased effectiveness, increased efficiency, and stronger partnerships – all of which, led to better outcomes for their communities.

Many Lesbian, Gay, Bisexual, Trans, Intersex and Queer (LGBTIQ) people are concerned about how they will be treated in the aged care system, given past experiences of prejudice and discrimination, and may feel uncomfortable or unsafe in disclosing their identities. The resulting invisibility of older LGBTIQ people, and a lack of awareness from people working in the sector, can lead to the needs of older LGBTIQ people being unrecognised.

In **response** to this challenge, the National LGBTIQ Health Alliance developed the Silver Rainbow project, which (among other strategies) delivers LGBTIQ aged care awareness training to service providers, policy makers and governments. **Strong partnerships** between AIDS Councils and other organisations in this peak body (**alignment**) allow this training to be managed at a national level, but adapted and delivered by local organisations (**engagement** and **adaptation**), which **increases efficiencies**.

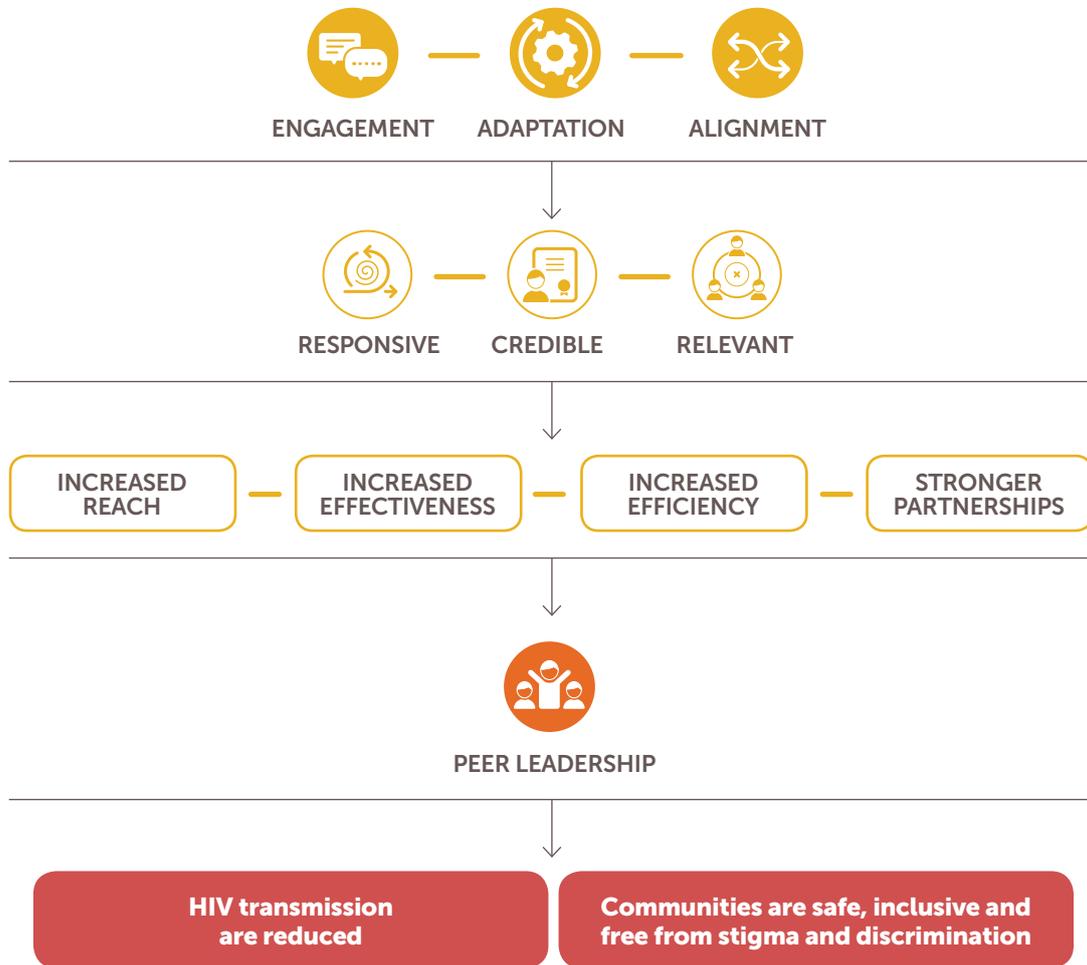
As part of the Rainbow Alliance, NTAHC has responsibility for delivering Silver Rainbow training in the Northern Territory. Sessions have been delivered in Darwin, Katherine, Nhulunbuy, Tenant Creek and Alice Springs. To meet the needs of the Northern Territory, the training has a focus on the intersection of LGBTIQ issues and cultural diversity, particularly the needs of older Indigenous LGBTIQ people (**relevance**). The training is co-presented by Indigenous sister-girls who share their lived experiences and stories specific to the local community, increasing the **credibility** of the training.

NTAHC has found that this kind of **peer leadership** leads to more interaction and a better reception of the training, increasing its **effectiveness**. This **peer leadership** strategy also provides an opportunity for LGBTIQ people to be the drivers of change in their communities.

The one-day training includes topics such as: gender identity and gender expression; the effects of stigma and discrimination on the health of LGBTIQ people; inclusive practice in the workplace; and specific LGBTIQ ageing issues. The training has been well-received, with comments from participants like: "Training was fantastic and comprehensive and much needed" and "Opened my eyes to the challenges they [LGBTIQ people] may face". By raising awareness and reducing stigma, Silver Rainbow training contributes to building an environment where older LGBTIQ people can receive the services they need, including services to **reduce their risk of HIV transmission**.

NTAHC's ability to provide high-quality training with an authentic and practical message for positive change has led to interest from other organisations in the Northern Territory, such as corrections facilities, in receiving similar training around LGBTIQ awareness (**increased reach**). NTAHC continues to build relationships with the broader health and services sectors to support their goal of **safe, inclusive and stigma-free communities**.

CASE STUDY THEORY OF CHANGE



#ComePrepd: A case study from Queensland AIDS Council (QuAC)

This case study demonstrates the theory of change working in practice. Through their engagement with their communities, alignment with the sector and their adaptation, Queensland AIDS Council (QuAC) was able to achieve increased reach, increased effectiveness, increased efficiency, and stronger partnerships – all of which, led to better outcomes for their communities.

Pre-exposure prophylaxis – where HIV-negative people take HIV treatment medication to reduce their risk of contracting HIV – is a 'game changer' for the HIV epidemic. Known as PrEP, the use of 'treatment as prevention' has the potential to dramatically reduce HIV transmission and has already caused rapid shifts in attitudes, norms and stigma related to HIV, treatment and safe sex.

As an AIDS Council embedded in the Lesbian, Gay, Bisexual, Trans, Intersex and Queer (LGBTIQ) community in Queensland (**engagement**), QuAC is uniquely placed to understand and adapt to the rapid changes that PrEP is triggering in its community (**adaptation**). #ComePrepd is QuAC's community-driven HIV prevention campaign that facilitates peer-to-peer learning and disseminates the latest scientific research on PrEP.

As one participant stated on the #ComePrepd website, which shares real stories about experiences with PrEP:



PrEP changes not only how I view sex and HIV but it also has the potential to change our community and our relationships, let's make sure we change for the better.

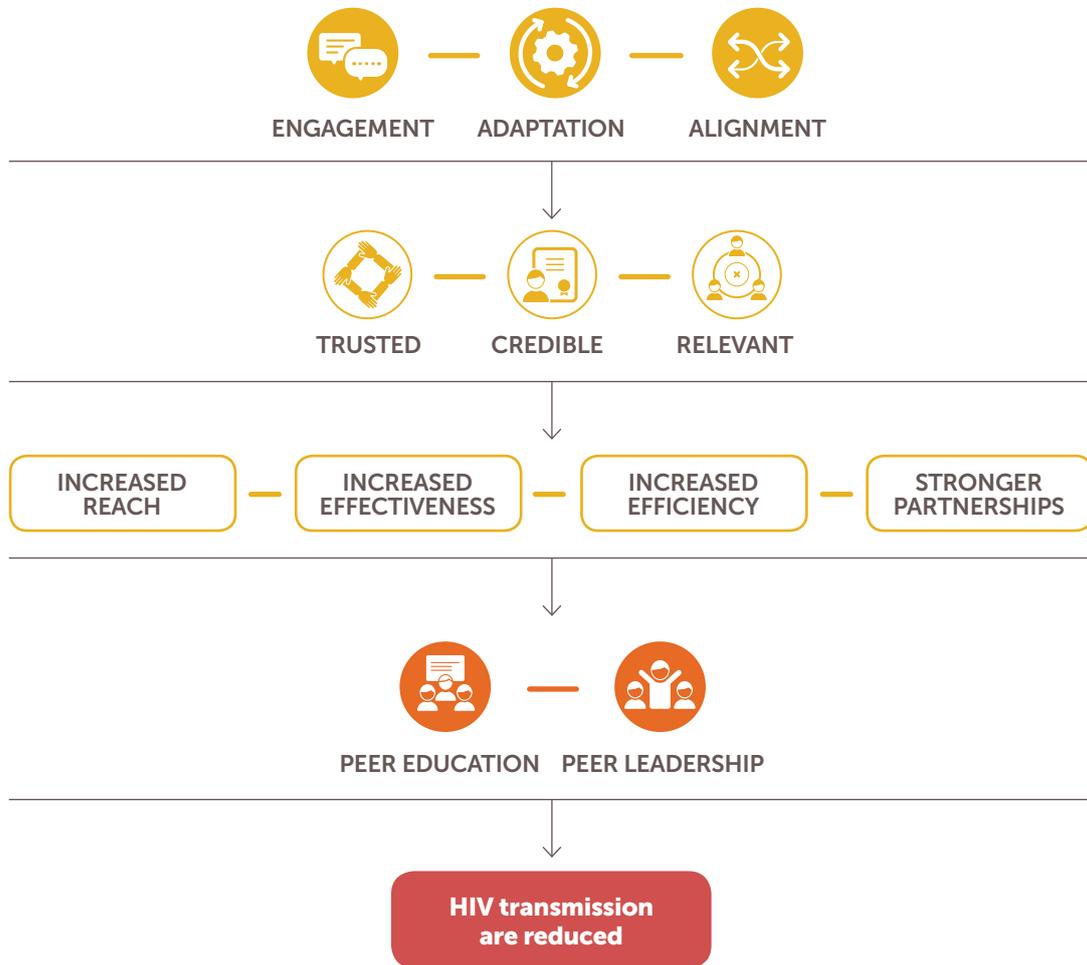
QuAC's innovative health education work harnesses sex and dating apps like Grindr and Scruff to direct people to the organisation's Facebook and online material about #ComePrepd. These communication channels are more relevant to QuAC's communities than print or other traditional media and therefore are more successful at reaching their target audience

(increased reach and increased efficiency). QuAC also uses its access to community parties and events, and its understanding of what will be seen as acceptable and **relevant** to community members, to raise awareness of the #ComePrepd campaign, with strategies such as irreverent YouTube videos or models sporting underwear with the #ComePrepd logo (**engagement**). The campaign also uses honest stories, delivered by **trusted peer educators**, about both positive and negative experiences with PrEP to provide a more authentic message. This increases the **credibility**, and therefore effectiveness of the campaign (**increased effectiveness**).

#ComePrepd also creates a key link between the community and the QPrEPd study (**alignment**). The QPrEPd study is a demonstration project to examine "real world" PrEP use, and the feasibility, safety and effectiveness of PrEP in reducing HIV transmission in Queensland. Australia is home to some of the largest PrEP trials in the world, with AIDS Councils like QuAC playing an important role in community mobilisation and recruitment, increasing the **reach** of these studies. The QPrEPd study's success to date, with the Queensland Government funding an expansion to 2000 places in April 2016, shows **strong partnerships** between QuAC and agencies like the Cairns and Hinterland Hospital and Health Service and the University of Queensland.

As the implications and potential of PrEP continue to unfold, QuAC continues to support **peer leaders** in their advocacy for increased availability and accessibility of PrEP, remaining committed to the goal of **reducing HIV transmission in Australia**.

CASE STUDY THEORY OF CHANGE



Connecting academic research and lived experience: A case study from the Tasmanian Council on AIDS, Hepatitis, and Related Diseases

This case study demonstrates the theory of change working in practice. Through their engagement with their communities and alignment with the sector, the Tasmanian Council on AIDS, Hepatitis, and Related Diseases (TasCAHRD) was able to achieve increased reach, increased effectiveness, and stronger partnerships – all of which, led to better outcomes for their communities.

High-quality health promotion work is built on a strong evidence base that demonstrates the needs and the strengths of the community. While the Tasmanian Council on AIDS, Hepatitis, and Related Diseases (TasCAHRD)'s **engagement** with Lesbian, Gay, Bisexual, Trans, Intersex and Queer (LGBTIQ) communities means they have a deep understanding of community needs, this knowledge is strengthened by integrating academic research. Until recently, however, the Gay Community Periodic Survey (which has been conducted regularly in mainland states and territories since 1996) was not available in Tasmania, meaning there was a lack of data for the State on trends in sexual practices and HIV transmission.

In 2014, the Centre for Social Research in Health (CSRH) at the University of New South Wales collaborated with TasCAHRD to conduct the survey in Tasmania for the first time (**alignment**), demonstrating that TasCAHRD is seen as a **credible** organisation that is able to reach HIV-affected communities. The survey was repeated in 2016, and showed that many men who have sex with men (MSM) in Tasmania had never been tested for HIV, and there was a high rate of condomless sex with casual partners.

TasCAHRD identified the need for more information about the barriers and incentives for HIV testing, prevention and treatment for MSM. They responded to this gap by partnering with the Centre for Social

Research and Health (**stronger partnerships**) to undertake further research and they secured funding from the Tasmania Government's LGBTIQ Grant Program to support the project (**responsive**).

The qualitative research¹ aimed to understand the barriers to HIV prevention and care among gay and bisexual men, focusing on experiences of homosexuality and HIV-related stigma and discrimination.

TasCAHRD used its existing communication channels within gay communities in Tasmania to recruit participants, including social media and their Man2Man magazine. Their embeddedness in the community (**engagement**) enabled TasCAHRD to **reach** and recruit a diverse group of men for the research.

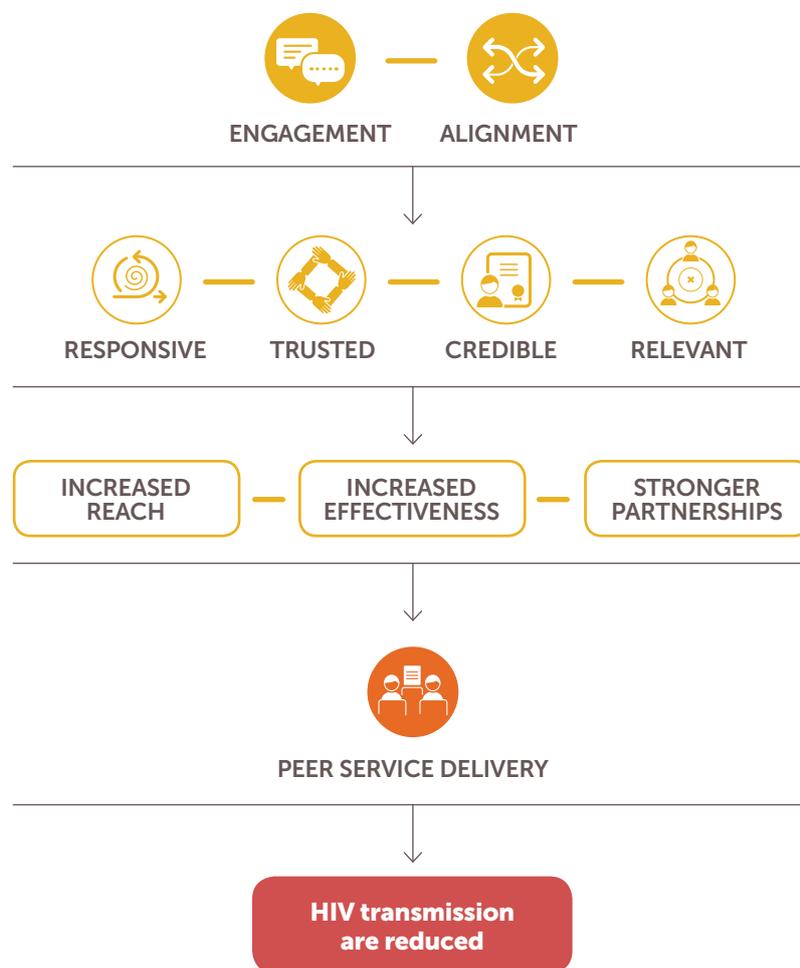
TasCAHRD identified the importance of providing a culturally safe experience so participants would feel comfortable openly sharing their experiences without fear of judgement or discrimination. To achieve this, TasCAHRD utilised their staff and volunteers who are part of the gay community in Tasmania to conduct the interviews (**peer service delivery**). The Centre for Social Research and Health provided training and technical support to the staff, which ensured that the research was valid and credible, thereby increasing its value to the sector.

¹ Lea, T., Wagner, S., Anning, M., & Holt, M. (2017). *Barriers to HIV prevention and care among gay men in Tasmania: Final report*. Sydney: Centre for Social Research in Health, UNSW Sydney and Tasmanian Council on AIDS, Hepatitis & Related Diseases.

The interviews explored a range of deeply personal topics such as experiences of stigma and discrimination, personal strategies for maintaining sexual health, experiences living as a gay or bisexual and/or HIV-positive man. The willingness of participants to share such personal information with the organisation demonstrates the high degree of **trust** that TasCAHRD has cultivated over the last 30 years.

This successful **alignment** with the academic sector has enabled TasCAHRD to provide evidence-based policy advice, which increases their **credibility** in the sector, and ensures that their health promotion programs are **relevant** to the specific needs of their local community and address the community's particular challenges and barriers to **reducing HIV transmission (increased effectiveness)**.

CASE STUDY THEORY OF CHANGE



MIPA Report and Action Plan: A case study from the Victorian AIDS Council

This case study demonstrates the theory of change working in practice. Through their engagement with their communities and alignment with the sector, the Victorian AIDS Council was able to achieve increased effectiveness, increased efficiency and stronger partnerships – all of which, led to better outcomes for their communities.

The Victorian AIDS Council (VAC) has a long history of working with and for Lesbian, Gay, Bisexual, Trans, Intersex and Queer (LGBTIQ) communities and people living with or affected by HIV. Established in 1983, as a community response to early concerns about the HIV epidemic, VAC has remained embedded in the community and has remained committed to developing and delivering services by impacted communities for impacted communities.

This **engagement** of people living with and affected by HIV in the response to the epidemic has long been considered best practice. This idea was first voiced by people living with HIV in Denver in the same year VAC was founded, and was formalised at the 1994 Paris AIDS Summit, when 42 countries agreed to support a greater involvement of people living with HIV at all levels, particularly through creating supportive political, legal and social environments.¹ This declaration has since evolved to the term 'meaningful involvement of people living with and affected by HIV', shortened to MIPA. MIPA is about ensuring that the communities most affected by HIV are actively involved in decision-making and in implementing all aspects of the HIV response.

In recognition of the critical role that the engagement of people living with and affected by HIV plays in increasing the effectiveness and efficiency of AIDS Councils work, VAC conducted

a formal review of the application of the MIPA standards across the organisation. The review was conducted by VAC staff representatives and community representatives, and resulted in a report and action plan.



By placing the dual goals of the wellbeing of people living with HIV and ending HIV at the heart of the policy response to their MIPA audit process, VAC has exemplified its commitment to diversity of engagement with ALL people living with HIV.

**Richard Keane, VAC MIPA Committee Member
and President of Living Positive Victoria**

VAC's MIPA Action Plan has resulted in increased participation by, and leadership of, people living with and affected by HIV in the organisation and its activities (**peer leadership**). For example, the number of staff and volunteers who are living with HIV has increased across the organisation, including in the areas of alcohol and drug peer education and support, HIV home care and HIV peer support. The Action Plan also resulted in the expansion of VAC's Community HIV Peer Support Program in partnership with Victoria's three largest tertiary hospitals for HIV.

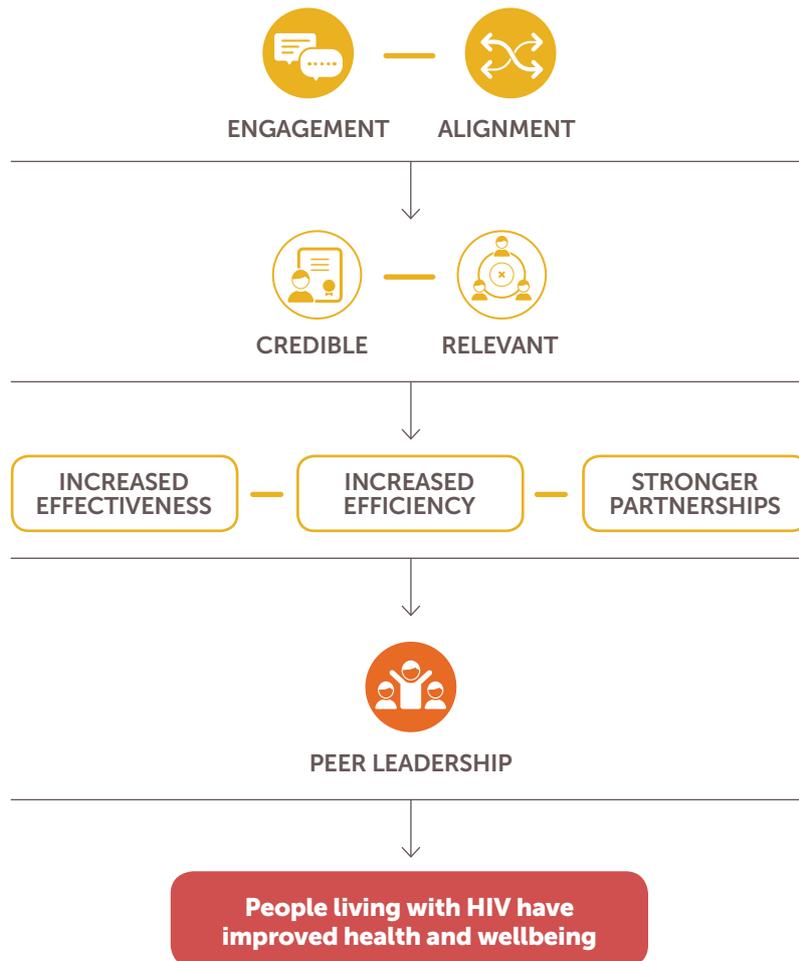
¹ http://data.unaids.org/pub/externaldocument/2007/theparisdeclaration_en.pdf

VAC's application of the MIPA standards has also reinforced their **credibility** in the sector and **strengthened their partnerships** with peer-based organisations, including Living Positive Victoria, Positive Women and Straight Arrows (**alignment**). This has resulted in a number of joint initiatives, including:

- creating and funding a regular peer drop-in time at the VAC Positive Living Centre
- jointly developing a peer-led HIV Self-Management & Peer Support initiative with Living Positive Victoria, drawing on the Stanford Chronic Condition Self-Management Program
- delivering a joint health promotion program that features people living with HIV, which targets early HIV treatment initiation and addresses HIV stigma.

By facilitating the participation and leadership of people living with and affected by HIV in the organisation (**peer leadership**), VAC have ensured the organisation and its activities are **relevant** and accountable to HIV-affected communities. This increases the **effectiveness** and **efficiency** of the organisation's activities, and subsequently amplifies their contribution to the goal of **improving the health and wellbeing for people living with HIV**.

CASE STUDY THEORY OF CHANGE



Safe Schools Coalition: A case study from the Western Australian AIDS Council

This case study demonstrates the theory of change working in practice. Through their engagement with their communities and alignment with the sector, the Western Australian AIDS Council was able to achieve increased effectiveness, increased efficiency and stronger partnerships – all of which, led to better outcomes for their community.

A survey of over 3,000 same-sex attracted and gender-diverse young people in Australia found that 75 per cent had experienced some form of homophobic or transphobic bullying or abuse¹, and 80 per cent of those bullied or abused reported that these experiences occurred at school. As a result, 21 per cent had missed classes or days at school, and 8 per cent had dropped out.

The Safe Schools Coalition is committed to combating these shocking statistics. A national network of organisations, the Safe Schools Coalition works with schools to create safer and more inclusive environments for same-sex attracted, intersex and gender-diverse students, staff and families. The initiative is funded by the Commonwealth Department of Education and Training and convened by The Foundation for Young Australians. In 2015 the Western Australian AIDS Council (WAAC) was selected as the Coalition partner responsible for delivering the Safe Schools Coalition program across Western Australia.

Safe Schools Coalition WA works with educators and school staff, building the capacity of the education sector to support same-sex attracted, intersex and gender-diverse students, staff and families. This work includes free resources and support to equip staff with the skills, practical tools and confidence to lead positive change in their schools. The program supports both primary and secondary schools, and works in metropolitan, regional and remote areas. For example, the Safe Schools Coalition WA team has travelled to all

regions of WA, including four and half hours north and south of Perth to connect with regional school staff and organisations in Geraldton and Albany.

WAAC was a **credible** partner to deliver the program due to their long **engagement** with lesbian, gay, bisexual, trans, intersex and queer (LGBTIQ) communities in Western Australia. For example, WAAC auspices the Freedom Centre, which has been operating for over 21 years as a **peer-led** service to promote mental health and reduce social isolation. The Freedom Centre is a safe space for the delivery of a wide range of programs to support LGBTIQ youth. For WAAC, the Safe Schools Coalition program was an opportunity to align their existing work in schools with a national program. WAAC's deep understanding of the experiences and needs of young LGBTIQ people (**engagement**) and their **strong partnerships** with schools (**alignment**) positions them to deliver a more effective program, more efficiently (**increased effectiveness and increased efficiency**).

WAAC have received excellent feedback about the program. For example:



*I enjoyed practical strategies for immediate implementation!*²



*We are already inclusive, now we will be more explicitly supportive and more visible.*³

1 *Writing Themselves In 3* (Hillier et al 2010)

2 <https://www.waaidc.com/latest-news/safe-schools-coalition-wa-regional-tour.html>

3 <https://www.waaidc.com/latest-news/safe-schools-coalition-wa-regional-tour.html>

An important part of the program is building sustainable change. For example, by supporting school policies and implementation strategies, establishing school action teams, and conducting train-the-trainer workshops, the WA AIDS Council – through Safe Schools Coalition WA – is ensuring that benefits will continue long after the program

ends, which further increases the program's overall **efficiency** and **effectiveness**. This focus on school communities is an important step towards the goal of ensuring all communities are **safe, inclusive and free from stigma and discrimination**.

CASE STUDY THEORY OF CHANGE

