DEMONSTRATING THE VALUE OF COMMUNITY-CONTROL IN AUSTRALIA'S RESPONSE TO HIV

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**Background:** Australia's gay communities mobilised early in response to HIV, establishing community-controlled organisations which governments funded for education, outreach and other programs. In recent years, Australian governments have been developing new funding models, including competitive tendering that is open to other not-for-profit, for-profit and public sector providers.

**Methods:** Australia’s community-controlled AIDS Councils and their national peak, the Australian Federation of AIDS Organisations (AFAO), commissioned research to demonstrate how community-controlled HIV organisations create, deliver and capture value and analyse the costs of community-controlled programs. The analysis was informed by financial and activity data and case studies contributed by AIDS Councils and AFAO.

**Results:** Community-controlled HIV organisations have unique and valuable capacities and qualities that distinguish them from other potential providers of HIV programs. These qualities are historically derived, deeply embedded and continuously reproduced. They include community-control through democratic, open governance processes, and connectedness and accountability to gay communities. The participation of gay men, including those with HIV, is evident at all levels of the community HIV response. This provides for 'community knowing' that is trusted and responsive to communities in the creation of HIV programs. The essential, inherent nature of these qualities creates challenges for their articulation and valuing in government procurement processes. In this analysis, community-controlled HIV programs - specifically, peer-led HIV and STI testing and community-level education programs - were delivered more cost-effectively when these qualities were included and costed, and greater reach and impact was achieved.

**Conclusions:** Governments are increasingly seeking the best value for their investments through stringent evaluation of funding proposals. The value generated by HIV community-controlled organisations has lacked clear expression. This can result in funders failing to reflect these qualities and capabilities in their purchasing specifications. Community-controlled HIV organisations must better describe and cost this value in their representations and proposals.

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