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"Tuitui ātea, poipoi ātea, whakamārohi i a tātou katoa" — "To weave and nurture freedom from obstacles, and to strengthen and invigorate us all"



Highlights of the Year Just Gone

Kia ora,

The New Zealand AIDS Foundation was formed as part of a much wider community response to the early 1980s HIV/AIDS epidemic in New Zealand. Then, as is the case now, NZAF relied on the strong support of its donors, volunteers, and allies from across society. I thank those people who have supported us in so many ways in the last 12 months. This support is vital and has ensured that NZAF continues to be in good form.

Over the past year NZAF has continued to build momentum. This has seen an expansion in the services that NZAF offers and the extension and development of our highly successful prevention programmes. The core purpose of NZAF endures – to prevent the spread of the virus and to support those affected by HIV/AIDS. But changes in society and new developments in combatting the virus are constantly creating new opportunities and challenges for us to meet our purpose. There have been a number of key developments in the last year.

Growth in the upward trend of new diagnoses has been halted. Despite a larger number of people living with HIV, new diagnoses for gay men and other men who have sex with men have levelled off at about 70 per year. If new diagnoses had matched the increasing numbers of people with HIV, we could have expected this number to be much higher. However stopping the increase is not good enough. We aim to reduce HIV and we will need every tool available to achieve this in the coming years.

Our Love Your Condom prevention programme has continued to expand its reach with millions of views of its ads on smart phones, online, on posters and on billboards. This year we have emphasised the community's joint responsibility to protect each other and we were overwhelmed with the number

of people wanting to be part of LYC. Our condom promotion has maintained high levels of condom use by gay men, despite declining trends world-wide. This condom culture is directly responsible for the lower prevalence of HIV among gay and bisexual men – half that of Australia – which keeps everyone safer. Having achieved and sustained 80% condom use, additional gains are a challenge. But the people at NZAF are up for it, as the year ahead will show

Asian men who have sex with men have been contracting HIV in increasing numbers. We have responded by forming relationships with a range of Asian groups to hear their ideas about how we can reach their communities. We have also undertaken research to help shape our understanding so that our actions in the coming year can be as effective as possible.

Rates of HIV testing are increasing across New Zealand. That's good because we now know that one in five gay and bisexual men with HIV don't know they have it and 50% of people who test positive for HIV test late. NZAF Health Services have pushed innovation in HIV testing hard in recent years, testing in new places and with the latest technology. As a result we now provide 2500 tests a year, a 73% increase in three years.

HIV cannot be viewed in isolation from other sexual health issues. NZAF Health Services now provide syphilis and hepatitis C screening, and in collaboration with regional sexual health services provide gonorrhoea and chlamydia screening. By providing counselling to 140 people a month, we have continued to address the range of emotional, psychological and identity issues for people at risk of HIV or living with the virus.

NZAF had some form of interaction with 500 people living with HIV last year. We have continued and expanded group support for people living with HIV. This is something people asked NZAF to do and I'm pleased we listened and acted. We will continue to work to better meet the needs of people living with HIV.

Much of our work is done in partnership with other organisations. From gay venues to African organisations to sexual health and other clinical services, Māori providers, Pasifika and the organisations of people living with HIV, we have been grateful for the collaborative mahi in responding to HIV.

From the conversations I have had with volunteers like myself, on the boards of Positive Women, INA and Body Positive and with personal friends, I know that stigma and discrimination is a huge issue. I am pleased that **NZAF** has been able to take part in a response to stigma agreed to by the whole HIV Forum.

Our African Programme has continued to expand its presence and **New Zealand diagnoses in the African communities remain low.** This year we have reviewed and restructured the programme to cover more geographic areas and refine the way the programme works with the community.

It was with sadness that our international work in the Pacific came to an end in 2012/13. To date we have been unsuccessful in finding ways to fund a renewed presence in the islands, although we maintain our networks and support for other organisations as best we can.

A highlight of the year was the Love Life Fono which drew record numbers, including large

contingents from the islands and strong leadership from the Pasifika community. The challenge of HIV was fully acknowledged and elders encouraged the rainbow Pasifika community to test.

New Zealand's strength as a society that supports those most affected by HIV is built on human rights and legislation. This year NZAF's long-term efforts to get better public health legislation took a step forward with the introduction of the Health Protection Bill to parliament. When this Bill passes, HIV will finally be recognised as a notifiable disease by law. While this will continue to protect an individual's privacy, it will also enable a greater understanding of the epidemic in New Zealand.

NZAF's achievements have required the dedicated work of many people: the people on our staff, the 200 people who regularly volunteer, people who give money and time, Te Roopu ki a Tau – our Māori advisory group, the African Advisory group, the Board, the charitable trusts who support our work and the thousands who spread our messages verbally and online.

Thank you to you all.

Simon Randall — Trust Board Chair



A Diverse Community – The Same Virus – An Integrated Approach

The Year Ahead for Us

HIV is a virus but it affects people. As a group of dedicated men and women, NZAF tries to stop that virus by listening, talking and being along side the people who are affected by it. The New Zealand community is changing in its ethnic diversity and this is changing the face of the people affected by HIV. The proportion of Pacific, Māori and Asian people is growing rapidly and this is true for the gay and bisexual population as well. In 2013, 40% of new diagnoses in gay men were non-European; in the heterosexual community, non-European diagnoses were 50%. This trend is likely to continue as the population changes.

In response, the team at NZAF has **increased the resources dedicated to Pasifika community** engagement and will be building on the momentum of the Love Life Fono movement with another Fono planned for 2015.

We have also created a new role for engagement with the Asian communities. Getting information, relevant prevention messages and support to this wide range of Asian groups will be a challenge. However, we have developed some good initial relationships that have helped to shape what we are going to do.

The NZAF team has specific staff focused on Māori and HIV. Working closely with partners such as INA

we will continue to promote condom use, testing and support in the context of whānau and whakapapa. It is very powerful that the **Hui Takatāpui will be held in the Waikato within Tainui in 2014** with the blessing of the Māori King.

The African Programme will have more staff on the ground this year and NZAF will work more closely with the African Advisory Group to build a social movement around HIV awareness in the African community.

The coming year will also see the board build on its engagement with Te Roopu ki a Tau in considering how the governance of NZAF can respond to the needs of an increasingly ethnically diverse community.

NZAF's work is a mix of strategic thinking and listening to people. As we do that this year we will be bringing together new information with old wisdom to form a comprehensive response.

Love Your Condom is working. The conversations we have with thousands of men tell with us that gay and bisexual men like being reminded about the effectiveness of condoms in a fun and up-beat, sexpositive way. Condom promotion will continue to be by far the major part of prevention for gay men and the African community.



Condoms also work to protect people from other sexually transmitted diseases. The risk of STIs for gay and bisexual men are as high as for HIV and, for people living with HIV, STIs are easier to catch and can increase their infectivity. As untreatable gonorrhoea becomes an increasingly urgent threat NZAF will be working with the community to understand this risk and to encourage condom use.

People have told us that HIV testing can be scary. We also know that New Zealand's levels of testing are inadequate – 40% of gay and bisexual men are diagnosed late for HIV. This is bad for their health and also dramatically increases the risk that they may pass on the virus. NZAF has tried hard to remove as many barriers as we can to testing by using rapid tests and taking testing to where people are. Having reached the limit of our testing capacity, the next step is to go further by partnering with other providers to support their testing, as well as advocating for the use of rapid testing in sexual health and GP services.

As medications for HIV have improved, people have been able to access them earlier in the progression of their disease. This is good for their personal health and there is mounting evidence that medication, which achieves undetectable viral load, significantly reduces a person's infectivity. While medications will never replace condom use as a means to stop the spread of HIV, their secondary prevention effect is a welcome addition. We want to make the most of both the personal and secondary prevention benefits. NZAF will be advocating for the removal of any Pharmac threshold for access to HIV medications – we believe the decision to start medications should be made by the individual and their doctor.

The people at NZAF Health Services work with hundreds of people living with HIV (PLHIV).

The resulting conversations have led us to expand the range of support we provide and, as this conversation continues, NZAF will be looking at how we can add new support to our highly successful counselling and group work. The needs of people living with HIV vary considerably and change over the course of their lives. Now that we are in the third phase of the HIV/AIDS epidemic – that is, the phase of living with the virus long term – NZAF needs to be open to change and to providing new forms of support in ways that suit emerging needs.

One key support area is eliminating HIV stigma. Nobody wants to have HIV. It is a significant lifelong disease, but nobody deserves to be treated badly because they have it. Stigma isolates people and fear of it stops people testing or even accepting treatment. It is fuelled by ignorance about the risks and realities of HIV. Eliminating stigma is the theme of 2014's World AIDS Day and NZAF will be working with other groups to raise awareness and knowledge around HIV.

Human rights and fighting homophobia have been core foundations of our ability to talk openly about HIV, sex and prevention. While New Zealand has come a long way, strong homophobic forces and other attitudes that diminish human rights still exist. Too many young people still face bullying. Education about sex and relationships is still woefully inadequate. These things make people more vulnerable to HIV risk and NZAF will work with partner organisations to create positive change.

NZAF is all about people supporting people to respond to HIV. At the heart of this is relationships and the means to good relationships is communication. In the next year people can expect to see NZAF reach out more and in new ways so that we improve the conversations we have with the community about addressing HIV in today's world.

Shaun Robinson — Executive Director



Preventing HIV

NZAF aims for a significant reduction in the number of people contracting HIV.

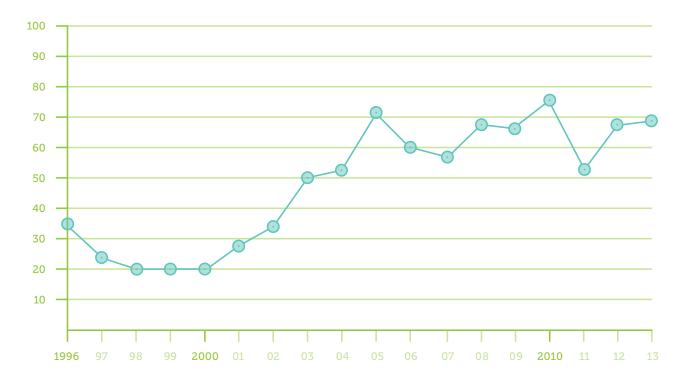
Since setting this goal in 2010, HIV diagnoses have dropped by 5% overall and 9% in gay and bisexual men. After a huge reduction in 2011, the number of diagnoses rose again in 2012 and 2013. It is valid to take the Otago Epidemiology perspective that the ten-year trend is a plateauing of new diagnoses at around 70 per year (where the infection occurred in NZ).

With the number of people living with HIV slowly growing, the risk of it being passed on in the community has been increasing. The number of new diagnoses is less than would be expected with this rising risk, so New Zealand's prevention

work is having an effect. Internationally this is a very good result, given that MSM diagnoses are accelerating in many countries. Our challenge is to move from a plateaued epidemic to a declining one.

The pattern is slightly different for heterosexual diagnoses, with a rapid increase in 2005 caused by immigration, rather than NZ-based infections. Since immigration law changed in 2006, numbers have reduced substantially and **heterosexual diagnoses have also plateaued** (at around 20 new diagnoses annually where the infection occurred in NZ).

Annual HIV Diagnoses in Gay and Bisexual Men where Virus Not Acquired Overseas



Source data: AIDS Epidemiology Groups Department of Preventive and Social Medicine, University of Otago. Graph Created by NZAF.

New Zealand's condom culture is being maintained at high levels, which is key to the success of HIV prevention. The Love Your Condom social marketing programme has been independently evaluated as having a significant effect in strengthening condom use. Over 80% of gay and bisexual men use condoms most of the time for casual sex. Thirty years into the epidemic, sustaining the condom culture is vital and extending it is certainly challenging. The Love Your Condom team will be both targeting groups where condom use can be improved (such as young "first timer" gay and bisexual men and Asian men who have sex with men) and keeping up the community-wide approach.

Check us out...

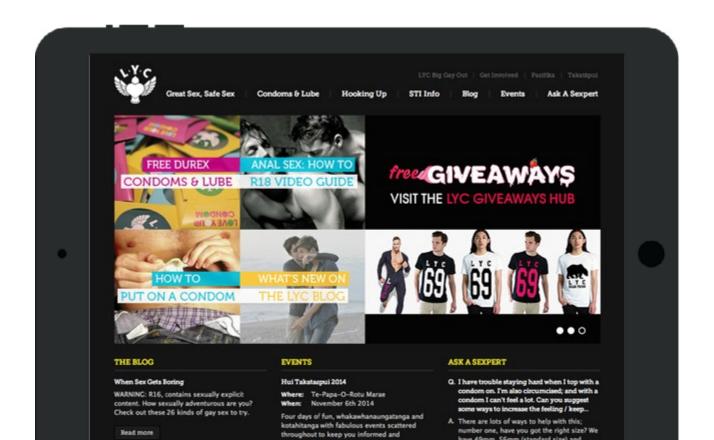
www.loveyourcondom.co.nz
www.facebook.com/loveyourcondom

Testing is vital to the control of the HIV epidemic. Undiagnosed HIV and late diagnoses are far too high. International evidence points to a significant proportion of new HIV infections being driven by undiagnosed HIV, so reducing these figures is critical.

- NZAF continued its pioneering of testing technology, rolling out the new rapid P24 antigen test. Coupled with continued expansion of outreach testing, this innovation has increased testing by 73% in three years.
- 2500 tests were administered by NZAF in the last year.
- NZAF will continue advocating for wider use of rapid testing in the whole health sector.

At some point in their life, many gay and bisexual men experience a range of personal issues associated with their sexuality. NZAF encounters these men when they test for HIV. This a crucial time to engage professionally with them at a deeper level, which can also reduce unsafe sexual behaviours.

 NZAF Health Services provided counselling to nearly 1700 people last year.







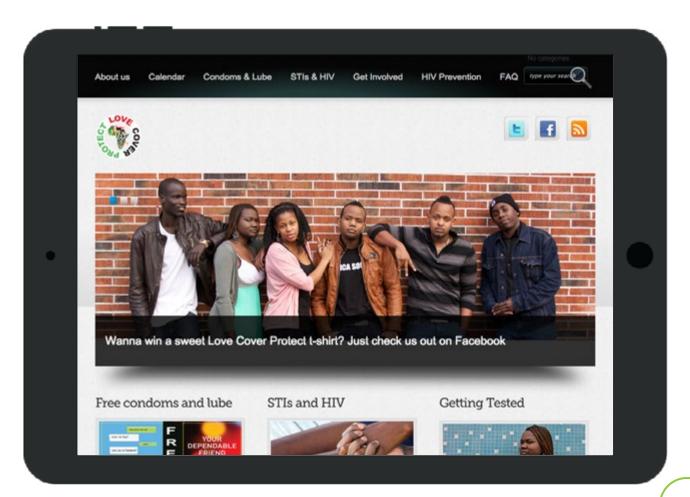
<u>African Programme</u>

The second population most affected by HIV in New Zealand are our African communities. It is estimated that five out of 100 New Zealand Africans have HIV and 19% of those receiving clinical care for the virus are African. The majority of Africans with HIV came to New Zealand as migrants or refugees. Since 2005, NZAF has carried out an HIV prevention programme of health promotion, social marketing and community development to prevent HIV transmission among Africans based in New Zealand. HIV is predominantly transmitted through heterosexual sex in New Zealand African communities and annual diagnoses are low (only one African was diagnosed with HIV in 2013 where the infection occurred in NZ). However, the issue of HIV stigma affects many in the African community and is a barrier to testing and support. HIV and sexual health knowledge can be improved. There is more to be done to address HIV effectively in the diversity of African communities here in Aotearoa New Zealand.



- Over 14,000 condoms were distributed at sports tournaments, venues and community events in 2013/14.
- Nearly 16,000 people attended NZAF African
 Programme sponsored events a 33% increase in 12 months.
- Online engagement with African communities has continued to expand with Facebook followers growing by over 200% to nearly 3000.

Check out the website <u>www.lovecoverprotect.co.nz</u> or download the LCP app from the Google store.



Cultural Diversity

"Talanoa is a Pasifika concept of open discussion between family, community and their elders, allowing us to respectfully unpack the cultural constraints that prevent us from speaking openly and on the same level. This is an approach that we, along with partners in the Pasifika Rainbow community, want to encourage around sexuality and HIV."

 Tanu Gago: Community Engagement Coordinator Pacific The New Zealand population is growing more ethnically diverse every day and 40% of HIV diagnoses in 2013 amongst men who have sex with men were non-European. Reflecting and responding to cultural diversity is very important. In this context the Hui Takatāpui movement, Love Life Fono, outreach to the Asian community and African Programme become increasingly significant.

The cultural focus of our work amongst young people from these communities will be vital. The support of Te Roopu ki a Tau, our Māori advisory group, and the African Advisory group is an asset in this process.





Support for People Living with HIV

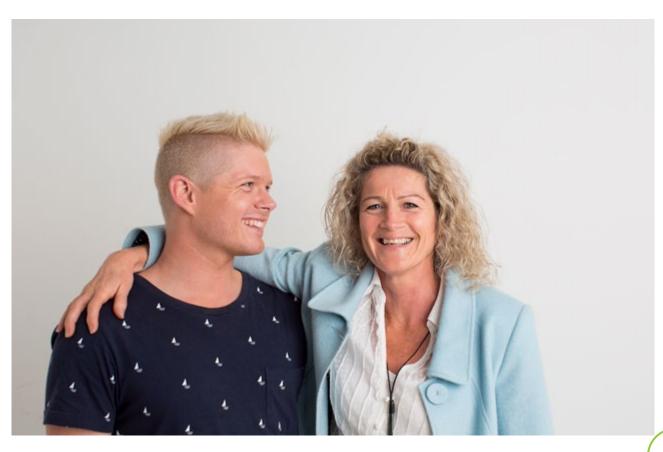
NZAF aims to provide responsive and culturally appropriate services that provide opportunities for people living with HIV, their whānau and families, to maximise their wellbeing.

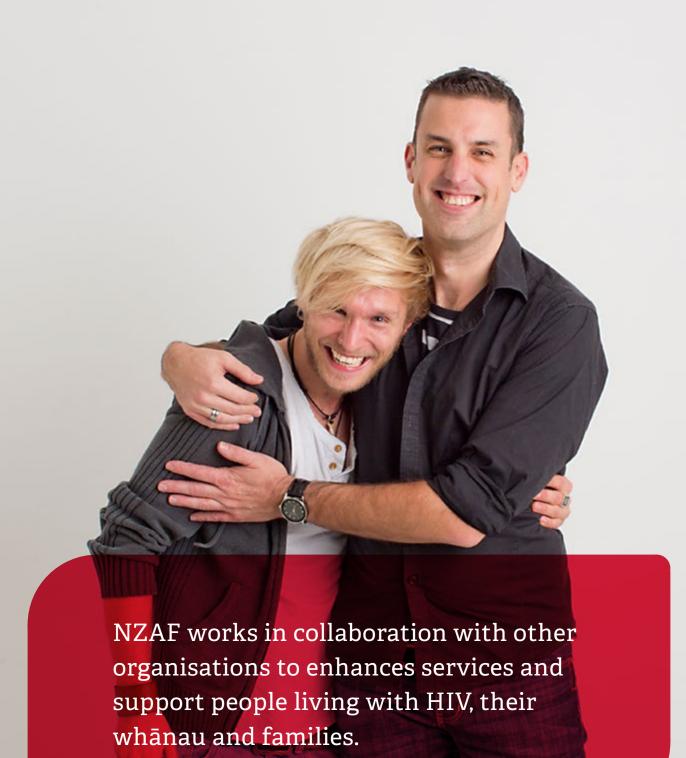
The roots of NZAF are in volunteers rising to the challenge of the AIDS crisis and supporting people who were dying. This role has changed – and continues to change – with the HIV epidemic. In the first phase of the epidemic, where HIV led to AIDS and death, support meant palliative care. The development of antiretroviral therapy in the 1990s created phase two – very few people now die of AIDS. Phase three of the epidemic is long-term health management and support of wellbeing.

Every new day is the longest that someone has lived with HIV. In this context, change and innovation are a given.

NZAF now plays a range of roles that work in collaboration with other organisations to enhance services and provide opportunities for people living with HIV.

- Therapeutic and peer support groups have been extended in Auckland, Wellington and Christchurch at the request of people living with HIV.
- A second joint South Island retreat for people living with HIV is planned (involving Positive Women, NZAF, INA and Body Positive), after great participant feedback from the first.
- Nobody wants to get HIV. It is significant life-long disease; but nobody should be treated badly because they have it. HIV stigma has been made the focus of the World AIDS Day campaign in collaboration with PLHIV support groups.





A Partnership Approach

NZAF works to create a shared vision with organisations committed to HIV prevention and healthcare. We partner with the communities most at risk of HIV, to encourage shared ownership of that vision.

HIV affects many thousands of people in New Zealand directly and indirectly. We all need each other as we respond to the epidemic. NZAF has worked to build strong relationships through shared work in the last year.

- Our Community Engagement team has partnered with over 100 venues, groups and organisations to get condoms and the LYC message out there.
- Outline, Auckland Pride Festival, GABA and Rainbow Youth have all used our building and it is becoming a focal point for the community.
- The HIV Forum a round table of groups with an interest in HIV, which is brought together by NZAF, has made progress on a plan to address stigma and advocated for changed health policy.

- A collaborative process between NZAF, Body Positive, Positive Women, INA has produced the HIV New Zealand magazine.
- Our board met with their counterparts in Body Positive, Positive Women, INA and the African Advisory Board.
- NZAF staff have offered services, information and support in a wide range of settings – training of clinical staff, retreats for people living with HIV, other organisations' planning sessions and board meetings.
- Over 200 people regularly volunteer to help with events, condom packing and to be champions for condom use.



Research and Analysis

NZAF has a strong and broad evidence base that informs all aspects of its work.

New Zealand's success in responding to HIV has been driven from NZAF's grounding in evidence and analysis of how research can inform practical action. In a world where more than 10,000 scientific papers are produced on HIV each year, staying on top of the evidence is a challenge. Even in this context there are aspects to the New Zealand epidemic where the best evidence is based on culture, experience and anecdote. NZAF draws on all of these threads to inform what it does.

- The Gay Auckland Periodic Sex Survey (GAPSS) and the Gay Online Sex Survey (GOSS) were repeated.
- New science about the impacts of treatment on personal health and reduced infectivity were incorporated into our work.

- Qualitative research into the attitudes, behaviour and knowledge of young Asian MSM was completed.
- NZAF had a major presence at the AIDS 2014 conference in Melbourne where we both learned from others and were well-received for our innovative condom promotion and testing.
- The risk of untreatable gonorrhoea for gay and bisexual men and the impacts of other STIs were analysed and communicated.
- Issues around the HPV virus and anal cancer risk for gay and bisexual men were researched and submitted to Pharmac to support vaccination.



"The threat of untreatable gonorrhoea is growing rapidly and is at highest alert for international health agencies. Gay men need to be aware of their total sexual health risks and know that condoms are the only prevention method that works across all STIs transmitted by anal sex."

 Tony Hughes: Director of Science and Research

Organisational Strength

NZAF aims to be strong and more sustainable so that it can carry out its mission.

NZAF is a strong and collaborative organisation. However, the shrinking value of our funding is a serious threat to our effectiveness. Internally people at NZAF work well together, taking a 'whole organisation' view that strengthens our work. Externally we have enjoyed a growing understanding of the innovations in our work and support for the outcomes we are achieving. Nevertheless, we continue to face challenges.

- Workloads have continued to increase as our testing, counselling and community engagement gained full momentum.
- Some highly-skilled people left us this year for a range of personal reasons. We wish them well. We have been left short-handed at times in the face of a lot of mahi (work).
- Financially, these are difficult times. For the last seven years, our core Government funding has not risen with inflation, leaving us nearly 10% worse off (\$400,000 in real terms). As predicted, the 2014/15 budget is in deficit. If our income does not increase, cuts in operations are likely not a good prospect in the face of an ongoing epidemic. We need the financial support of the community as well as the government to keep HIV under control.



NZAF sincerely thanks all those who made financial contributions to support our work in 2013/14; including regular donors, one off donors large and small and those who contributed via online donations for Running to Zero.





































The figures seen on this page
have been extracted from the full
audited financial statements,
a copy of which can be obtained
from nzaf.org.nz

NZAF Trust Board

Simon Randall - Board Chair
Andrew Sweet - Deputy Chair
David Friar
Dr Massimo Giola
Kathryn Leafe
Tim Melville
Vaughan Meneses
Michael Moore

Statement of Financial Performance

Income	2014	2013
Ministry of Health	\$4,208,484	\$4,228,484
Grants - Special Projects	\$39,601	\$81,026
Secretariat of the Pacific Community	\$14,483	\$275,376
Fundraising NZAF Events	\$137,305	\$141,917
Donations / Bequests	\$17,014	\$51,906
Pharmac	\$45,401	\$39,003
Membership	\$500	\$913
Consultancy / Other Income	\$9,750	\$2,729
Interest	\$21,605	\$21,816
Total Income	\$4,494,143	\$4,843,170
Expenses	2014	2013
Office Resourcing	\$339,896	\$402,505
Board Expenses	\$40,110	\$32,603
Communications, Fundraising & Events	\$254,486	\$287,483
Depreciation	\$63,737	\$71,918
HIV Prevention	\$1,006,330	\$998,948
International Programme Health Promotion	\$0	\$143,653
Health Services	\$138,638	\$219,076
Research, Analysis & Information	\$69,779	\$18,077
Personnel	\$2,237,437	\$2,303,261
National Support Services	\$56,385	\$153,633
Travel	\$138,558	\$145,719
Total Income	\$4,345,356	\$4,776,876
Total net surplus (Deficit) for the year	\$148,787	\$66,294

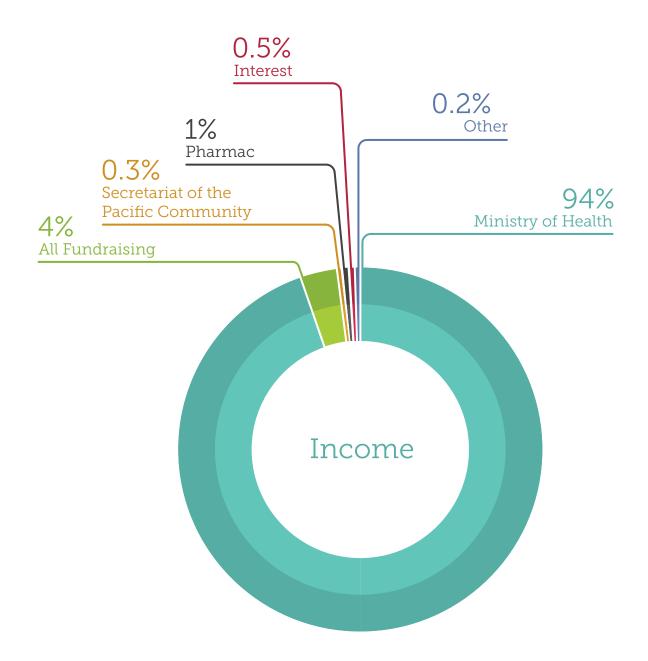
Statement of Changes in Equity

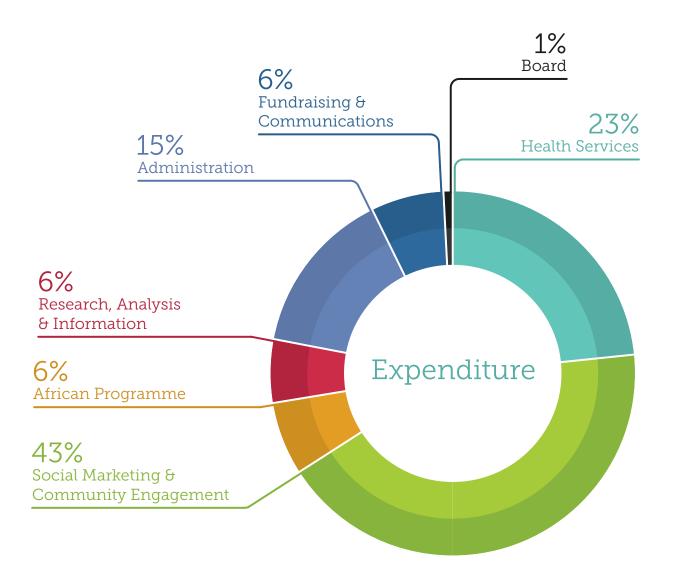
Accummulated Funds	2014	2013
Accummulated Funds at start of year	\$1,668,019	\$1,661,725
Net surplus / (deficit) for the year	\$148,787	\$66,294
Transferred (to) / from Research Reserve for the year	(\$12,000)	(\$50,000)
Transferred (to) / from Building Reserve for the year	(\$100,000)	(\$10,000)
Total recongnised revenue and expense	\$36,787	\$6,294
Total Accumulated Funds at the end of year	\$1,704,806	\$1,668,019
Building Reserve	2014	2013
Total Building Reserve at the start of year	\$26,500	\$16,500
Transferred from Accumulated Funds for the year	\$100,000	\$10,000
Payments for the year	\$0	\$0
Total Building Reserve at the end of year	\$126,500	\$26,500
Research Reserve	2014	2013
Total Building Reserve at the start of year	\$111,600	\$61,600
Transferred from Accumulated Funds for the year	\$50,000	\$50,000
Payments for the year	(\$38,000)	\$0
Total Research Reserve at the end of year	\$123,600	\$111,600
Total Funds at end of year	\$1,954,906	\$1,806,119

Statement of Financial Position

Funds	2014	2013
Accumlated Funds	\$1,704,806	\$1,668,019
Building Reserve	\$126,500	\$26,500
Research Reserve	\$123,600	\$111,600
Total Funds	\$1,954,906	\$1,806,119
Represented by		
Current Assets	2014	2013
Accounts Receivable	\$0	\$112,787
ANZ Bank Accounts	\$50,582	\$33,746
Other Assets	\$76,446	\$68,304
Tax Receivable	\$52,802	\$96,075
	\$179,830	\$210,912
Less: Current Liabilities	2014	2013
Accounts Payable	\$183,388	\$393,631
Other Creditors & Accruals	\$233,813	\$317,619
ANZ Bank Loan	\$100,000	\$0
	\$517,201	\$711,250
Working Capital	(\$337,371)	(\$500,338)
Non-Current Fixed Assets	2014	2013
Property, Plant & Equipment	\$2,292,277	\$2,306,457
Net Assets	\$1,954,906	\$1,806,119

Please Note: After a payment of (\$38,000) and a transfer of \$50,000 to support research & transfer of \$100,000 for the building maintainence NZAF was left with \$36,787 total net surplus for the year.







Role of the New Zealand AIDS Foundation

NZAF is New Zealand's national HIV prevention and health services organisation. The work of NZAF includes HIV prevention and community engagement, testing and health services, science and advocacy and is funded primarily by the New Zealand Ministry of Health.

NZAF is a registered charity that grew out of gay community initiatives in the 1980s and today brings history, passion, commitment, expertise and diversity to meet the emerging trends of the HIV epidemic and the changing needs of the communities it serves.

AKL

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CHC

NZAF Te Toka Centre

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