NCHSR receives project funding from a range of sources including the Australian Government Department of Health and Ageing, state and territory Departments of Health, competitive funding bodies, partner organisations and international sources. Additionally, research infrastructure support is received from the Faculty of Arts and Social Sciences and the University of New South Wales.
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About NCHSR

The National Centre in HIV Social Research (NCHSR) is based in the Faculty of Arts and Social Sciences at The University of New South Wales (UNSW). Since its establishment in 1990, NCHSR has undertaken an expanding program of social research related to human immunodeficiency virus (HIV), sexually transmissible infections (STI) and viral hepatitis (HCV and HBV).
Research priorities

NCHSR’s multidisciplinary research incorporates a range of social science perspectives and this rich theoretical and methodological mix underpins innovative approaches on health, risk and the impact of blood-borne viruses (BBVs) and sexually transmissible infections (STIs). In particular, NCHSR is known for broadening the focus on the individual in health behaviour research and emphasising the social processes that influence vulnerability to and risk of HIV, STIs and viral hepatitis as well as the experiences of living with chronic infection.

NCHSR aims to improve the health and well-being of affected individuals and communities by undertaking exemplary, multidisciplinary research regarding the social and behavioural aspects of HIV, sexually transmissible infections and viral hepatitis. Working collaboratively with affected communities, policy-makers and academics, NCHSR conducts internationally leading research that is scholarly and thought-provoking, as well as informs and strengthens policy and practice in prevention, treatment, care and support.

NCHSR’s priorities are to conduct research in order to:

• identify, understand and monitor sexual and drug-use practices as they relate to the risk for blood-borne viruses and sexually transmissible infections

• explore experiences of health, illness, biomedicine and clinical practice from the perspectives of both healthcare professionals and affected populations

• investigate the ways in which cultural differences, gender and sexuality, stigma and discrimination, and political and economic dynamics shape experiences of BBVS, sexual practices and drug use
of the new national strategies in HIV, STIs, hepatitis B, hepatitis C, and Aboriginal and Torres Strait Islander blood-borne viruses and sexually transmissible infections that were endorsed by Australian health ministers in 2010.

Since NCHSR’s establishment in 1990, its program of research has changed and expanded considerably, reflecting evolving epidemics, needs and priorities. From its original focus on the HIV epidemic in the past decade the Centre has expanded substantially to build a highly regarded and productive program of social research in viral hepatitis and injecting drug use. While developing the Centre’s 2009–2012 strategic plan, we identified new directions and initiated a range of projects to effectively respond to emerging issues. These new projects continue to reflect the Centre’s vision to conduct exemplary multidisciplinary social and behavioural research that makes a difference by addressing the needs of affected communities and informing and strengthening policies and programs. Reflecting this mix of strategic and investigator-initiated research, new funding was received from government, community and non-government partners and competitively awarded grants.

The new directions in which NCHSR is taking its research programs are detailed throughout this Annual Report. Important highlights include the suite of projects commenced with partner organisations to better understand the stigma faced by people living with HIV and hepatitis C in their own community and in health services. Guided by a similar commitment to strengthening the human rights focus in our social research, we have also commenced a revitalisation of our international program through work commissioned by UNAIDS and through AusAID-sponsored capacity-building programs in the region, the fruits of which are becoming evident in 2011. Other exciting new projects launched in 2010 address the sexual health of young Aboriginal people, the exposure and transition to injecting drug use by young people, and the experience of HIV risk and living with HIV in culturally and linguistically diverse communities. We have also further developed research projects that critically address important issues regarding the availability, accessibility and acceptability of health services, including the delivery of effective treatment and the sustainability of the work force. Several new and recently started projects respond to our strategic intent to develop a novel area of work concerned with strengthening prevention responses. Their translational approach critically contributes to bridging the gap between theory, research and practice, and projects aim to strengthen policies, programs and resources to promote timely and regular testing for HIV and STIs among gay men and young people, propose new directions for online prevention and understand the implications of emerging biomedical prevention of HIV.

Knowledge transfer remains a key aspect of the work of NCHSR, through the Centre’s successful series of two-day conferences on social research in HIV, hepatitis C and related diseases. The 11th conference in this series...
was held in April 2010 and brought together over 200 national and international academics, researchers, educators and policy makers. The Centre also continued its acclaimed Consortium for Social and Policy Research on HIV, Hepatitis C and Related Diseases, with partner organisations co-funding three well-received workshops. We further completed four widely distributed Social Research Briefs and extended our Seminar Series to include several public seminars per year that are open to interested colleagues outside the Centre. Our staff also contributed their expertise to the work of a large number of community and government committees and forums and presented extensively at national and international conferences. Last but certainly not least, the output of the Centre in terms of scholarly publications was again excellent in 2010.

Congratulations go to Martin Holt, who was promoted to senior research fellow; Carla Treloar, who was promoted to professor; and Christy Newman, who received the Paul Bourke Award for Early Career Research from the Academy of Social Sciences in Australia. In 2010 we said goodbye to three students who completed their degrees: Magdalena Harris (PhD), Justin McNab (PhD) and Jan Mietinen (MA). We wish them a successful career and hope to continue working with them. Several staff also left the centre: John Imrie now combines assistant director and professorial positions at the Africa Centre for Health and Population studies, the University of KwaZulu-Natal and University College London; Imogen Da Silva took up a permanent position at the University of Western Sydney; and Hannah Wilson left temporarily only to return in 2011 as a postgraduate student. We also welcomed new staff in 2010: Daren Fisher was appointed research officer, Denton Callander joined us as a postgraduate student and research assistant, Angela Barton was appointed interim centre manager, and Professor Jo Neale from Oxford-Brooks University was appointed visiting professorial fellow. We are very happy to welcome back Limin Mao, who rejoined the Centre as a research fellow.

I also want to thank our colleagues in the Faculty of Arts and Social Sciences and in the HIV, STI and viral hepatitis sectors for their invaluable contributions to the governance of our Centre through their membership of the NCHSR Management Board (NMB) and Scientific Advisory Committee (SAC). After a long period of service as the SAC chair, we said goodbye to Emeritus Professor Sheila Shaver and thank her for her important work and support of the Centre. I am very grateful that Professors Pranee Liamputtong and Jake Najman, well known to the Centre because of their longstanding roles as SAC members, have accepted to become the committee’s new co-chairs and look forward to working closely with them. SAC and NMB member, Professor Daniel Tarantola, returned to his home country, France, and I thank him for his contributions to the Centre; we hope to continue to benefit from his commitment to a human rights perspective. Janelle Fawkes, CEO of Scarlet Alliance, the Australian Sex Workers Association, joined SAC and will strengthen our contribution to sex work research.

It is because of the great commitment and outstanding achievements of the Centre’s staff and students that 2010 was such a successful year; my thanks go to all.
The work of NCHSR is supported by a comprehensive governance structure consisting of a range of committees and boards representing external stakeholders and Centre staff. These committees provide the NCHSR Director with management oversight, platforms for strategic discussion and guidance regarding the operation of the Centre.
NCHSR Management Board

The role of the management board is to oversee the overall performance and direction of the Centre, to ensure the effective, efficient and sustainable pursuit of its objectives and to assist with the development of strategy. It also plays a role in monitoring the operation and finances, and ensuring compliance with UNSW policies and procedures.

Chair
Professor James Donald, Dean, Faculty of Arts and Social Sciences, The University of New South Wales

Chair in-lieu
Professor Paul Patton, Associate Dean (Research), Faculty of Arts and Social Sciences, The University of New South Wales

Members
Professor Ilan Katz, Director, Social Policy Research Centre, The University of New South Wales
Professor Daniel Tarantola, Chair, Initiative for Health and Human Rights, The University of New South Wales *
Professor Anthony Zwi, Associate Dean (International), Faculty of Medicine, The University of New South Wales

Attendees
Professor John de Wit, Director, National Centre in HIV Social Research
Associate Professor Carla Treloar, Deputy Director, National Centre in HIV Social Research
Ms Imogen da Silva, Business Manager, National Centre in HIV Social Research* 
Ms Angela Barton, Centre Manager, National Centre in HIV Social Research*

Secretariat
Ms Janice Knapman, Administrative Officer

Scientific Advisory Committee

The Scientific Advisory Committee brings together experts from social science and public health research as well as from non-government organisations and government agencies. It provides advice and guidance on matters of research strategy that informs the centre’s strategic and work plans.

Chair
Emeritus Professor Sheila Shaver, former Director of the Social Policy Research Centre, The University of New South Wales*
Professor Pranee Liamputtong, Professor of Public Health, School of Public Health, La Trobe University, co-chair *
Professor Jake Najman, Professor of Sociology, School of Social Science, The University of Queensland, co-chair*
Members

Professor James Donald (ex-officio), Dean, Faculty Arts and Social Science, The University of New South Wales

Professor John de Wit (ex-officio), Director, National Centre in HIV Social Research, The University of New South Wales

Mr Michael Costello, Associate Lecturer for Tertiary Preparation Program, The University of the Sunshine Coast / Aboriginal and Torres Strait Islander Senior Policy and Programs Officer, Australian Federation of AIDS Organisations

Mr Simon Donohoe, Manager, National Education Team, Australian Federation of AIDS Organisations (AFAO)

Ms Janelle Fawkes, Chief Executive Officer, Scarlet Alliance, Australian Sex Workers Association

Ms Annie Madden, Executive Officer, Australian Injecting and Illicit Drug Users League Inc. (AIVL)

Professor Lisa Maher, Head, Viral Hepatitis Epidemiology and Prevention Program, National Centre in HIV Epidemiology and Clinical Research, St Vincent’s Medical Centre, The University of New South Wales

Professor Marian Pitts, Director, Australian Research Centre in Sex, Health and Society, La Trobe University

Dr Sean Slavin, Assistant Director, Research Programs, National Association of People Living with HIV/AIDS

Ms Kim Stewart, Acting Director, Health Protection, NSW Department of Health

Mr Darryl O’Donnell, Acting Associate Director, AIDS/Infectious Diseases Branch, NSW Department of Health

Professor Daniel Tarantola, Chair, Initiative for Health and Human Rights, The University of New South Wales

Ms Helen Tyrrell, Chief Executive Officer, Hepatitis Australia

Associate Professor Catherine Waldby, International Research Fellow, Sociology & Social Policy, The University of Sydney

Dr David Wilson, Senior Research Fellow, Centre for International Health, Curtin University of Technology

Attendees

Associate Professor Carla Treloar, Deputy Director, National Centre in HIV Social Research, The University of New South Wales

Ms Imogen da Silva, Business Manager, National Centre in HIV Social Research, The University of New South Wales

Ms Angela Barton, Centre Manager, National Centre in HIV Social Research, The University of New South Wales

Secretariat

Ms Janice Knapman, Administrative Officer

Scientific Advisory Committee (photograph page 5)

L to R standing: Associate Professor Carla Treloar, Professor Gary Dowsett (in attendance in lieu of Professor Marian Pitts), Professor John de Wit, Helen Tyrrell, Dr Sean Slavin

L to R seated: Megan Parrish (guest), Professor Jake Najman, Janelle Fawkes

Absent: Emeritus Professor Sheila Shaver, Professor Pranee Liamputtong, Professor James Donald, Mr Simon Donohoe, Ms Annie Madden, Professor Lisa Maher, Ms Kim Stewart, Mr Darryl O’Donnell, Professor Daniel Tarantola, Associate Professor Catherine Waldby, Dr David Wilson, Ms Imogen da Silva, and Ms Angela Barton

* part-year
Centre Management Committee

The Centre Management Committee is the forum for discussion on issues related to the daily operation of the Centre and advises the Director regarding resources, policies, procedures and business processes.

Chair
Professor John de Wit, Director

Members
Associate Professor Carla Treloar, Deputy Director
Dr Christy Newman, Senior Research Fellow
Dr Martin Holt, Senior Research Fellow
Ms Imogen da Silva, Business Manager *
Ms Angela Barton, Centre Manager *

Secretariat
Ms Janice Knapman, Administrative Officer

Research Committee

The role of the Research Committee is to support the NCHSR research culture and further its research agenda through a continuous planning process that guides the direction of the Centre’s research.

Chair
Professor John de Wit, Director

Members
Associate Professor Carla Treloar, Deputy Director
Dr Christy Newman, Senior Research Fellow
Dr Max Hopwood, Research Fellow
Dr Asha Persson, Research Fellow
Ms Evelyn Lee, Research Officer

Operational Planning Committee

The role of this committee is to support NCHSR’s continuous strategic planning process by translating aspirations into objectives and performance targets that align with and respond to the strategic plan of the University of New South Wales and the national and state strategies regarding blood-borne viruses and sexually transmissible infections.

Chair
Professor John de Wit, Director

Members
* part-year
Associate Professor Carla Treloar, Deputy Director
Education Committee

The Education Committee oversees the postgraduate programs (Graduate Diploma, Masters by Research and PhD) in Health, Sexuality and Culture and provides advice to the Postgraduate Coordinator and the Director.

Chair
Professor John de Wit, Director
Postgraduate coordinator
Dr Jeanne Ellard, Research Fellow

Members
Associate Professor Carla Treloar, Deputy Director
Dr Philippe Adam, Senior Research Fellow
Dr Loren Brener, Research Fellow
Mr Toby Lea, Postgraduate Student Representative* 
Ms Jamee Newland, Postgraduate Student Representative*

Dissemination Policy Committee

The Dissemination Policy Committee is responsible for overseeing NCHSR’s communications and branding, including the distribution and appearance of the Centre’s publications in both print and electronic media. It performs a knowledge management role by establishing policies and procedures to manage and disseminate the research knowledge of the Centre.

Co-chairs
Dr Joanne Bryant, Research Fellow*
Dr Loren Brener, Research Fellow*
Mr Peter Hull, Research Officer*
Dr Philippe Adam, Senior Research Fellow*

Members
Professor John de Wit, Director
Ms Imogen da Silva, Business Manager *
Ms Angela Barton, Centre Manager *
Ms Judi Rainbow, Publications Officer

Secretariat
Ms Janice Knapman, Administrative Officer

* part-year
Conference Organising Committee

Since 1990 NCHSR organises a biennial conference on social research in HIV, viral hepatitis and related diseases. The conference has become a national platform to showcase social research in relation to blood-borne viruses and sexually transmissible infections, attracting investigators, health educators, service providers and policy makers both from Australia and overseas.

11th Social Research Conference on HIV, Hepatitis C and Related Diseases (2010)

Co-Chairs
Professor John de Wit, Director
Associate Professor Carla Treloar, Deputy Director

Members
Dr Christy Newman,
Dr Loren Brener, Research Fellow
Dr Asha Persson, Research Fellow
Ms Imogen da Silva, Business Manager
Ms Annie Whitelaw, Administrative Officer

12th Social Research Conference on HIV, Hepatitis C and Related Diseases (2012)

Co-Chairs
Dr Joanne Bryant, Research Fellow
Dr Asha Persson, Research Fellow

Members
Professor John de Wit, Director
Dr Loren Brener, Research Fellow
Dr Max Hopwood, Research Fellow
Dr Limin Mao, Research Fellow
Ms Rebecca Gray, Research Officer and postgraduate student
Ms Angela Barton, Business Manager
Ms Annie Whitelaw, Administrative Officer

Professional and technical staff

NCHSR employs a team of professional and technical staff to facilitate and support the work of the Centre by carrying out managerial, financial and promotional activities. Key administrative tasks include developing and implementing efficient and effective internal systems; producing and disseminating NCHSR publications; managing our offices and facilities; providing executive assistance to the Centre Director; organising conferences, workshops and seminars; performing secretariat functions for committees; budgeting and overseeing project accounts; maintaining effective technical infrastructure; and ensuring adherence to OHS requirements.
Governance and management

Staff

Director and Professor
John de Wit, MSc, PhD

Deputy Director, Head Hepatitis C Program, and Associate Professor
Carla Treloar, BSc(Hons), PhD

Associate Professor
John Imrie, BA(Hons), MA, MSc, DipLSHTM, PhD*

Senior Research Fellows
Philippe Adam, MA, PhD
Martin Holt, BSc(Hons), MSc, PhD
Henrike Körner, BA(Hons), DipEd, MA, PhD
Christy Newman, BA(Hons), PhD

Research Fellows
Loren Brener, BScSci, MA, PhD
Joanne Bryant, BSc, MSc, PhD
Jeanne Ellard, BA(Hons), MPhil, PhD
Max Hopwood, BA(Hons), PhD
Limin Mao, BMed, MEd, PhD
Asha Persson, BA(Hons), PhD

Research Associates
Dean Murphy, BA(Hons)*
Jake Rance, BA(Hons)

Research Officers
Rebecca Gray, BA(Hons), MA
Peter Hull, BPsych(Hons)
Evelyn Lee, BA(Hons), MEd
Hannah Wilson, BScSci, MPsych*

Research Assistants
Melissa Burgess, BHS(Hons), (Aboriginal Health and Community Development), GradCertAdEd*
Paul Byron, BA(Hons)*
Denton Callander, BA(Psych), BMus
Robyn Dwyer, BA(Hons), PhD
Daren Fisher, BScSci/Crim(Hons)
Jorlijn Hermans, BA, MPsych*
Robyn Horwitz, BCom, BA(Hons)
Lenoma Jackson, BA(Hons), DipEd, DipLib*
Priscilla Johnson, BHS (Aboriginal Health and Community Development)*
Shih-Chi Kao, BA, MA, PhD*
Yvonna Lavis, BSc*
Toby Lea, BA(Psych), PGDipPsych
Jamee Newland, BScSci, MPS
Dana Paquette, BA, MSc
Ilyse Resnick, BSc(Psych)*
Veronica Saunders, EN, DipEd (Aboriginal)*
Kate Seeer, BA(Hons), LLB(Hons), PhD*
Phil Taylor, BScSci*
Lisa Van Reemst, BA, MPsych* * part-year

* part-year
Adjunct and Conjoint appointments

Peter Aggleton, BA, MEd, MA, PhD
Graham Brown, BBus(Hons), PhD
Raymond Donovan, BA(Hons), PhD
Suzanne Fraser, BA(Hons), PhD
Harm Hospers, MSc, PhD
Joanne Neale, BA(Hons1), MA, PhD
Robert Reynolds, BA(Hons), PhD*
Tim Rhodes, BA(Hons), PhD
Marsha Rosengarten, BA(Hons), MA, PhD

Business Manager
Angela Barton, BEc&SocSci*
Imogen Da Silva, BSc(Hons), GradCert AccFin*

Administration Officer
Annie Whitelaw

Executive Assistant
Janice Knapman, AssocDip(SocSci)

Finance Officer
Nalini Krishnan, BSc, DipEd

Publications Officer
Judi Rainbow

* part-year

New staff

Angela Barton, Centre Manager

Angela has a combined degree in Economics and Social Sciences from the University of Sydney and previously worked at RMIT Melbourne where she held the position of Senior Human Resources Advisor. Angela joined NCHSR in October as interim Centre Manager to oversee and advise on the efficient and effective operation of the Centre and is responsible for managing the professional and technical team.

Denton Callander, Research Assistant

Denton joined NCHSR as a postgraduate student in July after completing both a Bachelor of Psychology and a Bachelor of Music Therapy degree at the University of Windsor, Canada. His research at NCHSR focuses on the interplay of ethnicity, sexual risk-taking, and online sex-seeking among men who have sex with men. He provides qualitative and quantitative support to several research projects at the Centre.

Daren Fisher, Research Assistant

Daren received a first class honours degree in Social Science and Criminology from the University of New South Wales. Since joining NCHSR in 2010 as part of the hepatitis C team, Daren has been involved with the Exposure and Transition Study investigating drug use, hepatitis C and exposure to injecting among young people. He is primarily engaged in recruiting participants, collecting data, conducting qualitative and quantitative analyses, and composing ethics applications. Daren is currently authoring an article on secondary syringe exchange using an existing dataset gathered from pharmacies across New South Wales.

Limin Mao, Research Fellow

Limin gained a Bachelor of Medicine at Fudan University, Shanghai, and her Masters and PhD degrees in Social Sciences at the University of New South Wales. She rejoined NCHSR in May this year as a Research Fellow after continuing her post-doctoral training in cancer epidemiology at the Integrated Cancer Research Centre, Lowy Cancer Institute.

She is a highly experienced researcher specialising in quantitative research design and statistical analyses of complex datasets. She is largely responsible for the Australian HIV behavioural surveillance among homosexually active men but also supervises PhD students.
Our research

Research at NCHSR falls into three priority areas, with international work included in each of these. The following pages showcase NCHSR’s research that were either ongoing, completed or newly started in 2010. Findings from these studies are available in our *Annual report of trends in behaviour*. 
Mapping risk and practice

Studies in this priority area are concerned with identifying, understanding and monitoring sexual and drug-using practices as they relate to the risk for sexually transmissible infections and blood-borne viruses. All of the studies examine the changing meanings of safe and unsafe practices within the social contexts of the populations being studied.

Gay community periodic surveys

The Gay Community Periodic Surveys (GCPS) are regular surveys of gay men’s sexual practices, drug use, and testing for HIV and sexually transmissible infections. These have been conducted in six states and territories across Australia since 1996. Funded by Australian state and territory health departments and conducted jointly by NCHSR, the National Centre in HIV Epidemiology and Clinical Research and state AIDS Councils, the GCPS are a key component of Australia’s behavioural surveillance system, providing regular snapshots of practices associated with HIV transmission. Rates of unprotected anal intercourse with casual partners, for example, are regarded as a crude but key indicator of the likelihood of HIV transmission in different states. In 2010, surveys took place in Melbourne, Sydney, Queensland, Perth and Adelaide. Over the past few years, efforts have been made to increase the consistency between the surveys conducted in different states so that more behavioural indicators can be compared over time.

Status: Ongoing
Personnel: Holt, Mao, Lee, Hull, de Wit
Collaborators: National Centre in HIV Epidemiology and Clinical Research
Funding: Departments of Health in NSW, VIC, QLD, WA, SA and ACT, Australian Government Department of Health and Ageing

Social norms regarding HIV/STI risk and risk reduction behaviours among MSM in Australia

The aims of the Contemporary Norms in Networks and Communities (CONNECT) study are to 1) identify the patterns of connections between individuals in communities of men who have sex with men (MSM) and assess the association of these connections with the HIV/STI risk and risk reduction behaviours among MSM, 2) describe the relationship between social norms and the HIV/STI risk and risk reduction behaviours among MSM with differing degrees and types of connections to other MSM both within and outside gay communities, and 3) compare the patterns of connections, social norms and risk reduction behaviours of geographically and epidemiologically distinct populations of MSM in three Australian states, in order to identify local barriers to effective HIV prevention. The study started in 2010 and the study protocol, procedures for data collection and data collection instruments have been developed. Ethics clearance was obtained from the Human Ethics Review Committees at the University of New South Wales, Curtin University and participating AIDS Councils in NSW (ACON), Victoria (VAC) and Western Australia (WAAC). All three research sites (Sydney, Melbourne and Perth) have trained data collection staff in place and commenced recruitment of participants in December 2010.

Status: Started in 2010
Personnel: de Wit
Collaborators: National Centre in HIV Epidemiology and Clinical Research, Western Australian Centre for Health Promotion Research (Curtin University of Technology), Melbourne Sexual Health Centre, School of Social Sciences (Australian National University)
Funding: National Health and Medical Research Council, Australian Government Department of Health and Ageing
Understanding the contribution of online dating to sexual risk-taking among men who have sex with men

During the last decade or so, the increasing popularity of the internet as a way to meet sex partners has coincided with an increase in sexual risk-taking and HIV incidence among men who have sex with men (MSM). A three-wave online prospective study is conducted to first obtain a comprehensive understanding of the dynamics of online chatting among MSM in New South Wales. Some men fulfil their sexual desires online while engaging in sexual fantasising, while others use the internet to negotiate the type of sex they want to have in real life. This study will produce important and novel understandings of the ways in which online chatting and fantasising shape the sexual, risk and risk reduction strategies that men enact in real life with partners they have met online. Findings will be used to derive recommendations and possible strategies for innovative online HIV prevention that increase awareness among MSM of the dynamics of online chatting and real life sexual behaviours and that support men to better self-regulate their online chatting to prevent unplanned sexual risk-taking. These timely understandings enable the collaborating community organisations to develop innovative online prevention strategies to address this major conduit to sexual risk-taking among MSM and to contribute to a decrease in new HIV infections.

Status: Started in 2010
Personnel: Adam, de Wit, Murphy
Collaborators: ACON, the Australian Federation of AIDS Organisations, Positive Life NSW
Funding: NSW Department of Health, Australian Government Department of Health and Ageing

Is automaticity indeed everywhere? A second generation study of the moderation of impulsive influences on evaluation and behaviour

The sustained maintenance of long-term health behaviour change is an important but difficult to achieve goal. While a number of processes can explain why individuals fail to consistently act upon their motivation, an important threat to successful goal pursuit arises from action tendencies in the service of conflicting goals that may be less important but have a stronger immediate appeal. Such impulsive influences readily result from environmental cues in the absence of conscious thought, but recent theory and research suggests that automatic responding is not inevitable. The primary concern of the present study is with the conditions under which impulsive processes do or do not affect reflective goal-striving in the domain of health behaviour, in particular with respect to sexual risk-taking and condom use. A set of experimental studies is conducted that challenge the widely shared but largely unsubstantiated theoretical notion that most human experience and behaviour reflects automatic processes. The project’s main hypothesis holds that, rather than being ubiquitous and pervasive, automatic influences on evaluation and behaviour occur in the absence of strong competing, deliberative goals. The study’s main, novel hypothesis is that individuals’ reasoned goals also influence their decisions and actions in less deliberative cognitive states.

Status: Ongoing
Personnel: de Wit
Collaborators: Social Psychology Unit (Utrecht University, The Netherlands)
Funding: Linschoten Institute of Psychology (Utrecht University, The Netherlands)

Trial of rapid HIV testing

A trial of rapid HIV testing (RHT) in sexual health clinics in Sydney is underway, designed to assess the acceptability of RHT to gay men and to clinicians, and to identify issues in the implementation of RHT. The trial is led by Dr Damian Conway at the Kirby Institute and Sydney Sexual Health Centre. In 2010, the study design and protocol was refined. Recruitment should commence in the second half of 2011.

Status: Ongoing
Personnel: Holt
Collaborators: National Centre in HIV Epidemiology and Clinical Research, Albion Street Centre, Parramatta Sexual Health Clinic, Royal North Shore Hospital, Sydney Sexual Health Centre
Funding: In-kind support from project partners, Australian Government Department of Health and Ageing
Our research

Understanding individual and social barriers to STI testing among young people in New South Wales

While young people are at risk of contracting sexually transmissible infections (STIs), rates of STI testing remain low in this population. This may reflect that, due to a lack of comprehensive research on determinants of STI testing, approaches used to promote STI testing in young people have mainly focused on raising awareness and providing information on STIs and have not addressed the many complex factors that influence young people's decision to test for STIs. To reduce the gap in research knowledge regarding determinants of STI testing and to inform future STI testing programs, a quantitative online study was conducted among 1,100 sexually experienced young people aged from 16 to 26 years in New South Wales. Using a comprehensive questionnaire, the study assessed the prevalence and contribution of a wide range of individual, social, structural and health service factors potentially influencing young people's decision to test for STI. In multivariate analysis, no association was found between level of STI knowledge and STI testing. Most important barriers to testing were fears and perceived negatives of STI testing; the most important facilitator was perceiving support from peers. The study's findings offer a more comprehensive understanding of the factors that could be addressed to promote the uptake of STI testing in young people.

Status: Ongoing
Personnel: Adam, de Wit
Collaborators: NSW STI Programs Unit
Funding: NSW STI Programs Unit, Australian Government Department of Health and Ageing

Testing for HIV and STIs and their individual and social determinants among men who have sex with men in New South Wales

This prospective online survey aims to increase understanding of the needs of MSM in terms of seeking testing for HIV and/or STIs. Participants in the study are randomised into one of two arms and are invited to answer questions on testing for HIV or testing for other STIs. This design, while reducing participant burden, enables assessing and comparing the prevalence and contribution of an array of factors which may deter some MSM from seeking HIV or STI testing. The comprehensive questionnaire used at baseline assesses individual and psychological barriers and facilitators (perceived risk of having HIV or an STI, perceived costs and benefits of testing for HIV or STIs); socio-cultural barriers and facilitators (HIV or STI-related stigma), and structural and programmatic barriers and facilitators (e.g. availability of services). The contribution of each of these factors to explaining testing for HIV and/or STIs at follow-up will be assessed using logistic regression models. This study will inform programs to promote STI testing among MSM in NSW through an increased understanding of those factors that may deter or facilitate men from seeking STI testing in a timely manner and could be addressed in innovative interventions appropriately tailored to individuals and groups.

Status: Ongoing
Personnel: Adam, de Wit
Collaborators: HARP Unit South Eastern Sydney Area Health Service, STI in Gay Men Action Group, ACON, Australian Federation of AIDS Organisations
Funding: HARP Unit South Eastern Sydney Area Health Service, Australian Government Department of Health and Ageing

Sexual health and relationships among young indigenous people

This project builds on a past project conducted among young indigenous people in NSW by the National Centre in HIV Social Research and the Aboriginal Health and Medical Research Council of NSW. There is some evidence to suggest that the prevalence of STIs among indigenous people may be up to eight times higher than for the non-indigenous population. Despite this, very little culturally-appropriate research has been conducted within indigenous communities on sexual health and blood-borne viruses. This project provides the first national
profile of risk behaviours, levels of knowledge and the types of health services used by young indigenous people for sexual health and blood-borne viruses. It is being conducted with a team of investigators from the National Centre in HIV Epidemiology and Clinical Research, the Australian Research Centre in Sex Health and Society and the School of Public Health and Community Medicine at The University of New South Wales, in partnership with the National Aboriginal Community Controlled Health Organisation.

Status: Ongoing
Personnel: Bryant
Collaborators: Australian Research Centre in Sex Health and Society, National Centre in HIV Epidemiology and Clinical Research, School of Public Health and Community Medicine, National Aboriginal Community Controlled Health Organisation
Funding: Australian Research Council, Departments of Health in NSW, VIC, Qld, SA and TAS, Australian Government Department of Health and Ageing

The exposure and transition study: Exposure to injecting and hepatitis C among young people at risk

Many young people are exposed to injecting drug use though their social networks —by having close friends or a sexual or romantic partner who injects—and we know very little about what they know about hepatitis C and injecting drug use and whether they see themselves as being at risk for injecting and/or acquiring hepatitis C. This project examines young people who are exposed to injecting drug use, but may not necessarily be injecting. It aims to examine their understandings of the risks of injecting drug use and for acquiring hepatitis C. It will provide information about the social contexts in which exposure to injecting happens and about young people’s knowledge and opinions about BBV and drug-related health services. Also, it will focus on experiences with and perceptions of both non-injecting and injecting drug use, the role of and relationships with others who use and/or inject drugs, knowledge about hepatitis C, and experiences with and perceptions of harm reduction services. The project is a cross-sectional study using quantitative surveys and qualitative in-depth interviews.

Status: Started in 2010
Personnel: Bryant, Ellard, Wilson, Fisher, Treloar
Collaborators: None
Funding: NSW Department of Health, Australian Government Department of Health and Ageing

Pharmacy needle and syringe survey: hepatitis C risk and access to sterile injecting equipment in pharmacies

Until recently there was very little information about people who obtain needles and syringes from pharmacies, including whether they are a different group from those who obtain needles and syringes from needle and syringe programs (NSPs). In 2006 a pilot study was conducted through eight pharmacies in southeast Sydney. In 2007 and 2008 the project was expanded to include most of metropolitan Sydney and the Newcastle and Hunter Valley regions. In 2009 the project was conducted in all regions of NSW and in Western Australia. The project findings suggest that a considerable proportion of study participants (one in five) use pharmacies exclusively to obtain injecting equipment, and that this proportion increased in suburban and regional parts of NSW. Moreover, our research found a higher incidence of receptive needle sharing and much lower rates of BBV testing and drug treatment than that typically found among respondents to other surveys where respondents are recruited from primary NSPs. This suggests the need for increased supply of sterile needles and syringes through pharmacies and better connection to BBV-related services. The study will collect ongoing periodic data at agreed intervals over the coming years.

Status: Ongoing
Personnel: Bryant, Wilson, Treloar
Collaborators: None
Funding: NSW Department of Health, WA Department of Health, Australian Government Department of Health and Ageing
Injecting practice among heterosexual hepatitis C serodiscordant couples

Available epidemiological data show that the incidence of sharing needles and other equipment is variable among Australian injecting drug users (IDUs), but most commonly occurs between sexual partners. Most data show that about half of all needle sharing occurs between sexual partners. These epidemiological data reveal the significant contribution that sexual partnerships, and the sharing of injecting equipment within those partnerships, make to the high number of new HCV infections estimated to occur in Australia annually. Although surveillance data show that rates of equipment sharing are high among sexual partners, there is very little work in Australia and internationally which addresses the sexual relationship as a site of hepatitis C transmission or prevention. This emphasises the underutilisation of the social relationship as a unit of analysis of risk behaviour. This project is one of a number addressing couples as a site of hepatitis C risk and prevention strategies. This project aimed to explore patterns of drug use and sharing of injecting equipment in heterosexual serodiscordant couples, including the influence of social networks, relationship dynamics and socio-economic issues; and explore awareness, negotiation and strategies around BBV prevention in sexual partnerships. This study interviewed NSP clients with experience of heterosexual serodiscordant (for hepatitis C) relationships. This project is a pilot study, with a full proposal under review with the NHMRC, and has also resulted in a factsheet developed for NSP workers.

Status: Ongoing
Personnel: Treloar, Brener, Bryant, Gray
Collaborators: South Eastern Sydney and Illawarra Area Health Service
Funding: South Eastern Sydney and Illawarra Area Health Service, Australian Government Department of Health and Ageing

Hepatitis C transmission and intimate injectors: The sharing of drug injecting equipment within intimate relationships

Since the hepatitis C virus (HCV) was first isolated in 1989, considerable effort has been expended in developing health education materials and programmes aimed at reducing transmission of HCV through the provision of information and encouragement of behaviour change. Health education is most effective when it is targeted to defined segments of the population and when people identify with the messages. In this context, it is important to ask whether the understandings of the social contexts and relational dynamics of needle and syringe sharing are reflected in health education materials directed towards the prevention of HCV transmission. This project addresses this question by asking who is the subject addressed and represented in health promotion materials and messages aimed at the prevention of hepatitis C transmission among injecting drug users. More specifically, if sharing of needles and syringes occurs most commonly between people in intimate sexual relationships, then are couples who inject addressed in HCV prevention materials? We explore these questions through an analysis of Australian hepatitis C health promotion print materials. This study involves preliminary work to support an NHMRC application.

Status: Completed
Personnel: Treloar
Collaborators: Monash University
Funding: The University of New South Wales, Australian Government Department of Health and Ageing
Negotiating the medical field

Studies in this priority area explore experiences of health, illness, biomedicine and clinical practice from the perspectives of both healthcare professionals and affected populations. They include surveys, evaluations and in-depth studies of the complex meanings and practices of health and medicine.

Investigating the capacity of the general practitioner workforce to meet ongoing HIV primary care needs in Australia

The number of people living with HIV in Australia is increasing and ageing, requiring an expert primary care workforce to provide sustained care into the future. Yet the numbers of general practitioners (GPs) training as HIV s100 prescribers may be insufficient to replace those planning to retire, reduce hours or change roles. The Sixth National HIV/AIDS Strategy specifically recognises the recruitment and retention difficulties for Section100 GP prescribers and clinicians with an interest in HIV. This study will provide critical and timely evidence for why and how GPs pursue or sustain a special interest in HIV medicine in different caseload and geographical settings across Australia. The study will also offer new knowledge on the role of GPs in maintaining and enhancing the health of people living with HIV. Data collection comprises in-depth interviews with ‘key informants’ holding senior roles in policy, advocacy and professional organisations that shape HIV care policy, as well as clinicians including accredited and practicing s100 prescriber GPs, ex-prescriber GPs, shared care GPs, GP nurses and other members of the HIV general practice team, and GP trainees interested in HIV medicine. An analysis will also be conducted of how general practice work is represented in strategic, medical education and consumer publications about HIV in Australia.

Status: Ongoing

Personnel: de Wit, Newman, Reynolds
Collaborators: Australasian Society for HIV Medicine, National Association of People Living with HIV/AIDS, Royal Australian College of General Practitioners, Australian Federation of AIDS Organisations, general practitioners in private practice
Funding: National Health and Medical Research Council, Australian Government Department of Health and Ageing

The impact of alcohol and drug use on the diagnosis and management of depression in gay men: a sub-study of the Primary Health Care Project on HIV and Depression

The three-year Primary Health Care Project on HIV and Depression provided preliminary insights into how depression is influenced by the social, psychological and health-related features of gay men’s lives, and how different patterns of alcohol and other drug use related to depression. Research is being conducted to more closely explore the issues associated with alcohol and drug use in data collected on depression in gay men, and develop and distribute recommendations for medical practitioners and other health professionals on how alcohol and drug use might impact on the diagnosis and management of depression in gay men. We will focus on drug and alcohol use in the quantitative and qualitative data from our original study, including a survey of gay men with depression and interviews with general practitioners and with gay men with depression.

Status: Ongoing

Personnel: Newman, Bryant, Holt, Paquette, Gray
Collaborators: National Association of People Living with HIV/AIDS, Australasian Society for HIV Medicine, ACON
Funding: beyondblue, Australian Government Department of Health and Ageing
The Straightpoz study: men and women living heterosexually with HIV

The Straightpoz study is a qualitative longitudinal cohort study of heterosexual men and women living with HIV, including seronegative partners in New South Wales. This study, the first of its kind in Australia, explores the needs and experiences of living with HIV specific to this group. With a total of 48 people participating in the study, three phases of data collection were completed between 2004 and 2009 covering a range of issues including diagnosis, identity, stigma, disclosure, health, treatments, social connectedness, contact with services, health professionals and other positive people, relationships, sexual practice, sexual health and understandings of sexual risk and transmission. The study findings have established an important basis for the development of appropriate service provision for this under-researched and hidden population in the Australian epidemic, including serodiscordant heterosexual couples, and have also contributed significantly to understandings of the intersections of sexuality, gender and illness.

Status: Ongoing
Personnel: Persson
Collaborators: Pozhet, the Heterosexual HIV/AIDS Service NSW
Funding: NSW Department of Health, Australian Government Department of Health and Ageing

Evaluation of a model for assessment and treatment of hepatitis C among injecting drug users in the opiate pharmacotherapy setting

The need to increase the number of people undertaking hepatitis C treatment has lead to an expansion of treatment access points, including the opiate pharmacotherapy clinic. This study will examine the clients and clinicians’ experiences and attitudes to the delivery of hepatitis C treatment in this setting. The component conducted by NCHSR aims to evaluate patient and provider attitudes and barriers towards the provision of services for assessment and treatment of HCV infection in the opiate substitution treatment setting, and evaluate peer-based support as a strategy for enhancing knowledge and uptake of treatment for HCV infection in the opiate pharmacotherapy setting. Interviews will be conducted with clients and staff of selected ETHOS sites (opiate pharmacotherapy clinics incorporating hepatitis C treatment access). Four sites will be included in this qualitative evaluation.

Status: Started in 2010
Personnel: Treloar, Rance
Collaborators: National Centre in HIV Epidemiology and Clinical Research
Funding: National Health and Medical Research Council, NSW Department of Health, Australian Government Department of Health and Ageing

Adjunct to ETHOS: brief questionnaire regarding hepatitis C through various opiate substitution treatment settings

The larger ETHOS project allows for a number of sub-studies to explore factors which facilitate and act as barriers to the consideration and uptake of hepatitis C care and treatment. This study seeks to examine knowledge of hepatitis C, attitudes to treatment and, specifically, attitudes to the provision of peer support during hepatitis C treatment. In 2009, a pilot study was conducted at the Sydney Medically Supervised Injecting Centre to trial a knowledge survey by use of handheld personal data assistants (PDAs). This survey was well received by participants. The findings showed significant gaps in knowledge of hepatitis C. The present study seeks to expand on the 2009 pilot study by including survey questions regarding willingness to consider or take up treatment and to expand the sample to a number of pharmacotherapy sites. Clients of these services completed a knowledge survey on a lap top computer or PDA which provided tailored feedback to participants regarding their responses to knowledge items.

Status: Started in 2010
Personnel: Treloar, Hull
Collaborators: National Centre in HIV Epidemiology and Clinical Research
Funding: National Health and Medical Research Council, NSW Department of Health, Australian Government Department of Health and Ageing
Evaluation of the GP initiation of hepatitis C treatment pilot

As a means to expand the points of access to hepatitis C treatment, general practitioners (GPs) can be certified to initiate treatment. This study examines clients’ and GPs’ experiences of treatment in the community setting. The Australasian Society for HIV Medicine (ASHM) has developed training, support and structures for a program of GP initiation of hepatitis C treatment. The pilot program will commence with a small group of GPs with subsequent GPs expected to enter the program as they reach competency in the required training program and develop linkages with tertiary liver clinics. In this study, qualitative data will be collected to examine the operations of the program on a number of dimensions. Qualitative data will be collected from various stakeholders: patients who are initiated into treatment by their GP, patients who do not take up the offer of treatment with the GP, the GP, relevant staff in the general practice (i.e. practice nurse). As such, the following questions will guide data collection: (1) what was the experience of the pilot program? (2) are there linkages between the various systems which require adjustment for future implementation of general practice prescribing of hepatitis C treatment? In addition, the study will also involve patients who declined the offer of treatment in order to explore the acceptability of treatment delivery in the general practice setting.

Status: Started in 2010
Personnel: Hopwood, Treloar
Collaborators: Australasian Society for HIV Medicine
Funding: Australasian Society for HIV Medicine, NSW Department of Health, Australian Government Department of Health and Ageing

UNSW hepatitis C vaccine initiative: knowledge of, and willingness to, participate in vaccine trials

An effective vaccine for hepatitis C is still to be developed. The UNSW Strategic Fund supported a multidisciplinary project exploring hepatitis C vaccine readiness. The challenge of ensuring interest and participation in field trials of candidate HCV vaccines and subsequent implementation should not under-estimated. This is exemplified by the fact that despite the existence of a safe and efficacious hepatitis B (HBV) vaccine, and repeated and unambiguous recommendations that injecting drug users (IDUs) be targeted, HBV immunisation coverage remains low among IDUs. Furthermore, little is known about attitudes towards immunisation, barriers to uptake, and willingness to participate in vaccine trials. Innovative strategies designed to improve access and overcome barriers to adherence are essential to improve vaccine acceptability, uptake and completion in this population. The component conducted by NCHSR involved a qualitative investigation of the knowledge of hepatitis C vaccine trials among people who inject drugs, health workers and community organisations. Analysis focused on those factors influencing the decision to take part in and support such a trial.

Status: Completed
Personnel: Treloar, Byron and McCann
Collaborators: National Centre in HIV Epidemiology and Clinical Research
Funding: The University of New South Wales, Australian Government Department of Health and Ageing

Treatment Service Users’ Project, Phase 2

The benefits of consumer participation in the health system are widely acknowledged and as result are being encouraged by Commonwealth, State and Territory governments. While consumer participation models have been developed and implemented across the health system in Australia, the drug treatment sector has lagged behind these areas in developing and implementing consumer participation. There are currently no agreed definitions and models of consumer participation in the drug treatment field. While general consumer participation models offer common features useful for the drug treatment context it is necessary to develop principles and guidelines that are specifically designed for drug treatment providers and service users. The Australian Injecting and
Our research

Illicit Drug League (AILV) and the National Centre in HIV Social Research successfully completed a research project on consumer participation in 2007: the ‘Treatment Service Users’ Phase 1 (TSU1). Key findings of TSU1 highlighted that few examples exist of consumer participation policies in the drug treatment area in Australia. This project evaluated demonstration projects in five drug treatment services in three Australian states. Qualitative interviews were conducted with consumers and staff in each service at two points in time (baseline and after implementation of the demonstration projects). The demonstration projects are aimed at implementing consumer participation projects in these services.

Status: Ongoing
Personnel: Treloar, Rance
Collaborators: Australian Injecting and Illicit Drug Users’ League
Funding: Australian Government Department of Health and Ageing

Technical review of hepatitis C health promotion resources

This study will review a catalogue of hepatitis C health promotion materials to examine the range of messages included, identify gaps and cross reference these with recommendations from social research literature. As part of an ARC-funded project, a large collection of over 200 hepatitis C health promotion materials has been collected, catalogued and housed at Monash University. This technical review of hepatitis C health promotion messages will aim to: establish what resources and messages have been produced; catalogue the type of message; catalogue the delivery format; examine any evaluation conducted of resources or messages; draw on those evaluation findings, to identify successful resources and messages to be replicated or built on and to document gaps in the existing range; and make recommendations for messages and targeting of these for particular priority groups.

Status: Started in 2010
Personnel: Treloar
Collaborators: Monash University
Funding: NSW Department of Health, Australian Government Department of Health and Ageing

Evaluation of a Hepatitis C Community Clinic Project,
Canterbury District Health Board

The aim of this evaluation is to determine the nature of the clinic client group, pathways to the clinic including analysis of barriers and facilitators to access, shared-care arrangements, and the impact of the project in participation in HCV or other treatment programs and the success of these HCV treatment programs.

Status: Ongoing
Personnel: Brener and Treloar
Collaborators: The Rodger Wright Centre, Christchurch, New Zealand; Christchurch Community Hepatitis C Clinic, New Zealand
Funding: Canterbury District Health Board, New Zealand

Explicit and implicit attitudes of mental health care workers towards people with mental illness: are they congruent and do they affect consumer perceptions and outcomes?

The study collects information on the explicit and implicit attitudes of staff at a non-government mental health service providing psychosocial support to people with mental health difficulties. Information will be collected simultaneously on clients’ perceptions of staff at the service. The aim of collecting information from both staff and clients is to assess the effect of both the explicit and implicit attitudes of staff towards the mentally ill on client perceptions and outcomes.

Status: Started in 2010
Personnel: Brener
Collaborators: Aftercare, School of Psychology (University of Queensland)
Funding: Aftercare
Exploring cultural, social and political dynamics

Studies in this priority area focus on the diverse contexts in which health and risk are enacted. They explore the ways in which cultural difference, gender and sexuality, stigma and discrimination, and political and economic dynamics shape sexual practices, illicit drug use and experiences of living with blood-borne viruses.

HIV-positive people from culturally and linguistically diverse backgrounds: negotiating the intersections of migration, culture, gender and sexuality

For HIV-positive people from culturally and linguistically diverse (CALD) backgrounds the experience of living with HIV, including access to health and social services, is inextricably linked to migration, gender and sexuality. Using a purposeful sample of HIV-positive women, gay and heterosexual men from CALD backgrounds and in-depth qualitative interviews, this study explores how these aspects interact in shaping the lives of these men and women. In identifying how these contingencies are interwoven, the study will provide insights into the specific social needs of HIV-positive people from CALD backgrounds.

Status: Ongoing
Personnel: Körner
Collaborators: NSW Multicultural HIV/AIDS and Hepatitis C Service
Funding: Faculty of Arts and Social Sciences (The University of New South Wales), Australian Government Department of Health and Ageing

Thai gay men and HIV risk in Sydney

This study explores how Thai gay men in Sydney perceive and experience HIV risk, and how they manage this risk in their lives as men who are an ethnic minority within the predominantly Anglo-Australian gay community. More specifically, this project will explore how Thai gay men in Sydney engage with the gay communities in Sydney and in Thailand, their perceptions and attitudes towards HIV risk, the ways in which they prioritise risk in relation to other aspects of their lives as members of an ethnic community, and the ways in which they negotiate and manage risk in sexual encounters with other men.

Status: Ongoing
Personnel: Körner
Collaborators: National Centre in HIV Epidemiology and Clinical Research
Funding: NSW Department of Health, Australian Government Department of Health and Ageing

Qualitative analysis of 2010 UNGASS Country Progress Reports

NCHSR was commissioned by UNAIDS to undertake a qualitative analysis of the 2010 UNGASS Country Process Reports and to abstract additional indicators of HIV-related needs and responses from the reports. The qualitative analysis focused on 11 overarching themes reflecting the main priority areas of the Declaration of Commitment, as well as the linkage of the HIV response to the global development agenda and the impact of the contemporary global financial and economic crisis. Data pertaining to the analytic themes and subthemes were extracted from the country reports and a comprehensive database was produced enabling identification of commonalities and exceptions per subtheme across countries in a region. Data were synthesised in a set of regional analyses and compiled in a comprehensive report that informed the 2010 UNAIDS Report on the Global AIDS Epidemic.

Status: Started and completed in 2010
Personnel: de Wit, Ellard, Holt, Newman, Persson, Adam
Collaborators: National Drug and Alcohol Research Centre
Funding: UNAIDS
Sexual and reproductive health and rights of young people in Pakistan

The purpose of this research was to assess the current situation in Pakistan with regard to the realisation of young people’s sexual and reproductive health and rights, and to use the findings to influence positive change through programmatic interventions and policy advocacy initiatives. Both quantitative and qualitative methods of research were used, comprising a web-based survey of key informants, as well as focus group discussions and in-depth interviews with various groups of stakeholders. A review of previously published national and international research was also conducted. The findings will provide a basis on which WPF Pakistan and other organisations including government agencies will be able to build advocacy strategies and programmatic interventions in the education and health sectors to make them more youth and rights friendly.

Status: Completed
Personnel: de Wit
Collaborators: World Population Foundation
Funding: In-kind support from project partner

Speak up now! A study on unwanted sexual experiences and behaviours among young people in The Netherlands

Numerous epidemiological studies show that experiences of sexual coercion are highly prevalent among young people including those in The Netherlands. These sexually coercive experiences are highly diverse and affect young women as well as young men, albeit presumably to different extents. Coercive sexual experiences can have substantial negative impact on the well-being of those affected and it is critical to promote effective prevention and appropriate support; however, available research provides only limited guidance for the development and implementation of adequate prevention and support programs. Building on the wealth of prevalence studies, the aim of this study is to contribute comprehensive understanding of the diversity of coercive sexual experiences and behaviours of young people, from their perspectives. This study also assesses a wide range of individual and social risk and resilience factors. In addition to a cross-sectional assessment, this study is unique by including a prospective follow-up to assess incident-coercive sexual experiences and more confidently establish associations between experiences and risk and resilience factors.

Status: Ongoing
Personnel: de Wit, Adam
Collaborators: Social Psychology Unit (Utrecht University, The Netherlands), Rutgers WPF (The Netherlands)
Funding: Netherlands Organisation for Health Research and Development

Young people’s positive sexual experiences

Sexual health is more than the absence of sexual coercion, unintended pregnancy, sexually transmissible infections and other sexual and reproductive health problems. Nevertheless, research into positive aspects of sexuality remains scarce and understanding of what young people consider positive sexual experiences is limited. Moreover, many potentially pleasurable sexual experiences, such as having sex with a casual partner, are typically seen as risky behaviours. In this study we draw on data previously collected in the ‘Speak up now!’ study of coercive sexual experiences and behaviours of young people in The Netherlands. Using secondary analyses, we assess risk and resilience factors related to sexual practices that are typically seen as ‘risky’ including having one-night-stands, engaging in threesomes and having sex over the internet. In particular, we assess whether young people who report these practices can be classified as vulnerable, as is often done, or as resilient and actively exploring their sexuality. In addition, we draw on young people’s narrative responses to explore what, and why, they consider their most positive sexual experiences.

Status: Ongoing
Personnel: de Wit
Collaborators: Social Psychology Unit (Utrecht University, The Netherlands), Rutgers WPF (The Netherlands)
Funding: Netherlands Organisation for Health Research and Development
Barometer survey of HIV-related stigma and discrimination

HIV stigma research illustrates the negative experiences of people living with HIV (PLHIV) and the contexts in which these occur. However, studies of stigma experienced by PLHIV are usually not directly comparable with research exploring stigma expressed by HIV-negative or HIV status-unknown people. To bring together these separate literatures and to provide a comprehensive assessment of the different dimensions of HIV-related stigma we conducted an anonymous online survey that directly compared responses of people living and not living with HIV. From 1 December 2009 to 31 January 2010 this HIV Stigma Barometer Survey recruited 1,260 gay men who were HIV-positive (17%), HIV-negative (72.6%) and of unknown HIV status (10.4%). Men answered questions regarding stigma-related attributions, negative feelings, acts of social distance, and sexual exclusion that they either experienced (HIV-positive men) or expressed (HIV-negative and HIV status-unknown men). Findings illustrate that the stigma experienced by HIV-positive men was highly comparable to the stigma expressed by HIV-negative and status unknown men and show that HIV-related stigma in gay men in Australia is most tangible in the sexual domain. This serostatus-based sexual divide in the gay community may be exacerbated by the adoption of some serostatus-based risk reduction strategies.

Status: Started in 2010
Personnel: de Wit, Murphy, Adam
Collaborators: Australian Federation of AIDS Organisations
Funding: In-kind support from project partner, Australian Government Department of Health and Ageing

NAPWA Stigma Audit: Online survey of PLHIV

Despite over twenty years of effort to combat stigma, PLHIV continue to report its existence. Stigma, however, is not an homogenous experience nor are its effects evenly distributed or universally felt. This study set out to document the range of experiences associated with HIV stigma and develop an accurate understanding of its social and psychological effects. It also sought to understand what characteristics enable some PLHIV to be resilient to stigma through an online survey and qualitative interviews of PLHIV. The survey instrument consisted of standardised measures of HIV stigma, depression, anxiety, stress, resilience, quality of life and self esteem. Interviews covered instances in which stigma occurs, its effects, and strategies for coping. In the past, efforts to combat stigma have been targeted primarily at those who stigmatise. The findings from this study suggest a number of strategies that start with those who are experiencing stigma and include strategies for building self esteem and resilience which are likely to be more effective and durable because they are realistically focussed on achievable change within a defined population.

Status: Started in 2010
Personnel: de Wit, Brener, Ellard, Callander
Collaborators: Australian Federation of AIDS Organisations
Funding: National Association of People Living with HIV/AIDS, Australian Government Department of Health and Ageing

How effective are positive speakers in changing attitudes: views of speakers and audience members

This study seeks to explore whether a speaker-based program has the potential to change attitudes towards people with hepatitis C. The program provides an opportunity for people living with hepatitis C to speak with community groups and health service providers about their lives and experiences. By conducting interviews with audience members and speakers, it is hoped to gain a better understanding of the effectiveness of positive speakers in reducing stigma and discrimination towards hepatitis C.

Status: Started in 2010,
Personnel: Brener, de Wit, Wilson
Collaborators: Hepatitis NSW
Funding: Hepatitis NSW, Australian Government Department of Health and Ageing
HIV and HCV discrimination, particularly in healthcare settings

The aim of this study is to review the Australian and international peer reviewed and grey literature on stigma and discrimination in relation to hepatitis C and HIV, with a specific focus on patient experiences in the health care sector. Based on the literature review and stakeholder interviews, recommendations will be developed for interventions to attempt to break the cycle of experiences of HIV/hepatitis C-related stigma and discrimination within the healthcare sector.

Status: Started in 2010,
Personnel: Brener, de Wit, Ellard, Horwitz, Callander
Collaborators: Australasian Society for HIV Medicine
Funding: Australasian Society for HIV Medicine, Australian Government Department of Health and Ageing

Under construction: the social and cultural politics of hepatitis C in Australia

Hepatitis C was relatively recently identified and social, clinical and other knowledge continues to evolve. This project aims to investigate the ways in which hepatitis C is being constituted as a disease medically, socially and culturally in Australia in order to develop insights into how it might be confronted both medically and socially without further stigmatising those affected by it. It involved interviews with people living with hepatitis C and analysis of a number of texts such as self-help monographs and reviews in medical journals.

Status: Completed
Personnel: Treloar
Collaborators: Monash University, Curtin University of Technology
Funding: Australian Research Council, Australian Government Department of Health and Ageing

Hepatitis C seroconversion: using qualitative research to enhance surveillance

This study is designed to improve the existing surveillance and contribute to prevention of hepatitis C in NSW by improving mechanisms for identifying cases of newly-diagnosed hepatitis C infection (seroconversions) and conducting a targeted qualitative study of seroconverters. In partnership with NCHECR, NCHSR conducted the qualitative phase of this project. The aim was to explore the circumstances around the acquisition of hepatitis C among people who inject drugs. This qualitative interview study involved interviews with people who had recently confirmed hepatitis C infection. The larger project included a component to inform the development of an HCV seroconversion surveillance mechanism. The interviews explored the participants’ experiences of both acquisition and diagnosis of hepatitis C. In relation to exposure to the hepatitis C virus, participants were asked to reflect on what they considered had led to exposure to the hepatitis C virus, including the micro practices (such as sharing of equipment) as well as social networks and physical environments.

Status: Ongoing
Personnel: Treloar, Harris, Newland
Collaborators: National Centre in HIV Epidemiology and Clinical Research
Funding: NSW Department of Health, Australian Government Department of Health and Ageing

Staying safe: how do long-term injecting drug users avoid hepatitis C infection?

Although the prevalence of hepatitis C is high among people who inject drugs, some people have injected for a long time but managed to avoid hepatitis C (HCV) infection. This project aims to use a life history approach to understand the factors which differentiate those long-term injectors who have not acquired HCV with those who have in order to inform prevention strategies. This project seeks to discover how some IDUs have managed to avoid becoming infected with HCV in spite of having injected drugs for many years in localities in which most IDUs have acquired HCV.
Comparisons of IDUs who have been exposed to HCV and those who have not over the long term (i.e. those who have “stayed safe”) will generate hypotheses about prevention which will be explored in future research. This project is unique in that the traditional focus on people who have acquired infection as “cases” is reversed so that those who remain unexposed to HCV over the long term are the focus of enquiry. Two interviews were conducted with participants. After the first interview, Time Line Maker software was used to create an additional more detailed visual representation of the subject's life history. We compared visual representations of different subjects during the analysis with the aim of revealing interrelationships between life events, risk avoidance patterns, network support, drug use patterns and other issues.

Status: Ongoing
Personnel: Treloar, Rance
Collaborators: National Centre in HIV Epidemiology and Clinical Research
Funding: Faculty of Arts and Social Sciences (The University of New South Wales), Australian Government Department of Health and Ageing

The real deal in hepatitis C prevention: automatic influences on injecting behaviour

Blood awareness messages have been used for some years in hepatitis C prevention efforts. However, hepatitis C prevention education has achieved only limited success. Innovative means of reaching people who inject drugs are required. The innovative methodology of phase 1 of this study involved video footage taken of clients at the Medically Supervised Injecting Centre and subsequent interviews with participants. Phase 1 produced findings and resources that can be used to develop innovative education blood-borne virus prevention messages for people who inject drugs. The second and current phase of this project aims to develop effective hepatitis C prevention messages as well as provide data for the development of a peer education model for blood-borne virus prevention among people who inject drugs. The second phase of this project involved people who inject drugs developing, trialling and providing feedback on peer education messages and strategies. This phase was conducted in three sites and involved participants in a series of three focus group discussions.

Status: Ongoing
Personnel: Treloar, Rance
Collaborators: NSW Users and AIDS Association
Funding: NSW Department of Health, Australian Government Department of Health and Ageing

MHAHS Egyptian community viral hepatitis project

Egypt is the country which reports the highest prevalence of HCV worldwide, ranging from 6% to more than 40% in some regions. HCV is predominantly associated with injecting drug users in the developed world, but in developing countries inadequately sterilised medical equipment has been associated with HCV transmission. People of Egyptian origin are at high risk of both having and transmitting hepatitis C. This research will assess the knowledge of and attitudes towards hepatitis C among a sample of Egyptian-born Australians.

Status: Completed
Personnel: Horwitz, Brener, Treloar
Collaborators: NSW Multicultural HIV/AIDS and Hepatitis C Service
Funding: NSW Multicultural HIV/AIDS and Hepatitis C Service, Australian Government Department of Health and Ageing

Aboriginal Patterns of Cancer Care

Like most other health and social conditions, the experiences and outcomes of Aboriginal people diagnosed with cancer are much worse than non-Aboriginal Australians. Cancer is a relatively new health concern for Aboriginal Australians. In collaboration with the Cancer Council of New South Wales and Sydney University, the APOCC project has aimed to explore the patient journey for Aboriginal people with cancer in NSW. NCHSR has conducted the qualitative
component of this large study involving interviews with Aboriginal people living with cancer, their carers and healthcare workers experienced in caring for Aboriginal people with cancer. Besides the contribution NCHSR has made in understanding the experience of Aboriginal people as a group marginalised from mainstream society, this project has also allowed the development of a collaborative research model.

Status: Ongoing
Personnel: Brener, Newman, Saunders, Johnson, Jackson, Treloar
Collaborators: Cancer Council of NSW, The University of Sydney
Funding: National Health and Medical Research Council

Making a difference: building research capacity for health interventions to improve Aboriginal health

This is a capacity building program for indigenous and non-indigenous researchers led by a similar team of chief investigators. At NCHSR, this capacity building will be carried out in conjunction with the Aboriginal Patterns of Cancer Care project, which is run by Cancer Council New South Wales, NCHSR and researchers from The University of Sydney. This program has also allowed NCHSR to further develop our approach to research with Aboriginal people, communities and services. This capacity building work is essential for NCHSR to build appropriate skills and networks in Aboriginal health research. Of particular importance is the consolidation of the research method developed in the Aboriginal Patterns of Cancer Care Project and exploring the application of this method in other projects in the blood-borne virus and sexual health sectors.

Status: Ongoing
Personnel: Treloar, Brener
Collaborators: The Sax Institute, The University of Sydney
Funding: National Health and Medical Research Council, Australian Government Department of Health and Ageing
The National Centre in HIV Social Research offers a postgraduate program in Health, Sexuality and Culture. The program is guided by a social science paradigm that understands persons and communities as social beings. It is designed to provide the empirical skills necessary to participate in the global fields of sex and drug research, and to equip students with an understanding of critical debates in social theories of sex, drugs and the politics of health and medicine. It is this mix of practical empirical skills and critical inquiry that makes the Health, Sexuality and Culture program unique.
Health, sexuality and culture program

The Health, Sexuality and Culture Program at NCHSR offers PhD, Masters by Research and Graduate Diploma programs.

In 2010, 13 students were enrolled. Of these, nine students were enrolled as PhD candidates, three were enrolled in the Masters by Research Program and one was enrolled in the Graduate Diploma.

Our program has links with other programs in the Faculty of Arts and Social Sciences, as well as in the School of Public Health and Community Medicine, the National Centre in HIV Epidemiology and Clinical Research, and the College of Fine Arts, all at the University of New South Wales.

In 2010 two students were awarded a PhD:

Justin McNab, Negotiating HIV prevention: The Talk, Test, Trust Story and beyond. This research project examined two very different safe sex campaigns launched by AIDS Councils in Australia and New Zealand in the mid-nineties aimed at increasing safer sexual practices in gay communities, particularly within gay men’s primary relationships. This qualitative research project compared these campaigns and situated them within the wider context of social and public health policy.

Supervisors: Associate Professor Robert Reynolds (NCHSR and Macquarie University) and Associate Professor Heather Worth (School of Public Health and Community Medicine)

Magdalena Harris, Negotiating the pull of the normal: embodied narratives of living with hepatitis C in New Zealand and Australia.

This qualitative research project compared the lived experiences of people with hepatitis C in Auckland and Sydney, focusing on issues of social support, stigma, disclosure and treatment options.

Supervisors: Professor Carla Treloar (NCHSR) and Dr Asha Persson (NCHSR)

In 2010 one student was awarded a Masters:

Jan Mietinen, Talk about sex? How HIV-positive gay men talk about sexual health with their doctors and healthcare providers.

This qualitative study investigated the communication between HIV-positive gay men and their doctors and other healthcare providers about sexual health. The study focussed on the HIV-positive men’s needs, expectations and experiences in relation to how sexual health is addressed in clinical consultations.

Supervisors: Dr Henrike Körner (NCHSR) and Dr Martin Holt (NCHSR)

Postgraduate student projects

Discourse and practice of young people’s sexual health

Paul Byron (PhD)

Through analysis of health promotion websites, health research papers and interviews with young people aged from 18 to 25 years, this project reviews a contemporary Australian discourse of young people’s sexual health. Complex sex/health practices found in this data raise important questions about current public health frameworks of risk, knowledge, and ‘safe sex’.

Supervisors: Dr Jeanne Ellard (NCHSR) and Associate Professor Vicki Kirby (School of Social Sciences and International Studies)
Exploring online sexual racism and its relationship to the sexual practices of men who have sex with men

**Denton Callander (Masters)**

This research project will explore the phenomenon of sexual racism online and its relationship to the sexual practices of men who have sex with men. Sexual racism is the application of preconceived ideas about an individual or group of people based on their ethnicity in the romantic and sexual arenas of one’s life. Past research has identified this as being more prevalent online and among men who have sex with men. Additionally, it has been suggested that experiences of racial discrimination faced by men have an effect on their safer sexual practices. Through a mixed-methodological approach this research hopes to better understand, explore, and describe online sexual racism, its effects, and make recommendations to Internet use policy.

Supervisors: Dr Christy Newman and Dr Martin Holt (NCHSR)

'ACON(ic) Images'

**Trevor Dougherty (Masters)**

This research project will investigate how image has been used in The AIDS Council of New South Wales HIV-prevention campaigns. In particular it will ask what influence does post-colonial culture have on imagery utilised in HIV prevention campaigns targeted at gay men? What is the symbolism and meaning of this imagery? Have these images challenged, redefined or reinforced the iconic images and mythology of postcolonial Australia? By asking these questions, the thesis will contribute to knowledge about both the changing place of gay men and women within broader Australian society, and the place of multiculturalism in the changing visual representations of gay community since the beginning of the HIV epidemic.

Supervisors: Dr Christy Newman (NCHSR) and Dr Leong Chan (College of Fine Arts)

An investigation of information needs and information-seeking practices of people with hepatitis C

**Maude Francis (PhD)**

The mixed methods study aims to understand how people with hepatitis C use the internet to access and share health-related information. Drawing on theories and methods from sociology and information studies, findings from the study are intended to inform provision of online information services for this group.

Supervisors Professor Carla Treloar (NCHSR) and Dr Joanne Bryant (NCHSR)

Barriers to hepatitis C treatment among Vietnamese people in south western Sydney

**Melissa Fraser (Masters)**

Using semi-structured, in-depth interviews, this project aims to better understand the views of Vietnamese people with hepatitis C in south western Sydney on hepatitis C treatments and healthcare delivery. It explores experiences as migrants with their healthcare providers, their relationships with family and the Vietnamese community.

Supervisors: Professor Carla Treloar and Dr Henrike Körner (NCHSR)

The dynamics of shame: implications for counsellors who work in alcohol and other drug settings

**Rebecca Gray (PhD)**

This project aims to explore the relationship between counsellor and client, and how this therapeutic dynamic is affected by shame and stigma. The research will
draw from textual and interview data to examine how counselling is impacted by problematic drug use, the identity of the 'addict', treatment models and setting.

Supervisors: Dr Kylie Valentine (Social Policy Research Centre) and Dr Christy Newman (NCHSR)

Sexuality and nightlife in Sydney: the experiences of same-sex attracted young people

_Toby Lea (PhD)_

This project explores the relationships between sexuality, the commercial gay/lesbian/queer scene of bars and clubs, and alcohol and other drug use among same-sex attracted young people in Sydney. The study utilises an exploratory, mixed methods design comprising in-depth interviews and an online survey.

Supervisors: Professor John de Wit (NCHSR) and Associate Professor Robert Reynolds (Macquarie University)

HIV, sex work and China’s human rights

_Jinmei Meng (PhD)_

This study aims to explore the decriminalisation of sex work in China in the context of human rights protection and HIV prevention. It examines the impact of China’s anti-prostitution law on human rights and HIV prevention, and recommends that for China the decriminalisation of sex work is a potential national strategy for ensuring human rights and advancing HIV prevention.

Supervisors: Dr Henrike Körner (NCHSR) and Professor Daniel Tarantola (The UNSW Initiative for Health and Human Rights)

Contract surrogacy, kinship practices and gay men

_Dean Murphy (PhD)_

This project explores how contract surrogacy influences (and is influenced by) understandings of kinship. In particular, the project examines the repertoires of nature, biogenetics, value and choice. Data comprises interviews with gay men in Australia and the United States, online advertisements, print media, popular culture, and policy documents.

Supervisors: Dr Suzanne Fraser (Monash University) and Dr Asha Persson (NCHSR)

The role of social networks in hepatitis C harm reduction

_Jamee Newland (PhD)_

This qualitative research project aims to explore the impact of social networks on hepatitis C harm reduction among people who inject drugs. It focuses on issues of social relationships, peer education, secondary syringe exchange, environmental and structural factors and how these issues positively or negatively affect hepatitis C risk and transmission.

Supervisors: Associate Professor Carla Treloar (NCHSR) and Professor Ralph Hall (School of Social Sciences and International Studies)

The role of respondent-driven sampling in the behavioural surveillance of people who inject drugs

_Dana Paquette (PhD)_

This study will examine the feasibility of conducting a respondent-driven sampling (RDS) survey in south east Sydney, describe who gets captured by an RDS survey, and determine whether the information on social networks gathered in such a
survey can contribute to the understanding of blood-borne-virus-associated risk behaviour in this population. Funding to conduct this survey was received from the South Eastern Sydney and Illawarra Area Health Service.

Supervisors: Professor John de Wit (NCHSR) and Dr Joanne Bryant (NCHSR)

Hepatitis C and identity: exploring identity formations among people who engage with a hepatitis C third-sector organisation  

**Paul Simpson (PhD)**

This thesis explores identity formations among people affected by hepatitis C who engage with a hepatitis C third-sector organisation. This study employs qualitative research methods and draws upon narrative identity and culture governance frameworks to contribute to new understandings of third-sector organisations and hepatitis C identities.

Supervisors: Professor Carla Treloar (NCHSR) and Dr Kylie Valentine (SPRC)

Drugs and Love: The role of women who inject drugs within heterosexual relationships  

**Maureen Steele (Graduate Diploma)**

The thesis examines women’s role in heterosexual relationships where both partners inject drugs. The study uses a qualitative strategy and in-depth interviews to collect data from eleven women.

Supervisors: Dr Max Hopwood (NCHSR) and Dr Kylie Valentine (SPRC)

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**Exchange students**

Since 2004, NCHSR has hosted placement students from Bath University in the third year of their undergraduate degree. The students have been engaged in NCHSR projects as well as developing work for their Honours thesis which they complete upon their return to Bath. In 2010 this previously highly productive program was affected by the global economic situation and no students were able to visit NCHSR; we hope to continue this program with Bath in the future. Since 2008, NCHSR has also hosted postgraduate students from Utrecht University. As part of this very active exchange program, each year a number of students from Utrecht University work with NCHSR staff to conduct research for their theses which they write as part of their MSc(Psych) program. Increasingly, NCHSR is also hosting overseas PhD students who spend time at the centre to work with staff. In 2010 the following students visited our Centre:

**Session 1**

Jorlijn Hermans, Utrecht University (MSc Psychology)  
Lisa van Reemst, Utrecht University (MSc Psychology)  
Lisette Kuyper, Rutgers Nisso Group and Utrecht University (PhD Psychology)

**Session 2**

Chantal den Daas, Utrecht University (PhD Psychology)  
Mario Keer, University of Amsterdam (PhD Communication Science)  
Merel Ophoff, Utrecht University (MSc Psychology)  
Sarit Geertjes, Utrecht University (MSc Psychology)
Engagement and impact

NCHSR is committed to significantly contributing to practice by working in partnership with community organisations, government and other research organisations. Our work supports the development of policies and programs through conducting workshops, seminars and presentations; providing research feedback, policy and program advice and access to resources; and acting as members of government, community and academic committees and boards.
NCHSR Consortium

In 2010, the NCHSR Consortium was established to continue the successful program of workshops previously conducted by The Consortium for Social and Policy Research on HIV, Hepatitis C and Related Diseases whose funding ceased at the end of 2009.

NCHSR Consortium members include the National Centre in HIV Social Research and the Social Policy Research Centre, both at The University of New South Wales, ACON, Positive Life NSW, Hepatitis NSW, Multicultural HIV/AIDS Hepatitis C Service, the NSW Users and AIDS Association, the NSW Health Workforce Development Program now situated at the Australasian Society for HIV Medicine and the Aboriginal Health and Medical Research Council. The Consortium Board also includes representatives of the AIDS and Infectious Diseases Branch of NSW Health. The Consortium workshops, of which three were conducted in 2010, aim to

- assess the research needs of the HIV, hepatitis C and related diseases sector
- investigate new and innovative research methods, and
- provide non-researchers with the opportunity to learn basic research methods.

In 2010 three workshops were conducted; details appear below.

Workshops

Doing time: BBV health research, practice and possibilities for improved outcomes for people in the NSW prison population
Sponsored by South Eastern Sydney and Illawarra Area Health Service

Guest speakers were: Robert Barco, Member, Board of Governance, Hepatitis NSW; Alison Churchill, Community Restorative Centre (CRC); Jenny Douglas, Sexual Health/Hepatitis C, Population Health Team, Justice Health; Mark Gerasimatos, C-een and Heard speaker, Hepatitis NSW; Luke Grant, Offender Services and Programs, Corrective Services NSW; Maureen Hanly, Clinical and Nursing Services, Justice Health; Sue Henry Edwards, Alcohol and Drugs and Health Promotion, Corrective Services NSW; Professor Andrew Lloyd, Department of Pathology, School of Medical Sciences, The University of New South Wales; Stuart Loveday, Hepatitis NSW; Denise Monkley, Population Health, Justice Health; Annette Slater, Population Health Unit, Hunter New England Area Health Service. The facilitator was Norman Booker, an independent consultant working in the fields of planning and evaluation, change management, facilitation and professional learning.

Exploring recovery from heroin dependency
Sponsored by ASHM

The keynote speaker was Jo Neale, Professor of Public Health, Oxford Brookes University, Oxford, UK; and panellists were: Sione Crawford, NUAA; Ian Flaherty, Sydney Medically Supervised Injecting Centre, (MSIC); Josette Freeman, SMART Recovery; Jennifer Holmes, MSIC; Garth Popple, We Help Ourselves, Jeffrey Wegener, NUAA. The facilitator was Norman Booker, an independent consultant.

The culture of prevention: hepatitis C among people from culturally and linguistically diverse backgrounds
Sponsored by MHAHS

Keynote speakers were: Dr Peter Higgs, National Centre in HIV Epidemiology and Clinical Research, the University of New South Wales; Professor Lisa Maher, National Centre in HIV Epidemiology and Clinical Research, the University of New South Wales; Dr Naomi Ngo, Multicultural Health and Support Service. Panellists were Carla Calvete, Harm Reduction Program, SSWAHS; Sione Crawford, NUAA; Gary Gahan, HIV/AIDS & Related Programs Unit, SESIAHS; Tadhg McMahon, MHAHS; Kylie Tattersall, Sex Workers Outreach Program, ACON; Thanh Van Nguyen, Drug and Alcohol Multicultural Education Centre.
Internships

The Consortium internships aim to provide employees working within the HIV, hepatitis C and related diseases sector, in either non-government organisations or area health services, with the opportunity to learn how research is conducted and how they can be involved in research in the future. The academics involved in this program also benefit by gaining insight into the front line of HIV and hepatitis C prevention and treatment programs. The internship program allows an intern to work within either NCHSR or SPRC and is a vital component of the Consortium’s attempt to build research capacity within the sector.

Monique McEwan from the Aboriginal Health and Medical Research Council undertook a Consortium internship at NCHSR. Whilst at NCHSR she acquired skills in conducting literature searches and compiling literature reviews, and assisted in the preparation of an ethics application. She subsequently submitted an application for review by the AH&MRC ethics committee in November 2009 and completed her internship in 2010. Whilst at NCHSR, she focused on a secondary analysis of data stemming from the NCHSR Pharmacy Fitpack Study and presented her findings at the ANEX conference in October 2010. Dana Paquette (NCHSR) was Monique’s tutor and Dr Joanne Bryant (NCHSR) was her academic mentor.

Scholarships

Consortium scholarships were available to students of the Graduate Diploma, Masters by Research and PhD courses offered by NCHSR in health, sexuality and culture. A condition of funding was that the projects supported by these scholarships were based in New South Wales or of benefit to the population of New South Wales.

In 2010 the Consortium continued to support PhD students Paul Byron (upgraded from Masters), Rebecca Gray (upgraded from Masters), Toby Lea and Ather Pervaiz.

The NCHSR Clearinghouse

The NCHSR Clearinghouse, a searchable web-based database initially funded by the former NSW Consortium for Social and Policy Research on HIV, Hepatitis C and Related Diseases, was launched in February 2005. It provides links and access to Australian resources and documents that support research, policy and practice relating to HIV/AIDS, hepatitis C and illicit drug use. Clearinghouse records include research articles and reports, conference presentations, policy documents, theses, media releases and community media articles. As a central point of access to material housed in university, government, community and other locations, the Clearinghouse is intended to facilitate resource sharing across the sector and enhance understanding of the necessary links between research, policy and practice.

The Australian Database on HIV and hepatitis C was created in 2008, with the aim of linking policy, cultural material and social research. The purpose of the Database is to collect, store and preserve research data and materials, policy documents, and cultural materials derived from research findings and policy implementation in areas of HIV and hepatitis C and to construct a relational database which allows the alignment of material from particular research projects (data sets, surveys and questionnaires) with related research outputs (publications and conference papers) and policy, media and health promotion materials. The Database includes research materials from national centres in HIV and hepatitis research, policy documents from government and non-government bodies and will make these materials accessible to researchers and research students in Australia and the region.

In a joint project with the University of New South Wales Library, content from the Clearinghouse and the Database was combined and migrated to a more sustainable repository system that was launched in 2010. This extended NCHSR Clearinghouse is accessible through the NCHSR website.
Research seminar series

In 2010 NCHSR hosted a series of research seminars where NCHSR staff, postgraduate students and other stakeholders shared their work with academics, both from within and outside the Centre. The research seminars were also attended by a range of professionals who work with people affected by HIV, viral hepatitis and illicit drugs.

9 February  
Is point of access related to syringe sharing? Findings from the pharmacy NSP survey  
Dr Joanne Bryant

9 March  
Hepatitis C, social determinants, social exclusion and health promotion  
Associate Professor Carla Treloar

13 April  
What are those orange things? A demonstration of NCHSR's new computerised data collection tools  
Mr Peter Hull

27 May  
Working towards the best sex with the least harm: Recent developments in HIV prevention with gay men in England  
Mr Ford Hickson (Public)

15 June  
Discovery: Medical epistemologies of hepatitis C  
Dr Suzanne Fraser (Public)

13 July  
Contemporary priorities in HIV clinical care: Key informant interviews in the HIV general practice workforce project  
Dr Christy Newman

12 October  
Innovative HIV prevention: From education to self-regulation  
Professor John de Wit (Public)

23 November  
Routine body care amongst heroin users  
Professor Jo Neale

14 December  
Indigenous peoples and HIV in Australia, Canada and New Zealand  
Dr Clive Aspin

Social research briefs

These are a series of short four-page briefing documents that provide regular and timely dissemination of social and public health research into HIV, hepatitis C and related diseases that is of current concern to decision makers, service providers and educators in the field. The briefs also disseminate findings from evaluations of innovative programs and models of best practice. They provide readers with links to new reports, fact sheets and journal articles as well as to relevant websites and internet databases.

Four social research briefs were produced in 2010:

- Hepatitis C and the Aboriginal population,
- Chlamydia and young people,
- Mental illness and HIV, and
- The sexual health of sex workers: no bad whores, just bad laws.
The Critical HIV/AIDS Research Initiative

Staff at five leading international universities have joined forces to create CHARI, the Critical HIV/AIDS Research Initiative. This international collaboration brings together the combined resources of:

- Centre for the Study of AIDS, University of Pretoria, South Africa
- HIV Social, Behavioural and Epidemiological Studies Unit, University of Toronto, Canada
- National Centre in HIV Social Research, University of New South Wales, Australia
- Nucleus for the Study of AIDS, University of São Paulo, Brazil
- School of Education and Social Work, University of Sussex, United Kingdom
- Social Policy Research Centre, University of New South Wales, Australia

Drawing upon a common set of understandings, work within each of the centres is generating better understanding of the epidemic, and contributing to improvements in HIV/AIDS prevention, impact mitigation and care.

Consultatively and collaboratively, the CHARI initiative seeks to promote:

- Innovative thinking about the epidemic, its course and development
- New research paradigms and perspectives
- Recognition of the importance of relationships, culture and the social structure as drivers of risk and vulnerability
- New thinking about gender and sexuality as they relate to HIV and AIDS
- Innovation and integration within the field of sexual health
- Social theory of relevance to HIV prevention and HIV/AIDS care

CHARI has created a strong platform for exchange, discussion and collaboration that is supported by an annual meeting. Members engage in a wide range of activities. Recently CHARI members edited a special issue of Health Education Research on HIV to appear in the first half of 2011.

Editorial contributions

NCHSR staff in 2010 contributed to scholarly publications as editors, guest editors and members of the editorial board of a range of peer-reviewed journals. In addition, staff acted as peer reviewers for a large number of prestigious journals, conferences and funding bodies.

Boards

AIDS (John de Wit)
AIDS and Behavior (Limin Mao)
AIDS Care (John de Wit, Limin Mao)
Contemporary Drug Problems (Joanne Bryant, Max Hopwood, Loren Brener; Guest Editors)
Health Education Research (John de Wit, Guest Editor)
International Journal of Drug Policy (Carla Treloar)
Sexual Health (John Imrie, Joint Editor)
Sexually Transmitted Infections (John Imrie, Associate Editor)
The Open Ethics Journal (Henrike Körner)
The Open Health Services & Policy Journal (Henrike Körner)
Peer reviewing for journals

Addiction
AIDS
AIDS and Behavior
AIDS Care
Archives of Women’s Mental Health
Australian Family Physician
Canadian Review of Sociology
Contemporary Drug Problems
Croatian Medical Journal
Culture
Culture, Health & Sexuality
Drug and Alcohol Dependence
Drugs: Education Prevention and Policy
Health Education Research
Health Promotion Journal of Australia
HIV Medicine
International Journal of Drug Policy
International Journal of STD and AIDS
Journal of Acquired Immune Deficiency Syndromes
Journal of Adolescent Health
Journal of AIDS and HIV Research
Journal of Behavioral Medicine
Journal of Community and Applied Social Psychology
Journal of Homosexuality
Journal of Psychosomatic Research
Journal of the International AIDS Society
Medical Anthropology
Nederlands Tijdschrift voor Geneeskunde
NSW Public Health Bulletin
Psychology and Health
Qualitative Health Research
Sexual Health
Sexually Transmitted Infections
Social Science & Medicine
Sociology of Health & Illness
The Open Health Services & Policy Journal

Reviewing other than for journals

Staff at NCHSR have also reviewed grant applications, conference abstracts, strategy documents and other materials for:

7th Australasian Viral Hepatitis Conference
XVIII International AIDS Conference
21st International Harm Reduction Conference
22nd Australasian HIV/AIDS Conference
AIDS Fonds Netherlands
Australian Research Council Projects Grant Round
Canadian Public Health Association 2010 Annual Conference
Creative and Novel Ideas in HIV Research, United States
  Award Program
    Developmental Grant Program
Economic and Social Research Council, United Kingdom
Social Research Conference on HIV, Hepatitis C and Related Diseases
The Australian Sociology Association Annual Conference
Engagement and impact

Committee membership

NCHSR has established relationships with other research institutions, universities, government bodies, non-government organisations, and the community. In 2010, NCHSR staff served on the following committees:

**International**

AIDS Impact Conferences
- Scientific Committee (John de Wit)

Bill & Melinda Gates and Kaiser Foundations
- Global HIV Prevention Working Group (Susan Kippax)

Harm Reduction 2010: IHRA’s 21st International Conference
- International Programme Advisory Group (Carla Treloar)

HIV in Europe
- Steering Committee (John de Wit)

**National**

Australasian HIV/AIDS Conference
- Abstract Review Committee (Christy Newman)
- National Program Committee (Jeanne Ellard)

Australasian Viral Hepatitis Conference
- Abstract Review Committee (Max Hopwood)

Australian Federation of AIDS Organisations
- Biomedical Prevention Policy Reference Group (John de Wit, Martin Holt)

Australian Research Centre in Sex, Health and Society
- Scientific Advisory Committee (John de Wit)

Hepatitis Australia
- National Hepatitis C Needs Assessment (Max Hopwood)

Heterosexual HIV/AIDS Service
- Serodiscordance resource working group (Asha Persson)

HIV Matters: Mental health, adherence and treatment resistance
- Steering Committee (Christy Newman)

Ministerial Advisory Committee on Blood Borne Viruses and Sexually Transmissible Infections (Carla Treloar)

**State**

ACON
- Mental Health Promotion Strategy Reference Group (Martin Holt)
- Research Ethics Review Committee (Martin Holt)

Community Restorative Centre NSW
- Jailbreak, Consultative Health Project (Carla Treloar)

NCHSR Consortium for Social and Policy Research on HIV, Hepatitis C and Related Diseases Board (John de Wit, Martin Holt, Carla Treloar)

Evaluation of the New South Wales HIV/AIDS, Sexually Transmissible Infections, and Hepatitis C Strategies and the supporting implementation plan for Aboriginal people Advisory Committee (John de Wit)

Hepatitis NSW
- Medical and Research Advisory Panel (Carla Treloar)

Heterosexual HIV/AIDS Service
- NSW Advisory Committee (Asha Persson)

Multicultural HIV/AIDS and Hepatitis C Service, SSWAHS
- Steering Committee for the TRAIDS Transitional Group (Max Hopwood)
New South Wales Department of Health
New South Wales Ministerial Advisory Committee on Hepatitis (Carla Treloar)
New South Wales Ministerial Advisory Committee on HIV and Sexually Transmissible Infections (John de Wit)
Education Resources sub-committee (John de Wit)
Health Promotion sub-committee (Philippe Adam)
New South Wales HIV/STI Surveillance Forum
Steering Committee (John de Wit)
New South Wales Users and AIDS Association (NUAA)
Community Mobilisation Team (Loren Brener)
Policy and Advocacy Advisory Committee (Martin Holt)
Steering Committee for Users' News (Max Hopwood)
Website Advisory Group (Max Hopwood)
NSW Culturally and Linguistically Diverse (CALD) HIV/AIDS Interagency
(Henrike Körner)
NSW Metropolitan Gay Men's HIV Prevention Interagency (John de Wit, Martin Holt, Limin Mao)
NSW NSP Workers' Forum
Organising Committee (Max Hopwood)
NSW Pharmacy and Harm Reduction Interagency (Joanne Bryant and Max Hopwood)
Positive Life NSW Board
Advisory Group (John de Wit)
Sexually Transmissible Infections in Gay Men Action Group (STIGMA)
Steering Group (Philippe Adam)

The University of New South Wales
Faculty of Arts and Social Sciences
Dean's Advisory Committee (John de Wit)
Dean's Equity and Diversity Advisory Committee (Christy Newman, Asha Persson)
Higher Degree Committee (Henrike Körner, Jeanne Ellard)
Human Research Ethics Advisory Panel, Social/Health Research
(Henrike Körner, Convenor)
Occupational Health and Safety Committee (Janice Knapman, Employer Representative; Julia Gilchrist, Nalini Krishnan, alternate Employee Representatives)
Research Committee (Carla Treloar)
Standing Committee (John de Wit)

Research communication
To ensure that our research effectively informs policy and practice, NCHSR staff extensively communicate and discuss research results with partner organisations and community members and provide tailored advice regarding policy and program implications.

Presentations
Adam, P. (2010, December). *Getting Down To It: Research on barriers to STI testing in young people in NSW.* Invited presentation to the HIV/STI Social Marketing (NSW STI Programs Unit), NSW Department of Health, Sydney.


de Wit, J. B. F. (2010, September). Behavioural prevention of HIV: Does it work, do we need it and do we want it? Paper presented to the Gender, Sexual and Reproductive Health Unit, Kremlin Bicetre Hospital, Paris, France.


Körner, H. (2010, October). Thai gay men and HIV risk: Preliminary findings from focus groups. Invited presentation at the HARP Unit, South Eastern Sydney and Illawarra Area Health Service, Prince of Wales Hospital, Sydney.


Treloar, C. (2010, April). *Authentic and self-determined peer education: Creating an evidence base and challenges for funders and researchers*. Invited presentation at the London School of Hygiene and Tropical Medicine, London, United Kingdom.


**Publications**


Consultations


Collaborating organisations

In 2010, NCHSR continued to work closely with national and international researchers, community organisations and government partners that support those affected by blood-borne viruses and sexually transmissible infections.

Aboriginal Health and Medical Research Council of NSW, Sydney
ACON, Sydney
Action for AIDS, Singapore
Africa Centre for Health and Population Studies, KwaZulu-Natal, South Africa
African HIV Policy Network, United Kingdom
AIDS Action Council of the ACT, Canberra
AIDS and Infectious Diseases Unit, NSW Department of Health
AIDS Council of South Australia Inc., Adelaide
AIDS Policy Research Centre, Tsinghua University, China
Albion St Centre, Sydney
Asia-Pacific ubiquitous Healthcare Research Centre, The University of New South Wales
Auburn Migrant Resource Centre, Sydney
AusAID, Canberra
Australasian Hepatology Association, Sydney
Australasian Society for HIV Medicine, Sydney
Australian Federation of AIDS Organisations and its member organisations
Australian Government Department of Health and Ageing
Australian Injecting and Illicit Drug Users’ League (AIVL)
Barts and The London School of Medicine and Dentistry, University of London, United Kingdom
Bigge Park Centre, Liverpool Hospital Sexual Health, Sydney
Bobby Goldsmith Foundation, Sydney
Brighton and Sussex Medical School, United Kingdom
Cambodian–Australian Welfare Council of NSW Inc.
Cancer Council New South Wales
Centre for Epidemiology and Population Health, Macfarlane Burnet Institute for Medical Research & Public Health, Melbourne
Centre for Health Record Linkage, Sydney
Centre for Health Research in Criminal Justice, Justice Health, Sydney
Centre for International Health, Curtin University of Technology, Perth
Centre for Sexual Health and HIV Research, University College London, United Kingdom
Centre for the Study of AIDS, University of Pretoria, South Africa
Centre for Women’s Health, Gender and Society, The University of Melbourne
City University, London, United Kingdom
Clinical Research Unit for Anxiety and Depression, St Vincent’s Hospital, Sydney
Communicable Diseases Unit, Queensland Health
Corrective Services NSW
Department for International Development, United Kingdom
Department of Clinical and Health Psychology, Utrecht University
Department of Clinical Immunology, Royal Prince Alfred Hospital, Sydney
Department of Clinical, Health and Neuropsychology, Leiden University
Department of Communication Sciences, University of Amsterdam
Department of Communication Sciences, VU University Amsterdam
Department of Health and Families, Northern Territory Government
Department of Health, Victoria
Department of Health, Western Australia
Department of Infectious Diseases, Amsterdam Health Service, The Netherlands
Department of Infectious Diseases, Rotterdam Health Service, The Netherlands
Department of Social and Organisational Psychology, Utrecht University, The Netherlands
Department of Student Services, University of Applied Sciences, Amsterdam
Discipline of General Practice, The University of Sydney
East Sydney Doctors, Sydney (previously known as 407 Doctors)
Faculty of Psychology and Neuroscience, Maastricht University, The Netherlands
Family Planning, Timor Leste
Fiji School of Medicine, Department of Public Health
Flinders University, South Australia
Fundacion Timor Hari, East Timor Sustainable Agriculture Network, Timor Leste
Gender, Sexual and Reproductive Health Team, Institut National de la Santé et de la Recherche Médicale (INSERM; unit 822), Kremlin Bicêtre, France
Global Fund to Fight AIDS, Tuberculosis and Malaria, Geneva, Switzerland
Haemophilia Foundation Australia, Melbourne
Harm Reduction, Victoria [previous Victorian Drug Users Group (VIVAIDS)]
Health Economics Unit, Deakin University, Melbourne
Health Protection Agency, United Kingdom
Hepatitis Australia
Hepatitis C Victoria
Hepatitis NSW (formerly Hepatitis C Council of NSW Inc.)
HepLink
Heterosexual HIV/AIDS Service (Pozhet), Sydney
HIV Center for Clinical and Behavioral Studies, Columbia University, United States
HIV Social, Behavioural and Epidemiological Studies Unit, University of Toronto, Canada
HIV/STI Intervention & Prevention Studies Program, School of Public Health, University of Minnesota, United States
Holdsworth House Medical Practice, Sydney
Human Sciences Research Council, South Africa
Initiative for Health and Human Rights, The University of New South Wales
Institute for Health Services, Timor Leste
Institute of Social and Preventive Medicine, University of Bern, Switzerland
James Cook University, Queensland
Journalism and Media Research Centre, The University of New South Wales
Kirketon Road Centre, Sydney
Liverpool VCT, Care and Treatment, Nairobi, Kenya
London School of Hygiene and Tropical Medicine, University of London, United Kingdom
Macfarlane Burnet Institute for Medical Research & Public Health, Melbourne
Macquarie University, Sydney
Medical Psychology Research Unit, School of Psychology, The University of Sydney
Medical Research Council Clinical Trials Unit, London, United Kingdom
Melbourne Sexual Health Clinic
Mid North Coast Division of General Practice, Coffs Harbour
Multicultural HIV/AIDS and Hepatitis C Service, Sydney
National Aboriginal Community Controlled Health Organisation
National AIDS Office, National Catholic Health Service, Papua New Guinea
National Association of People Living with HIV/AIDS
National Centre in HIV Epidemiology and Clinical Research, The University of New South Wales
National Department of Health, Papua New Guinea
National Development and Research Institutes, Inc., United States
National Drug Research Institute, Curtin University of Technology, Perth
National Health Service Camden Primary Care Trust, United Kingdom
National Health Service Newham Primary Care Trust, East London, United Kingdom
National Health Service North West London Hospitals Trust, London, United Kingdom
National Health Service St George’s Healthcare Trust, London, United Kingdom
NSW Department of Health and area health services
NSW Sexually Transmissible Infections Programs Unit, NSW Health
NSW Users and AIDS Association, Sydney
O’Brien Street Practice and the Care and Prevention Program, Adelaide
Papua New Guinea Institute of Medical Research, Goroka, Papua New Guinea
Parramatta Sexual Health Clinic, Sydney
PATH (Program for Appropriate Technology in Health), Seattle, United States
People Living with HIV/AIDS (Victoria)
Pharmacy Guild of Australia, New South Wales Branch
Positive Life NSW
PricewaterhouseCoopers Australia, Sydney
Public Health Association of Australia, Canberra
Queensland Association for Healthy Communities
Queensland Health
Queensland Positive People Inc.
Royal Australian College of General Practitioners, Melbourne
Royal Women's Hospital, Melbourne
Rutgers Nisso Group, Dutch Expert Centre on Sexuality, Utrecht, The Netherlands
Scarlet Alliance, Sydney
School of Education & Social Work, University of Sussex, United Kingdom
School of Population Health, The University of Melbourne
School of Public Health and Community Medicine, The University of New South Wales
School of Public Health and Community Medicine, University of the Witwatersrand, South Africa
School of Public Health, Fudan University, Shanghai, China
School of Slavonic and East European Studies, University College London, United Kingdom
Sex Workers Outreach Program, Sydney
Sigma Research, University of Portsmouth, United Kingdom
Social and Public Health Sciences Unit, Medical Research Council, Scotland
Social Policy Research Centre, The University of New South Wales
South African Human Sciences Research Council, Pretoria, South Africa
South Australian Department of Health
South Pacific Commission, Noumea
St George’s, University of London, United Kingdom
Sydney Hospital
Sydney Medically Supervised Injecting Centre
Sydney Sexual Health Centre, Sydney Hospital
Taylor Square Private Clinic, Sydney
Technical Support Facility Asia–Pacific Region, Malaysia
Thai Welfare Association, Sydney
Thai–Australian Association, Eden: Education & Migration Office
The African Child, Brent, London
The Livingstone Road Sexual Health Clinic, Sydney
The Sax Institute, NSW
The University of Adelaide
The University of Melbourne
The University of Sydney
Thomas Coram Research Unit, University of London, United Kingdom
Trimbos Institute, Netherlands Institute of Mental Health and Addiction, Utrecht
UNAIDS Technical Support Facility, Kuala Lumpur, Malaysia
UNAIDS, Papua New Guinea
UNDP, Asia and the Pacific, New York, United States
University of Bath, United Kingdom
University of New Brunswick, Canada
University of New England, Armidale
University of Texas Health Sciences Center, San Antonio, Texas, United States
University of Timor Leste
University of Western Sydney
UNSW Global, The University of New South Wales
Victorian AIDS Council/Gay Men’s Health Centre
Victorian Cytology Service, Melbourne
Volunteer Service Overseas, Tokaut AIDS, Papua New Guinea
Western Australian AIDS Council
Western Australian Centre for Health Promotion Research, Curtin University of Technology
Workforce Development Project, NSW Department of Health
World Population Foundation – Pakistan
Academic publications and presentations

NCHSR aims to undertake exemplary, multidisciplinary research that advances understanding of the social and behavioural aspects of the HIV, viral hepatitis and sexually transmissible infections epidemics. Researchers at NCHSR make significant contributions to scholarly knowledge and policy debates by extensively publishing research results in peer reviewed journals and books and by presenting at a wide range of research conferences.
Academic publications and presentations

Articles in refereed journals


Treloar, C., Byron, P., McCann, P., & Maher, L. (2010). ‘Fitness for duty’: social, organisational and structural influences on the design and conduct of candidate...


**Books and book chapters**


**Research reports**


**Conference presentations**


Funding

All NCHSR research projects are partly or fully funded by the Australian Government Department of Health and Ageing.

Additional funding sources are indicated in the project descriptions in the section, Our Research.
NCHSR funding (excluding GST) received in 2010

<table>
<thead>
<tr>
<th>Research Councils</th>
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<tbody>
<tr>
<td>National Health and Medical Research Council</td>
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<tr>
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<td>ACT Health</td>
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<td>NSW Department of Health (AIDS and Infectious Diseases)</td>
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<td>Queensland Health</td>
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<td>South Australia Department of Health</td>
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<td>Victorian Department of Health</td>
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<td>Western Australia Department of Health</td>
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<td>AIVL</td>
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<table>
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<th>International funding</th>
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<td>UNAIDS</td>
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<td>Canterbury District Health Board, New Zealand</td>
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<table>
<thead>
<tr>
<th>The University of New South Wales</th>
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<tbody>
<tr>
<td>Academic Support Funding</td>
<td>44,014</td>
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<tr>
<td>Postgraduate Support</td>
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<td>Research Training Scheme/Institutional Grants Scheme</td>
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<td>Vice-Chancellor’s Strategic Priorities</td>
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<table>
<thead>
<tr>
<th>Total</th>
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<tbody>
<tr>
<td></td>
<td>2,833,488</td>
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Statement of financial performance for the year ended 31 December 2010

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>External Funds*</td>
<td>2,656,268</td>
<td>3,188,437</td>
<td>3,415,703</td>
<td>3,546,874</td>
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<tr>
<td>UNSW Contribution</td>
<td>862,802</td>
<td>776,171</td>
<td>927,252</td>
<td>722,393</td>
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<td>Total Income</td>
<td>3,519,070</td>
<td>3,964,608</td>
<td>4,342,955</td>
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<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>Payroll</td>
<td>2,355,229</td>
<td>2,585,918</td>
<td>3,328,960</td>
<td>3,019,077</td>
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<td>Equipment</td>
<td>6,462</td>
<td>41,025</td>
<td>41,511</td>
<td>27,060</td>
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<tr>
<td>Materials</td>
<td>355,770</td>
<td>657,231</td>
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<td>Travel</td>
<td>93,541</td>
<td>127,342</td>
<td>498,511</td>
<td>256,536</td>
</tr>
<tr>
<td>Total expenses</td>
<td>2,811,002</td>
<td>3,411,515</td>
<td>4,709,036</td>
<td>3,969,164</td>
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<table>
<thead>
<tr>
<th>Operating result</th>
<th>2010</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
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<tbody>
<tr>
<td>708,068</td>
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<table>
<thead>
<tr>
<th>Surplus (deficit) bfwd from prior year</th>
<th>2010</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
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<tbody>
<tr>
<td>-550,437</td>
<td>-406,438</td>
<td>9651</td>
<td>-290,451</td>
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<table>
<thead>
<tr>
<th>Correction of prior year Accumulated Fund</th>
<th>2010</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
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<tbody>
<tr>
<td>76,313</td>
<td>-143,999</td>
<td>-50,066</td>
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<table>
<thead>
<tr>
<th>Adjusted brought forward</th>
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<th>2009</th>
<th>2008</th>
<th>2007</th>
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<table>
<thead>
<tr>
<th>Accumulated funds surplus (deficit)</th>
<th>2010</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
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<tbody>
<tr>
<td>233,944</td>
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<table>
<thead>
<tr>
<th>Debtors</th>
<th>2010</th>
<th>2009</th>
<th>2008</th>
<th>2007</th>
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<tbody>
<tr>
<td>99,543</td>
<td>10,194</td>
<td>239,588</td>
<td>378,619</td>
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Note: Discrepancies in external revenue reported are attributable to debtors’ movements.