

Living Positive Victoria

Review of the

ENUF

program 2012 – 2018

Final report
February 2019

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Thanks to: Dr Graham Brown and Max Niggel

Living Positive Victoria stakeholders and partners, staff and board members (current and former) who provided their time and insights through their participation in the interviews.

The authors acknowledge that Coventry House is located on the traditional lands and waterways of Peoples of the Kulin Nations. Sovereignty was never ceded. Always was, always will be Aboriginal land.

Our pledge is to challenge HIV stigma

The ENUF campaign was conceived as a vehicle to challenge the stigma and discrimination that has become a part of our daily lives as people living with HIV. This campaign provided opportunities for PLHIV to share stories of stigma and the impact that has on the way others see us and the way that we see ourselves.

A series of innovative community cultural engagement activities helped share this message through a range of mediums to engage the broader community and challenge perceptions.

The campaign was originally developed to create a strong focus on HIV stigma in the lead up to AIDS 2014 and during the conference. Such was the energy generated at this time, that Living Positive Victoria extended the life of the campaign for a further four years to maximise its engagement and affect on those who it reached.

In 2018 Living Positive Victoria commissioned a review of the ENUF campaign to inform our anti-stigma interventions into the future. I am delighted to share the insights and challenges of this campaign contained within this review.

Richard Keane
Executive Officer
Living Positive Victoria

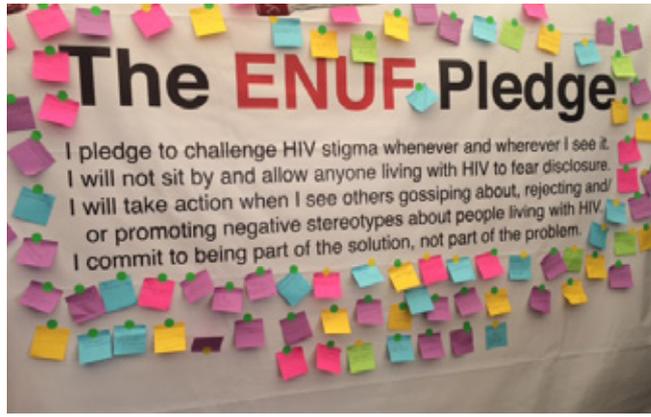
Executive Summary

- The ENUF Program was a multifaceted peer-led anti-HIV-stigma campaign that ran from 2012 to 2017. Living Positive Victoria commissioned this review into the ENUF Program to determine the successes and opportunities for learning.
- The review was conducted using the W3 Framework (What Works and Why?), a systems-thinking approach to evaluating peer-based programs.¹

There are four functions that were analysed: ***Engagement, Alignment, Adaptation, Influence*** (community and policy spheres).

- The review comprised a range of interviews with Living Positive Victoria stakeholders and current and former staff and board members.
- There were four aspects to the ENUF Program: ENUF Pledge, ENUF Peer-Led Anti-HIV-stigma campaign, ENUF Ambassadors and Arts and Community Cultural Engagement activities.

¹ Brown and Reeders, *What Works and Why: PLHIV Peer Leadership and Policy Participation System Logic and Draft Indicators*.



The ENUF Peer-led anti-HIV stigma campaign and ENUF Pledge

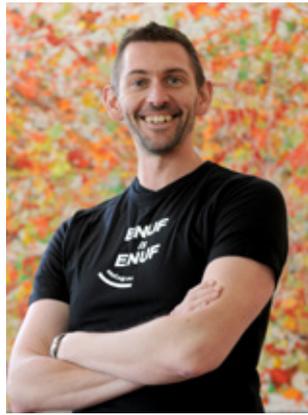
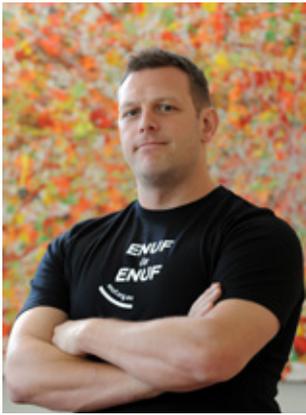
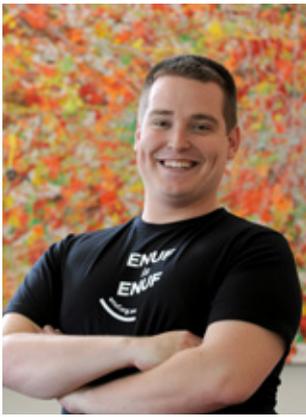
- There was strong evidence of the engagement function, with the campaign reach audiences outside of Victoria, and internationally through the 2014 International AIDS Conference (AIDS 2014).
- Some stakeholders commented on the fact that the campaign felt like it was speaking more to gay men living with HIV, rather than the entire population of people living with HIV.
- This component demonstrated alignment with Living Positive Victoria's strategic plans and more broadly the National Association of People with HIV Australia's (NAPWHA) National HIV Stigma Audit.
- The campaign showed adaptation through the visual representation and styles of each of the four phases of the campaign.
- There is strong evidence for the influence the campaign had in the community sphere. For example, some stakeholders mentioned that the campaign changed the way people living with HIV feel about themselves, particularly around things like disclosure of HIV status.
- The campaign had a strong influence in the policy sphere. This campaign spoke about HIV-stigma from a peer-perspective, the first Australian attempt at something like this in the modern era of HIV as a chronic manageable condition. Lessons learned from this campaign and our understanding of stigma has changed over time, and therefore the campaign has influenced how future campaigns on HIV-stigma are shaped and executed, not just by Living Positive Victoria, but also for the other state-based positive voice organisations and the national PLHIV peak organisation.

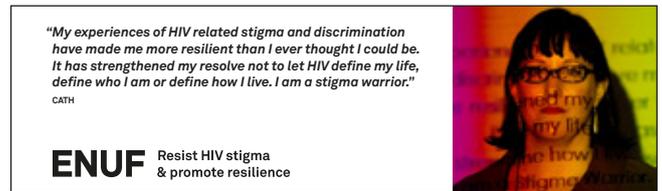
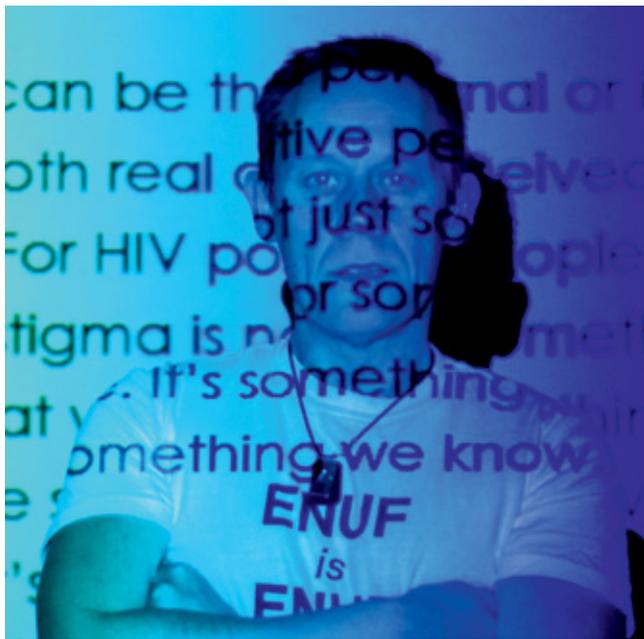


ENUF Ambassadors

- A total of 59 ambassadors were recruited over the lifetime of this activity.
- Ambassadors engaged were people with a public profile (including community leaders) and both living with and without HIV. A range of lived experiences and spheres of influence were represented, however, there would have been benefit from engaging a wider cultural and linguistic diversity of ambassadors, so that all populations of people living with HIV were represented.
- The ENUF Ambassadors would have benefited from more engagement from Living Positive Victoria. Greater engagement could include information on the latest HIV advances, current health promotion campaign and messaging the ambassadors could use in their advocacy.
- ENUF Ambassadors shows significant potential for Living Positive Victoria if resources are allocated to nurture the program and if guided by a documented strategy.
- Stakeholders viewed the ambassadors as an integral part of the ENUF Program and demonstrated alignment with the need to re-educate the broader public about what it is like living with HIV today.
- The ENUF Ambassador program demonstrated continual adaptation. Living Positive Victoria was opportunistic about their engagement of “HIV champions” as they presented. This was both a success and a failure of the program. Success due to the ability to adapt and react, but failure in the inability to activate the ambassadors meaningfully over time.
- The ENUF Ambassadors displayed influence over their respective networks, including two ambassadors who shared the ENUF Program’s aims and themes on national television. Ambassadors appeared in print media, radio and spoke in the Victorian Parliament.
- There was little evidence of the ENUF Ambassadors influence in the policy sphere.

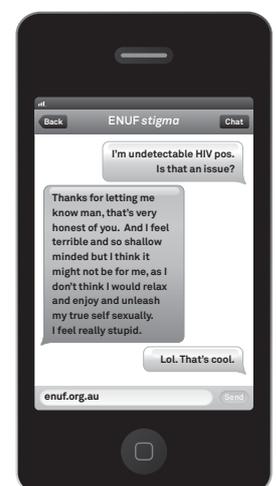
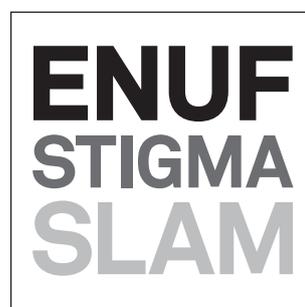
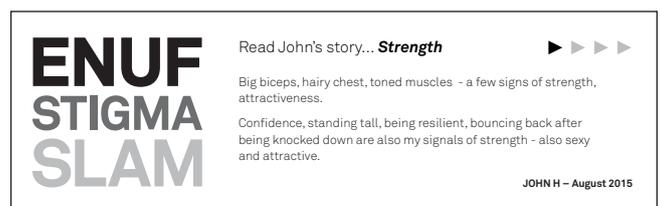
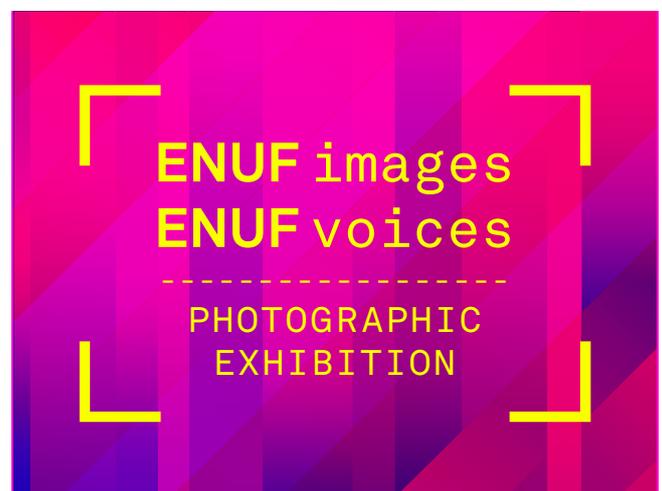






Arts and Community Cultural Engagement

- Arts and Community Cultural Engagement activities covered in this review include: ENUF Voices photographic exhibition, partnership with the Victorian College of the Arts with the Positive Speakers Bureau to create two original pieces of theatre (partnership A), partnership with students from the Victorian College of the Arts for the summer festivals season (partnership B), and ENUF Photographic Competition.
- ENUF Voices was seen by stakeholders as a critical and memorable part of the ENF program. The exhibition engaged a diversity of people living with HIV.
- There was strong evidence of engagement of the VCA students in partnership A. A documentary of the process, if screened, will provide further engagement of audiences in the work of this partnership.
- Partnership B provided a unique way of engaging audiences throughout the summer festival season by using performance art to spread the ENUF messaging and themes, taking a lighter approach to what could be a heavy topic and an audience difficult to engage (due to their exposure to previous HIV campaigns).
- The ENUF photography competition engaged a diversity of stories told in pictures and words. Entrants came from three Australian states. There was potential for greater engagement with longer lead times and a strategic communications plan for the project.





- ENUF Voices demonstrated adaption by giving the exhibition a life beyond the AIDS 2014 Cultural Program, touring to Prahran, Malvern, Preston and Frankston.

- The ENUF Voices exhibition showed a strong influence over the participants, giving voice and a face to their stories of stigma and resilience.

- There is evidence for influence within partnership A. The experience empowered the students to think about their own sexual health and testing practices and these students then influenced their peers. In some cases, the partnership influenced the student's future arts practices (particularly queer artists).



- The ENUF Photographic competition had the greatest influence on the participants who were people living with HIV. This type of model for empowering individuals living with HIV to tell their stories through an artform can have a profound effect and offers an alternative approach to building resilience among people living with HIV.

- Arts and Community Cultural Engagement, as undertaken by Living Positive Victoria, aligns with the published evidence for arts and health promotion practices and is alignment with the National Arts and Health Framework.

- Supporting artists living with HIV whose works include HIV themes should be supported by Living Positive Victoria, demonstrating benefit for all parties. The type of support could be defined and there could be benefit derived from formalising the engagement process.



Summary of Recommendations

1. Form strategic partnerships with other health and social services organisations to inform engagement around HIV-stigma with diverse populations of people living with HIV.
2. Work closely with NAPWHA and jurisdictional positive-voice organisations (including through PozAction) to further the issue of HIV stigma as a national issue.
3. Be specific about the target audience when developing future campaigns addressing HIV stigma. Campaigns should be culturally informed and appropriate to the subpopulation of people living with HIV they are trying to target.
4. Focus on the role of building resilience among people living with HIV as a potential tool to fight HIV stigma in everyday life. This could include health promotion messages that address stigma in specific occurrences of stigma from everyday life (work, health care, aged care, housing, sexual partners).
5. Explore partnerships with other peer-based organisations in raising, discussing and addressing the intersection of HIV and other stigmatised identities. For example, Harm Reduction Victoria, Hepatitis Victoria, Centre for Culture Ethnicity and Health, Vixen Collective, among others.
6. Consider the future role for an ambassador-style program. This could include developing a strategic program brief to investigate the resources needed to deliver such a program and alignment with the current strategic priorities for Living Positive Victoria. Any future ambassador-style program must consider all populations of people living with and affected by HIV.
7. Investigate ways to engage audiences in regional Victoria with partnerships with local services, regional arts and cultural venues and local government, including Regional Arts Victoria.
8. Partner with the Victorian College of the Arts in screening the Plus Sign Attached / (Un)Clean documentary film to wider Victorian audiences.
9. The VCA documentary film be considered as part of Living Positive Victoria programs and workshops for people living with HIV, such as Phoenix, Gen Next, Positive Speakers Bureau training, etc.
10. Partner with other organisations in arts and community cultural engagement activities as a way of reaching different audiences who would benefit from HIV-stigma-related health promotion activities (both those living with and without HIV).
11. Identify opportunities for partnerships that follow a similar arts and community cultural engagement model as demonstrated in VCA Partnership A.
12. Successes and lessons learned from VCA Partnership A be documented to inform resource allocation if this kind of activity is pursued in the future.
13. Future arts and cultural engagement activities to align with a strengths-based model.
14. Formalise a policy and process for engaging with artists living with HIV who are seeking support from the agency.

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Acronyms

AIDS	Acquired immunodeficiency syndrome
AIDS 2014 Melbourne	International AIDS Society 2014 International AIDS Conference held in Melbourne
HIV	Human immunodeficiency virus
NAPWHA	National Association of People with HIV Australia
VCA	Victorian College of the Arts, University of Melbourne

Introduction

In September 2017, Living Positive Victoria initiated a review into the ENUF program. The program ran from 2012 to 2017 and had not been formally reviewed or evaluated since its inception.

The aim of the review is to analyse various components of the ENUF program to understand successes and opportunities for learning. While ENUF in its current form will not continue, it is a priority of Living Positive Victoria to continue to work toward addressing HIV-stigma in Victoria. In addition, the continued engagement in the arts and community cultural development space should be seen as a strategic value-add activity for Living Positive Victoria. This review therefore, also analyses and considers the efficacy of the arts and community cultural engagement aspects of the ENUF program and how these might be leveraged to further the work of Living Positive Victoria into the future.

Methods

The review of the ENUF program comprised:

- Interviews with key stakeholders (n = 14);
- An online survey of key stakeholders (n = 5);
- Interviews with Living Positive Victoria staff and current board members;
- Roundtable discussion with arts practitioners working with HIV themes;
- A desktop review of activities and outcomes;
- Review and analysis of data; and
- Literature review of arts and health promotion, and community cultural engagement evidence and best practice.

W3 Framework

The W3 (What Works and Why) Framework is a systems thinking approach to evaluating peer-based programs.² The framework consists of four functions: engagement, alignment, adaptation and influence, which describe the two interrelated systems that peer programs operate in (community system and policy/sector system).

Interviews

Interviews were conducted between November 2017 and February 2018 and consisted of three separate approaches - organic, semi-structured and structured. The first third of the stakeholder interviews were conducted organically, using the four W3 functions to draw out information from the stakeholder. The questions that drew out the most useful responses were then refined and guided second third of interviews. A final review of the questions was undertaken and the final third of stakeholders were asked a standard set of questions. These same questions were used for an online survey of stakeholder who were otherwise not available for interviews. A list of the interview questions is provided in Appendix 3, page 46.

The interviews were recorded and subsequently transcribed. The transcripts were then analysed against each of the four W3 functions. Quotes that demonstrated a particular function were considered evidence (both positive and negative) of each function.

Roundtable conversation

Living Positive Victoria hosted a roundtable conversation on 20 January 2018 During the 2018 Midsumma Festival, at Chapel Off Chapel. The topic of discussion was There is no longer shame in living with HIV today is there? What does it mean to living with HIV today? The roundtable discussion was held in front of Sebastian Zagarella's interior design exhibition Inside Out,

The panel comprised:

- Ed Monero, HIV Activist and Poet
- Sebastian Zagarella, Visual Artist and creator of 'Inside Out'
- Dr Alyson Campbell, Associate Professor in Theatre Victorian College of the Arts
- Stephen Borg, Client Care Coordinator VAC's Positive Living Centre
- Camden Tilley, Composer and creator of 'HIVme'
- Kirk Hault, Director and creator of 'We Were There'
- Jason McKeen, Board of Trustees Living Positive Kenya
- Joël Murray, facilitator

This discussion has informed some of the analysis further on in this report.

² Above n 1.

Background and description of program

The ENUF program began in the 2012 in response to community needs, further articulated in NAPWHA's *The HIV Stigma Audit: Community Report*.³ Living Positive Victoria saw the need for a peer-led anti-HIV-stigma campaign and that Living Positive Victoria was well positioned to implement as part of their health promotion programs.

A campaign brief was developed⁴, which articulated the following goal and objectives:

Program Goals

The overall outcomes we hope to achieve

In order to reduce HIV stigma in Victoria, we aim to:

- Mobilise a social movement to resist stigma and HIV-related inequalities for both positives and supportive negatives
- Promote positive as a strong 'project identity' for resistance and resilience against stigma and discrimination
- Encourage mixed status community 'we' rather than 'us/them'
- Pose questions to highlight how inequalities are made to seem normal
- Create space for coalition with movements around other stigmas
- Encourage audience members to take responsibility for identifying and refusing to tolerate the manifestations of stigma in their lives.

Program Objectives

Specific and measurable changes that might indicate success in our goals

As a result of the ENUF campaign:

- Fewer people are likely to gossip about others' HIV status
- More people are able to identify and challenge the hidden premises in negative stereotypes of positives
- More people identifying the outcomes of HIV stigma on positives as unfair
- More negatives can separate their personal prevention goals from fear of HIV and stereotypes about positives
- More people are aware of what it feels like to be stigmatised
- More negatives can separate their perceptions of stigma are real and valid
- Positives feel supported by negatives and their community
- Participants feel empowered to address problems/issues affecting their friends and community
- Feature articles in mainstream media outlets avoid moralistic framings and provoke community discussion acknowledging complexities

The campaign brief outlined a multi-pronged messaging campaign across a dedicated website and social media platforms, print promotion and merchandise, outdoor advertising, and featured stories in mainstream media. AIDS 2014 was identified as a major focus for activities.

³ Brenner, and Callander, *The HIV Stigma Audit: Community Report*.

⁴ Reeders, *ENUF STIGMA Campaign Brief*.

Stigma

The ENUF STIGMA campaign brief, articulated evidence on what stigma is and how it can impact specifically on HIV prevention, public health and personal health and wellbeing of people living with HIV. For example:

TABLE 1: IMPACTS OF HIV STIGMA⁵

HIV prevention and public health	Personal health and wellbeing
Reduces HIV testing rates ⁶	Causes shame ⁷ , induces silence
Risk of discounting prevention messages ⁸	Diminishes social connectedness
Constraint of public discussion	Intensifies social disadvantage
Sustains punitive responses (criminalisation)	Creates chronic self-doubt ⁹
Impairs sexual negotiation	Induces stress ¹⁰

Further direct evidence of the impact of stigma on people living with HIV in Australia was documented in NAPWHA's The HIV Stigma Audit: Community Report¹¹, which found the most of respondents felt a moderate amount of stigma. Stigma was most felt in relation to sexual partners, community and the media.¹²

Aspects of the ENUF Program

ENUF Pledge (manifesto): A manifesto was created early on in the initiation of the program and then later refined, which became the ENUF Pledge. Simply put, the pledge asked people to commit to calling out HIV stigma where and when it occurs. See Appendix 1: ENUF Pledge

ENUF Peer-led Anti-HIV-stigma Campaign: stories of stigma from people living with HIV engaged with Living Positive Victoria programs and health promotion activities, were used as campaign messages. The content of these campaigns was refreshed a number of times throughout the ENUF Program.

ENUF Ambassadors: Living Positive Victoria engaged individuals with public profiles (both living with HIV and HIV-negative) to speak about HIV and HIV stigma. The aim was for these people to be champions for HIV stigma and the work of Living Positive Victoria. Ambassadors were profiled on the ENUF website. See Addendum x

ENUF arts and community cultural engagement: partnerships with a range of arts and cultural artists, companies and institutions in visual and performative outcomes that showcase themes on HIV and HIV stigma.

5 Above n 4.

6 Khumalo-Sakutukwa et al., *Project Accept (HPTN 043)*. Cited in above n 4.

7 Brown, *I Thought It Was Just Me (but It Isn't): Telling the Truth about Perfectionism, Inadequacy, and Power*. Cited in above n 4.

8 Dodds, *HIV-related Stigma in England: Experiences of Gay Men and Heterosexual African Migrants Living with HIV*. Cited in above n 4.

9 Sue et al., *Racial Microaggressions in Everyday Life*. Cited in above n 4.

10 Wright, Gronfein, and Owens, *Deinstitutionalization, Social Rejection, and the Self-Esteem of Former Mental Patients*; Mechanic et al. *Effects of Illness Attribution and Depression on the Quality of Life among Persons with Serious Mental Illness*; Markowitz, *Modeling Processes in Recovery from Mental Illness*; Farnam et al., *Health Status & Risk Factors of People With Severe and Persistent Mental Illness*. Cited in above n 4.

11 Above n 3.

12 Above n 3.

TABLE 2: ENUF ACTIVITIES AND MILESTONES

YEAR	ACTIVITY or MILESTONE
2012/13	<p>ENUF campaign created</p> <p>ENUF Manifesto becomes ENUF Pledge</p> <p>First Ambassadors recruited</p> <p>Australia's first peer-led anti-HIV-stigma campaign</p>
2012/13	<p>ENUF Voices Exhibition</p> <p>STATUS (play)</p> <p>Victorian College of the Arts and Music productions: Plus Sign Attached and (Un)clean. (involving undergraduate and post-graduate courses in acting, directing and theatre design)</p>
2012/13	<p>ENUF Voices tours:</p> <ul style="list-style-type: none"> • Prahran Town Hall (Dec 2014) • Malvern Town Hall (Dec 2014) • Frankston Arts Centre (Jan 2015) • Darebin Arts Centre (June 2015) <p>Partnership with VCA for Midsumma and ChillOut festivals</p> <p>Awarded "Most colourful and energetic entrant" of the ChillOut festival</p>
2015/16	<p>Disclosure Project and ENUF combined campaign for summer festivals</p> <p>Dr Alyson Campbell and curator Angela Bailey facilitated forum for women living with HIV 'Creative responses to HIV'. International Students Day at Deakin University</p>
2016/17	<p>ENUF Photographic competition and exhibition</p>

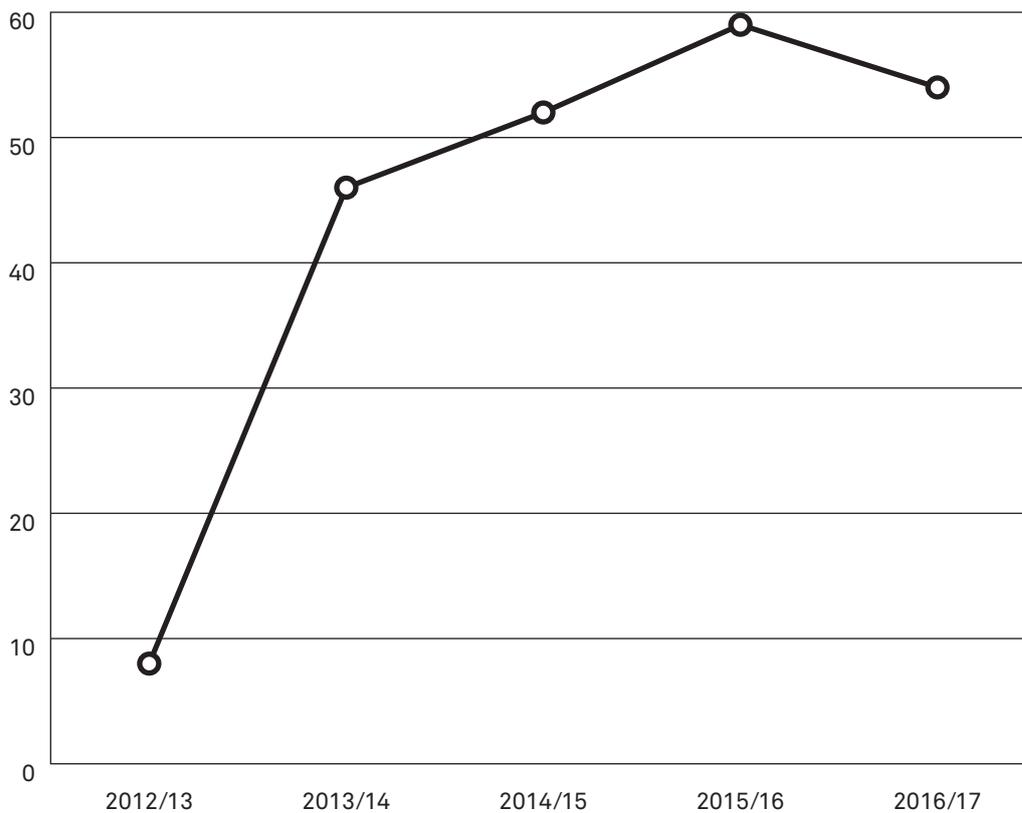
Results and analysis

Data

TABLE 3: ENUF AMBASSADOR RECRUITMENT AND ENUF PLEDGES BY YEAR

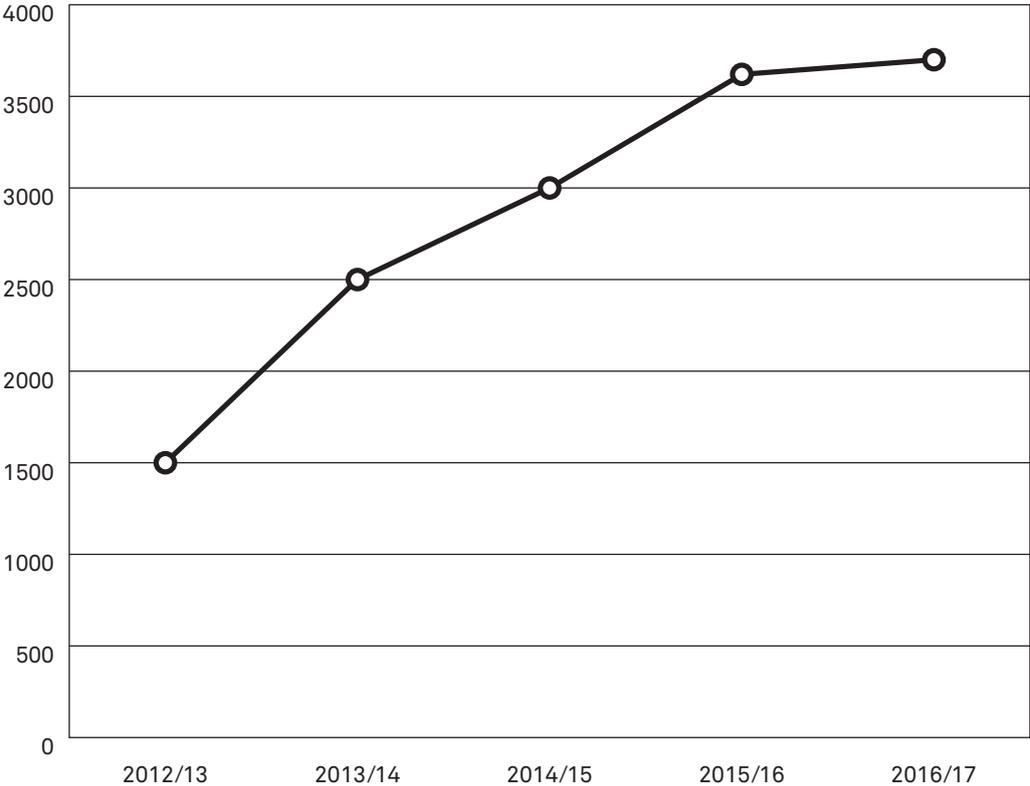
	2012/13	2013/14	2014/15	2015/16	2016/17
AMBASSADORS	8	38	6	7	-5
PLEDGES	1,500	1,000	500	620	80

FIGURE 1: ENUF AMBASSADORS RECRUITED BY YEAR



A total of 59 ENUF Ambassadors were recruited to the program, with the majority (n=38) of those recruitments occurred in the 2013/14 year. This is most likely due to the 2014 International AIDS Conference (AIDS 2014) being hosted in Melbourne. Five ambassadors asked to opt-out of the program in 2016/17 for a variety of reasons (discussed later)

FIGURE 2: ENUF PLEDGES SIGNED BY YEAR



A total of 3,712 ENUF pledges were made by individuals through the ENUF website, at festivals and ENUF cultural events. Just over two-thirds of these occurred in the first two years of the ENUF program. Thousands more people signed the ENUF pledge at AIDS 2014.

TABLE 4: UNIQUE WEBSITE VISITS PER AUSTRALIA CAPITAL CITY AND GROUPED AUSTRALIAN REGIONAL TOWNS BY YEAR

	2012/13	2013/14	2014/15	2015/16	2016/17	TOTAL
ADELAIDE	148	114	169	119	60	610
BRISBANE	0	169	131	153	86	539
CANBERRA	365	0	0	0	58	423
DARWIN	0	180	102	0	69	351
HOBART	0	0	0	0	0	0
MELBOURNE	1,847	1,985	1,703	1,389	884	7,808
PERTH		156	241	144	90	631
SYDNEY	757	723	665	578	345	3,068
REGIONAL	950	1,642	733	854	439	4,619
TOTAL	4,067	4,969	3,744	3,237	2,031	18,048

FIGURE 3: UNIQUE WEBSITE VISITS OF AUSTRALIAN CAPITAL CITIES BY YEAR

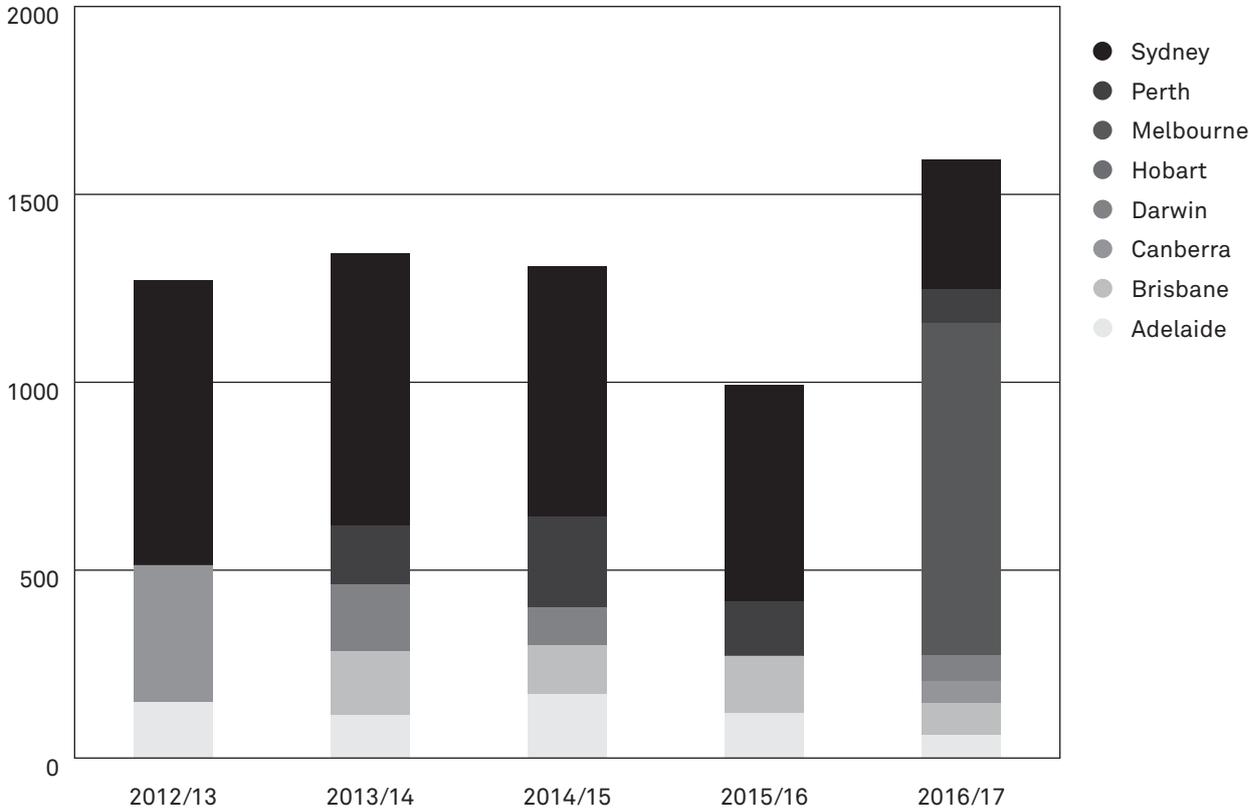
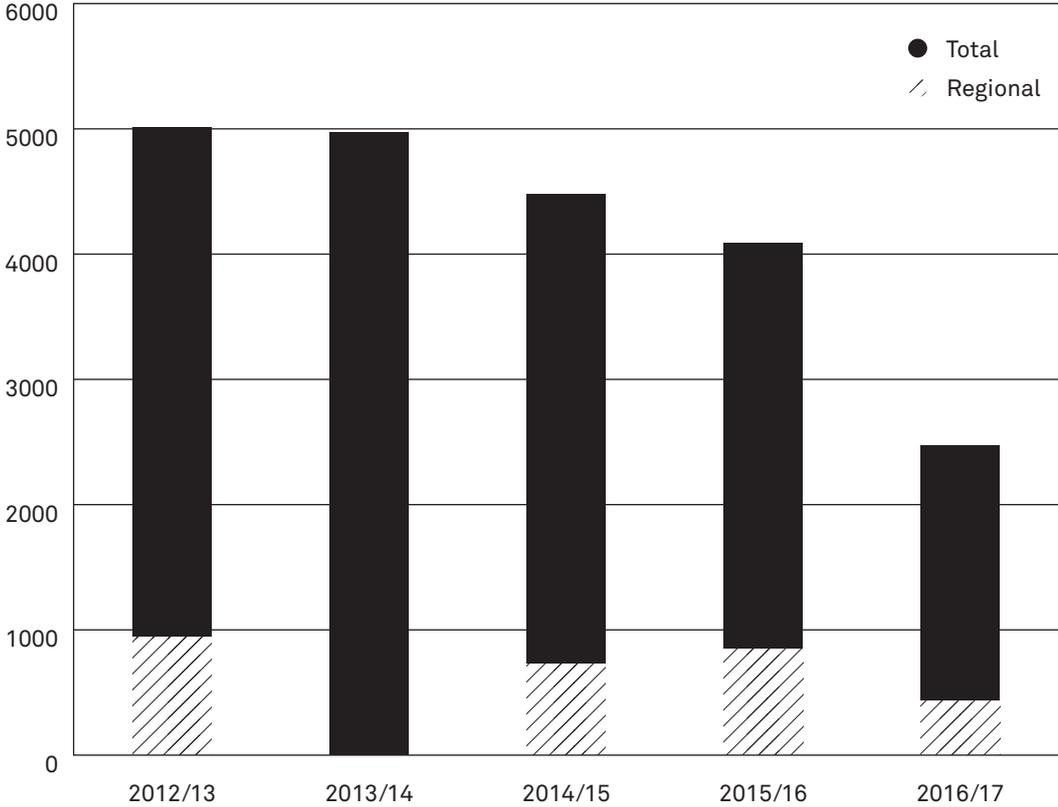


FIGURE 4: UNIQUE WEBSITE VISITS, REGIONAL VERSUS METROPOLITAN, BY YEAR



A total of 18,048 unique visits from Australia of the ENUF.org.au website occurred between 2012/13 and 2016/17. The most visits came from Melbourne. Unique visits came from all Australia capital cities except for Hobart. A total of 4,619 unique visits came from regional Australia, representing a quarter of the total unique visits between 2012/13 and 2016/17.

The ENUF Program

We wanted to determine whether the intended aims (goals and outcomes) of the program were in alignment with the perception, knowledge and experiences of the program across various stakeholder groups. Stakeholders were asked “In your own words, what do you think the campaign was trying to do or achieve?” Some of the key responses were:

The campaign was trying to address stigma and discrimination against PLHIV on account of their HIV-positive status... It was trying to address stigma.... I think because of the call for ‘enough/ENUF’, it was talking to positive people about not having tolerance for stigma and therefore ... it was trying to build confidence and resilience in positive people to resist stigma.

–

To foster a greater understanding of HIV in the community and the stigma and discrimination that those who are positive experience in our community. Through education, through that information reduce the discrimination of people living with HIV.

–

Raising the profile of stigma. Creative responses to challenging stigma through an empowerment process. Visibility. Innovative ways of naming and addressing HIV stigma. Building a network of people who would have a collective impact on stigma.

–

The campaign was attempting to say ‘Enough stigma. Enough judgement. Enough inequity. Enough people feeling that they are judged’. And the fact is the campaign was quite effective.

–

All stakeholders interviewed were able to identify the various components of the ENUF Program, being the ENUF pledge, the peer-led anti-HIV-stigma campaign, the ENUF Ambassadors and the arts and community cultural engagement activities. Stakeholders who were not directly involved in arts and community cultural engagement activities were less likely to be able to identify those activities under the ENUF brand. This was likely due to uncertainty about which of the arts and cultural programs supported¹³ by Living Positive Victoria were associated with ENUF, particularly given the diversity of the cultural program that was delivered during the International AIDS Conference. Fewer stakeholders could recall the ENUF Pledge unprompted. This suggests having more to do with the timing of the broader public promotion of the pledge which occurred early in the ENUF Program. Although, one interviewee stated “I’m fairly certain I signed the pledge more than once. I would have signed it at AIDS 2014, probably would have signed it at Midsumma [Carnival] and maybe again at ChillOut [Festival].”

¹³ Support in this context means investment (cash or in-kind) including promotion

The ENUF Peer-led anti-HIV-stigma campaign and ENUF pledge

FIGURE 5: EXAMPLE OF MEDIA ON ENUF PLEDGE, STAR OBSERVER



Evidence for 'Engagement' function

The engagement function demonstrates the quality of the program in modelling diversity of experiences of HIV. Data presented earlier in this report, demonstrates engagement in the peer-led anti-HIV stigma campaign and ENUF pledge, across a number of states, capital cities and regional areas of Australia. One stakeholder identified that a positive of the campaign was that it wasn't targeted at specific subpopulations of people living with HIV.

It was one of the overarching initiatives that Living Positive Victoria had, in that it wasn't targeted at specific subpopulations. At the end of the day, stigma affects all people living with HIV.

—

People from the ENUF campaign...did some great work at the Daylesford ChillOut Festival on this matter, particularly because the day coincided with International Women's Day. They highlighted the fact that today in Victoria 2,600 women are living with HIV and being stigmatised by that. People are living many years with the virus, so the stigma affects them in many ways for many years.

Fiona Patten MP¹⁴

—

¹⁴ Victoria, Parliamentary Debates, Legislative Council, 18 March 2015, 617 (Fiona Patten).

FIGURE 6: EXAMPLE OF MEDIA ON ENUF AT CHILLOUT FESTIVAL, STAR OBSERVER



However, other stakeholders tended to be more critical about how the campaign may have been more appealing to gay men living with HIV.

I feel like the black and white could be very male-centric, whereas the multi-colours felt really personal.

—

I get the impression that it was mostly a gay men's thing. Because it was a political manifesto "we will not be silenced" kind of action. That presupposes very mobilised and politically astute and connected metropolitan types of community with an identity that can rally together. So marginalised, disconnected, and/or isolated people living with HIV would not be able to read that manifesto and feel like a part of a movement.

—

Living Positive Victoria and the ENUF campaign are very Melbourne-centric. And there's probably is good reason for that. There's a much, much easier crowd to engage in terms of density and proximity and so it's a very different ball game out here [in regional Victoria].

—

There is strong evidence of engagement with the campaign from people living with and affected by HIV, in particular, the engagement of community businesses (like Circuit Bar) and other organisations (such as Low Res Male Choir) show engagement of gay men – both living with and without HIV.

RECOMMENDATIONS

Form strategic partnerships with other health and social services organisations to inform engagement with diverse populations of people living with HIV.

Work closely with NAPWHA and jurisdictional positive-voice organisations (including through PozAction) to further the issue of HIV stigma as a national issue.

Evidence for 'Alignment' function

The alignment function, picks up signals from the policy system and supports the adaptation and priorities of peer-based programs. For example, it was discussed earlier that the program was initiated in response to NAPWHA's National HIV Stigma Audit. A number of stakeholders acknowledged this fact. One stakeholder commented:

Living Positive Victoria has performed in the area of fast responding campaigns.

–

Furthermore, the ENUF campaign and pledge was in alignment with two strategic plans for the organisation – the People Living with HIV/AIDS Vic Strategic Plan 2010-2013 and Living Positive Victoria Strategic Plan 2014-2017.

Evidence for 'Adaptation' function

It was difficult to find evidence and therefore measure the program's effectiveness against the adaptation function based on interviews alone. This function within the W3 Framework captures insights about how the program adapts through practice and policy. While data had been captured on the program's reach and other vital statistics, there had not been any formal reviews or evaluation of the program. The recommendations, therefore, if implemented, would be considered evidence for the adaptation function.

One possible interpretation of adaptation within the ENUF Program, is the organic evolution of the program. This evolution, from the pledge to commit to calling out HIV stigma, the peer-led messaging campaign and the creation of an ambassadors program and the eventual tie in with arts and cultural engagement activities, were all responses to the political environment the program was growing in. For example, given that the funding for activities was entirely self-generated by Living Positive Victoria, the program's activities adapted to an environment of constrained resources (both financial and human).

Furthermore, the campaign itself took on many forms, adapting to remain current, fresh and relevant. At first the campaign consisted of peer-sourced messages about HIV stigma. Second came the multicoloured pop-art inspired campaign. A crossover campaign with the Disclosure Project came third, followed by the final return to peer-sourced messages of resilience.

FIGURE 7: EXAMPLES OF THE ADAPTATION OF THE ENUF CAMPAIGN

Photos middle and bottom © Daniel Burke.



Evidence for 'Influence' function (policy and community)

The influence function comprises the influence a peer-based program has on both policy and community. From interviews held with stakeholders, evidence of this function was the strongest of all W3 functions.

Community system

There is evidence demonstrating influence in the community system, in particular people living with HIV. Some of the stakeholder responses included:

It [the ENUF campaign] definitely drew attention to difficulties people with HIV were having with stigma. It started the process which has had some success in the role of positive people facing up to stigma and being named as stigma and being proud of being a positive person.

–

A couple of men I know who had not disclosed their status before - they are fairly prominent gay men in the community - they felt like they had been empowered by the campaign to do that and I thought that was brilliant. I was actually really surprised that they hadn't [disclosed their HIV status] beforehand and it was completely because of the campaign they did that.

–

I've talked to my family and friends about HIV stigma. Some of the people I know still have ENUF stickers.

–

The anti-HIV-stigma messaging campaign had a strong influence of how people living with HIV felt about their HIV status. It enabled people to have a conversation about HIV stigma. The campaign also gave people living with HIV a sense of empowerment and of control over the disclosure of their HIV status. The use of merchandise, such as stickers and high-quality hessian shopping bags emblazoned with the ENUF logo, was an effective device for people living with HIV to start talking to non-HIV-positive people, especially friends and family, about HIV stigma.

However, it was noted by a number of stakeholders, that it was unclear about who the audience was and how far the campaign was trying to influence those outside of communities and individuals connected to HIV.

One of the problems we face with stigma going forward is how much exposure to anti-stigma messages or event are required to stop a person stigmatising people living with HIV with no connection to HIV? ...no matter what we do, that's not possible because a lot of people lose their HIV stigma when they find out they are HIV positive or when their partner turned out to be HIV-positive.

–

The problems that ENUF had is that it didn't speak to the broader population. It said "positive people have had enough". I don't know if that message worked. What is the mainstream population meant to do with that? There was no 'how?'

–

Therefore, influence within the community system could be viewed as concentric circles. That is, with people living with HIV as the centre, the influence of the campaign is strongest, the closer someone is connected to a person living with HIV. As an individual or community get further away from the person living with HIV, the less of an influence the campaign was likely to have had.

RECOMMENDATION

Be specific about the target audience when developing future campaigns addressing HIV stigma. Campaigns should be culturally informed and appropriate to the subpopulation of people living with HIV they are trying to target.

Policy system

Our understanding of HIV stigma has changed since the beginning of the program – as positive voice organisations, as people living with HIV and in the way that governments have co-opted a discourse on stigma.

[We are] moving toward the idea that it's about building resilience in positive people to not be tolerant of stigma and to call it out, be confident in that and be challenging. The ENUF campaign, therefore, had some great potential in that because the message got out there to everybody. The problem is that stigma is much more intractable than one exposure to one campaign.

–

In 2017, NAPWHA wrote and published a discussion paper titled 'HIV Stigma, Resilience and Flourishing'. The paper discusses factors associated with the enabling and impediment of resilience among people living with HIV, drawing upon the research by Anthony Lyons et al, in their published paper 'Psychosocial factors association with flourishing among Australian HIV-positive gay men'. The discussion paper positions building community and individual resilience as a tool to help reduce the perception of external (societal) HIV-stigma. It is argued that the greatest influence on HIV-stigma on a societal level, could be to empower people living with HIV to be more resilient.

RECOMMENDATION

Focus on the role of building resilience among people living with HIV as a potential tool to fight HIV stigma in everyday life. This could include health promotion messages that address stigma in specific occurrences of stigma from everyday life (work, health care, aged care, housing, sexual partners).

Last year, the Victorian Government released the Victorian HIV Strategy 2017-2020. This was the first Australian federal, state or territory government strategy to make HIV stigma and discrimination its own priority. While it would be a far stretch to suggest that the ENUF campaign had this kind of influence over government, it could be argued that the campaign began a conversation about stigma.



Addressing stigma is remarkably difficult. It is often multifaceted, with elements of enacted or external stigma, and internalised or perceived stigma. It is exacerbated by its intersection with other stigmatised characteristics or identities. These include but are not limited to gender identity, injection drug use, sexual orientation, cultural identity, religious affiliation and disability.

Victorian HIV Strategy 2017-2020

A number of stakeholders mentioned that by Living Positive Victoria starting the conversation about HIV stigma, it influenced a more open discourse on stigma in relation to other blood borne viruses, substance use, sex work and other intersections of HIV. It was also commented that experiences and learnings from HIV stigma could have an influence over the ways that other peer-based organisations address other types of stigma.

RECOMMENDATION

Explore partnerships with other peer-based organisations in raising, discussing and addressing the intersection of HIV and other stigmatised identities. For example, Harm Reduction Victoria, Hepatitis Victoria, Centre for Culture Ethnicity and Health, Vixen Collective, among others.

ENUF Ambassadors

A number of ENUF Ambassadors were among the group of stakeholders interviewed for this review, however, all stakeholders were asked about the ambassador program as a component of the ENUF Program. All ambassadors had a good understanding of HIV stigma and their role as ambassadors in calling out HIV stigma. Other stakeholders commented on the potential efficacy of utilising individuals with a community or broader general public profile.

[Living Positive Victoria] are trying to bring about an end to HIV stigma. Trying to use key figures or anyone with a public profile. This is someone who can talk about stigma and HIV but without necessarily being a person living with HIV.

–

My role was to champion the lives of positive people, to continue the work that I was doing in breaking down the divide between positive and negative people and, as the pledge says, to make a stand wherever and whenever I saw it [HIV stigma] publicly and privately... I took that pretty seriously.

–

Being an ENUF ambassador reminded me that I have a responsibility for it... I was quite powerful I think in its own way. Yes I have a personal interest in the area - have had for many, many years. And yes, I want to make a difference... it served as a constant reminder. And I think it did fulfil a purpose in that way.

–

The ambassadors are just wonderful and really excellent kind of communication building for the organisation because it gives Living Positive Victoria so many reasons to get in touch with people we wouldn't really be able to.

–

Evidence of the Engagement function

The number of total ambassadors engaged and the diversity of people and experiences were represented by the individual ambassadors was significant. A total of 59 ambassadors were engaged over the program's lifecycle. Ambassadors were both people living with and without HIV, representing a range of lived experiences, industries and potential spheres of influence. A number of ambassadors came from international jurisdictions, appointed to the program during the AIDS 2014 Conference.

It should be noted, however, that there are distinct subpopulations of people living with HIV who were not represented. Namely, First Nations People, people from culturally and linguistically diverse backgrounds (including people of colour), sex workers and people who inject drugs.

It was noted by a number of stakeholders that the ambassador program suffered from a lack of attention. For example, some stakeholders stated that the ambassadors were significantly underutilised and under resourced.

Even if it meant just lining up thirty-second something from an ambassador as part of the speech round, right?

–

How about getting ambassadors together and train them up, to say “these are things you can do”, or being in touch once in a while saying “is there anything that needs doing?”, “here’s an idea”, “does it make sense?”, “maybe give it a go”, “here are the latest campaign t-shirts” or for example press engagements would have been great.

–

Ambassadors had the opportunity to be champions for both ENUF, HIV stigma and Living Positive Victoria more broadly. Providing ambassadors with the opportunity to be across the latest information about HIV and Living Positive Victoria health promotion campaigns, events to participate in and exposure to the media were all raised as potential ways to have better engaged the ambassadors.

I didn’t see you very much ENUF merchandise in parliament. Could have done something with those community spokespeople that MPs are... As an ENUF ambassador in that parliament it’s not about speaking to the converted it’s about speaking to the unconverted. It’s about taking that message with you.

–

I always thought there was opportunity for Living Positive Victoria to approach the government and say will anyone any MP be an ambassador? For example, the previous health minister became a Hep Hero.

–

More than one stakeholder also commented on the lack of reach into the Victorian Parliament, with only one Member of Parliament endorsed as an ENUF ambassador, there was a missed opportunity to engage across party lines.

On the whole, the ambassadors program shows significant potential for Living Positive Victoria to consider investing adequate financial and human resources into. Such a program in the future, would need to take into consideration the engagement needs of the ambassadors. This includes providing the opportunity for them to attend and participate in events and media opportunities, education and information on the latest HIV scientific and social advances, emerging issues and priorities, as well as examples of campaign material ambassadors could share across social media and talk to.

RECOMMENDATION

Considers the future role for an ambassador-style program. This could include developing a strategic program brief to investigate the resources needed to deliver such a program and alignment with the current strategic priorities for Living Positive Victoria. Any future ambassador-style program must consider all populations of people living with and affected by HIV.

Evidence of the Alignment function

A number of stakeholders commented on the timing of ENUF program and ambassadors, in the context of the HIV epidemic in Australia. The decade after the introduction of combination antiretroviral treatments for HIV are often referred to as the “the silent years”. Some stakeholders viewed the ambassador program to be an important and necessary component to speak to the broader community about HIV and HIV-stigma and break the silent years mentality. The HIV landscape had changed but the broader public not connected to HIV personally either did not know about HIV (for younger people) or only recall the stigmatising Grim Reaper advertising campaign of the 1990s. The ambassador program was an opportunity to update the public on what living with HIV today, was like, in much the same way that public figures like Ita Buttrose OA OBE has done in the past. Therefore, there was an alignment in the timing of the ambassador program, in the absence of a public discourse on HIV.

Evidence of the Adaptation function

The ambassador program shows evidence of continual adaptation and evolution. For example, when the idea for the first ENUF Ambassador, Australian Olympian and openly HIV-positive, Jai Wallace, was engaged, it was not envisioned that the ambassador program was going to later engage so many ambassadors. It was also not originally foreseen that HIV-negative people would also be engaged as ambassadors, until Dean Beck was appointed the second ever ambassador. The ambassador program, therefore, took opportunities to engage a wide variety of public and community profiled champions for HIV stigma, as they presented. But this was also a potential weakness of the program, as discussed earlier, could have benefited from more strategic intent.

Evidence of the Influence function

Community

The ambassador program achieved significant reach into the community. In this instance, we can describe community as both people living with and affected by HIV and the broader general public. For example, there were at least two national media opportunities that ENUF ambassadors were able to profile the contemporary landscape of HIV and HIV stigma, being, Natasha Stott-Despoja on Channel Ten's The Project news and current affairs TV show and Laurina Fluer on Channel Ten's I'm a celebrity get me out of here reality TV show. While it is impossible to measure the influence these two media opportunities had on the general public, it did achieve success in terms of the reach of the ENUF messaging.

FIGURE 8: ENUF AMBASSADOR, NATASHA STOTT-DESPOJA ON CHANNEL TEN'S THE PROJECT



Evidence of reach into the communities living with and affected by HIV, is the reach into the LGBTIQ community via radio station Joy 94.9, Star Observer and former Melbourne Community Voice (MCV) community news. A number of ambassadors were profiled in community news sources, for example: Jai Wallace, Dean Beck, Melbourne Chargers Gay Men's Rugby Team, Campbell Clarkson and Ben Reithmuller, all of whom had profiles and therefore demonstrate influence on community.

FIGURE 9: EXAMPLES OF THE ENUF AMBASSADORS' COMMUNITY INFLUENCE

star observer
Setting Australia's LGBTI agenda since 1979

NEWS | VICTORIAN NEWS

HIV ADVOCATES HAVE HAD ENUF

NEWS | VICTORIAN NEWS

JAI WALLACE APPOINTED AS HIV AMBASSADOR

NEWS | VICTORIAN NEWS

RADIO TALENT JOINS HIV CAMPAIGN

SPORT

CHARGERS TACKLE HIV STIGMA

Arts and community cultural engagement

Arts and health refers to the practice of applying arts initiatives to health problems and health promoting settings. It involves all art forms and may be focused at any point in the health care continuum. It also has an impact on the determinants of ill-health by changing individuals' attitudes to health risks and supporting community resilience.

National Arts and Health Framework, 2013¹⁵

–

In this review, I have defined arts and cultural activities as 'arts and community cultural engagement'. Some of these activities could easily be classified as 'arts and health', 'arts and health promotion' and 'arts and community cultural development'. Nomenclature of community arts practices changes over time and reflects a variety of contexts and purposes.¹⁶ In this context, it refers to arts practice (visual, performing, writing), community engagement and the subject matter having a health promotion focus (HIV, sexual health, HIV stigma).

Although, there is a strong connection between HIV, arts and activism by people living with and affected by HIV since the genesis of the HIV epidemic, which continues today,¹⁷ this review is not focusing on activities that involved support or promotion of individual artists living with HIV. Some commentary on these activities is provided as an addendum to the review.

The arts and community cultural engagement activities under the ENUF Program that are considered in this part of the review are:

- ENUF voices photography exhibition, featuring the faces and personal narratives of people living with HIV from the Positive Speakers Bureau;
- Partnership with the Victorian College of the Arts that resulted in the creation of two original pieces of theatre about HIV and stigma, informed by personal narratives of people living with HIV from the Positive Speakers Bureau;
- Subsequent engagement of students from the Victorian College of the Arts in community engagement at Living Positive Victoria presence at summer festivals – Midsumma Carnival, Pride March and Shepparton ChillOut Festival; and
- ENUF photography competition.

In this section, I will provide a description of each arts and community cultural engagement activities and then provide commentary on the evidences for the Engagement, Adaptation and Influence functions of the W3 Framework. The Alignment function will be analysed more broadly for arts and community cultural engagement activities.

¹⁵ Meeting of Cultural Ministers and Standing Council on Health, *National Arts and Health Framework*.

¹⁶ Comte and Forrest, *Engaging Communities through the Arts*.

¹⁷ See: Crimp, *AIDS: Cultural Analysis, Cultural Activism*; Campbell, *Viral Dramaturgies: HIV and AIDS Performance in the Twenty-First Century*.

ENUF Voices

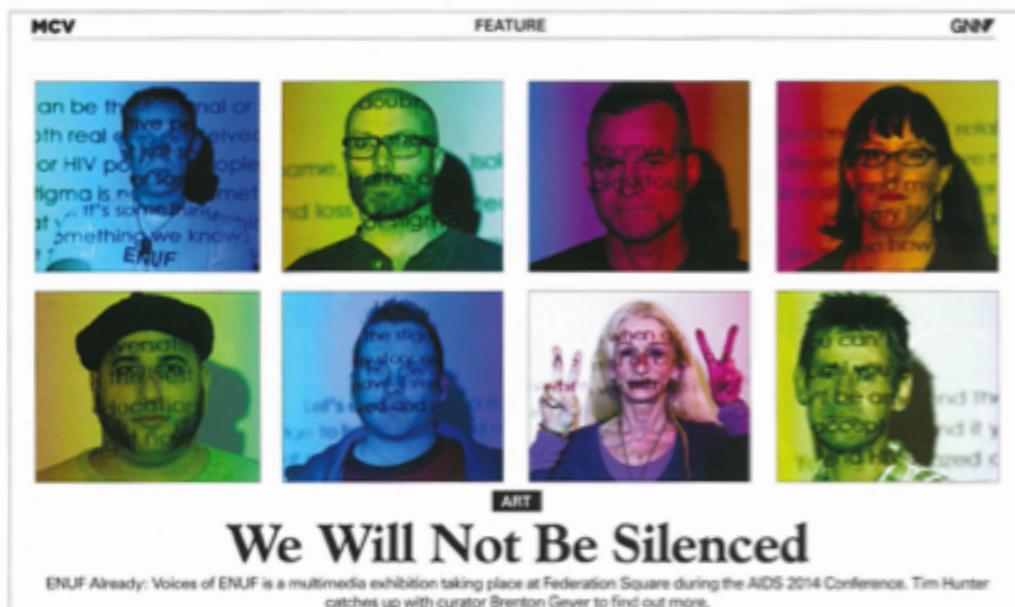
Early into the ENUF program, stories of HIV stigma and resilience from people living with HIV were sourced by Living Positive Victoria and were included in the first ENUF campaign. But these stories/text and the people who wrote them went on to be central themes in the ENUF Voices exhibition.

Melbourne-based photographer, Alexander Edwards, inspired by the ENUF campaign approached Living Positive Victoria, with a concept for a photography exhibition focusing on the theme of HIV stigma. The exhibition was to coincide with the cultural program of the AIDS 2014 conference. Edwards projected the stories/text onto the faces of the authors of the text and took portrait photographic images of these people.

The inaugural exhibition was held in the Atrium at Federation Square, Melbourne and went on to tour Prahran Town Hall, Malvern Town Hall, Frankston Arts Centre and Darebin Arts Centre.

The exhibition was curated by Brenton Geyer.

FIGURE 10: EXAMPLES OF IMAGES FROM ENUF VOICES, MELBOURNE COMMUNITY VOICE (MCV)



Victorian College of the Arts (VCA) Partnership A

In the lead up to the AIDS 2014 conference, the Victorian College of the Arts approach Living Positive Victoria to engage in a partnership with the performing arts undergraduate (acting) and postgraduate degree (directing, theatre design) courses. The aim of the partnership was to seek input from people living with HIV so that the students could create original pieces of theatre on themes of HIV.

Speakers from the Positive Speakers Bureau were engaged to provide their narrative of living with HIV to the students from the VCA. The students then used the speakers' stories to inform their work.

Two theatre pieces, Plus Sign Attached and (Un)Clean were created and had public performances. A documentary of the process was also created by the VCA.

VCA Partnership B

A handful of VCA acting students approached Living Positive Victoria after the initial partnership with the Victorian College of the Arts, inspired by the ENUF cause to see an end to HIV stigma and discrimination. The students created works for public spaces in the style of performance art with ENUF themes as centre. These works were then performed/staged at the summer LGBTIQ festival events to engage punters at the festival stalls held by Living Positive Victoria. Events included Midsumma Carnival, Pride March and ChillOut.

ENUF Photographic Competition

Living Positive Victoria put out a national call for people living with HIV to submit photographs and accompanying text on themes connected to the ENUF Program. One photo would be selected by a panel of ENUF Ambassadors, with a cash prize for the winner. All photographs that were submitted were then curated by Brenton Geyer in a public exhibition held in the Atrium at Federation Square.

The winner of competition was an Aboriginal gay man living with HIV from New South Wales, whose photographs told his story of resilience after facing homelessness and having undergone treatment for a rare cancer.

Evidence of the Engagement function

ENUF Voices

Most stakeholders were able to identify ENUF Voices photography exhibition as a critical and memorable part of the ENUF Program. The exhibition profiled a diversity of people living with HIV as they stood with words from their personal narrative projected onto their faces and clothed upper torsos. One of the successes of the exhibition, was that it profiled and engaged many of the Positive Speaker Bureau's talented speakers, a program that could be considered 'the jewel' in Living Positive Victoria's metaphorical crown.

The exhibition opened at Federation Square as part of the cultural programme for AIDS 2014. This provided a global audience for a local response to HIV stigma. The exhibition then went on to tour inner city (Prahran), suburban (Malvern, Preston) and periurban (Frankston) arts centres across greater Melbourne. Touring the exhibition meant that there was a wider engagement of people with the themes of the ENUF Program.

There was also the engagement of individuals who were the subject of the portraits. Of those participants who I interviewed, all reported the transformative nature of having their image and words brought into the public realm. Transformative, in that the exhibition gave more impact to their words, while also creating an inner strength and resilience to be publicly declaring both their HIV status and calling out HIV stigma and discrimination.

One key element of arts and community cultural engagement is that engagement in the subject matter (health promotion, advocacy) occurs in both participant and audience groups, and their networks and this is demonstrated by the evidence.

One criticism could be that the exhibition was not also able to reach audiences in regional Victoria. Living Positive Victoria could gain benefit and local insight from forming partnerships with organisations and groups in regional Victoria. It may be worth also facilitating a discussion with Regional Arts Victoria.

RECOMMENDATION

Investigate ways to engage audiences in regional Victoria with partnerships with local services, regional arts and cultural venues and local government, including Regional Arts Victoria.

VCA Partnership A

The VCA partnership engaged a group of students had not been exposed to the public health campaign in the 1990s and who had not benefited from impactful sexual health education specifically about HIV.

Young people... aren't really aware, or the awareness has dropped, not just about HIV but about sex and sexual health in general. They were... galvanised. The whole group of students really took it on.

–

There is strong evidence of engagement of the VCA students with Living Positive Victoria, the Positive Speakers Bureau and the ENUF Program themes. Importantly, it engaged an audience who were potentially at risk of HIV, especially those students who identified as queer.¹⁸

The students weren't the only audience who were engaged:

The audience is friends, and family and interested parties in the arts community, industry people and there are people who were engaged through Living Positive Victoria... there was a really strong response to the nature of event... There was generally "oh wow I knew nothing about this" kind of reaction. In terms of informational or awareness raising campaign it absolutely worked but I suspect that the impact was most strong on the people involved in making the project rather than those who saw it.

–

There is an opportunity to continue to engage relevant audiences in the process of the works, through the documentary created by the VCA. This film, while not attempting to replicate the experience of engaging in and with live theatre, provides evidence of the efficacy of the partnership and shows the development of VCA students through engaging with the Positive Speakers Bureau.

From the perspective of documenting experiences of the HIV epidemic, the VCA film provides a local context of how Living Positive Victoria and the Positive Speakers Bureau go about engaging a group of people who benefited from health promotion activities, promoting both the agency and the impact of programs such as the Positive Speakers Bureau.

RECOMMENDATIONS

Partner with the Victorian College of the Arts in screening the Plus Sign Attached / (Un) Clean documentary film to wider Victorian audiences.

The VCA documentary film be considered as part of Living Positive Victoria programs and workshops for people living with HIV, such as Phoenix, Gen Next, Positive Speakers Bureau training, etc.

¹⁸ Includes lesbian, gay, bisexual and queer identifying individuals.

VCA Partnership B

The further interest of VCA students and alum in engaging with Living Positive Victoria in health promotion activities connected to the ENUF Program themes is further evidence of the successful Partnership A.

Through the summer festivals partnership, Living Positive Victoria were able to engage LGBTIQ audiences in both Melbourne and Daylesford. To engage this audience in HIV-related health promotion activities, it could be argued, is quite difficult due to the closeness of the audience to the subject matter. That is, for community connected sexuality and gender diverse people, the sheer exposure and relationship to HIV may mean it is a harder psyche to break through to.

Therefore, to use a performance-art approach to get the ENUF message out to a 'woke' audience was an effective engagement strategy. Further, that some of the set-up of the art was to engage the audience in performative activities, taking a more energetic and 'fun' approach to such heavy topic like HIV stigma.

ENUF Photographic Competition

This activity was partially successful when considering the Engagement Function. Of those people living with HIV who participated in the competition, the diversity of the stories told in pictures and words demonstrate a serious consideration of the ENUF themes. Entrants came from three Australian states, although in small numbers from states other than Victoria and from people living in regional or rural Australia.

The competition engaged people who might not have previously considered engaging with Living Positive Victoria programs in the past.

What led me to enter the competition was that I've had so many negative connotations post-[HIV] diagnosis, that I wanted to even up the playing field, so I got some positive vibes about being positive.

–

Being a national competition, there was potential for more diverse and broader engagement of people living with HIV, and short lead times on the project should be considered responsible for this failing. That said, the model for this arts and cultural engagement activity was sound, but time is an important ingredient for genuine and meaningful engagement, particularly if involving jurisdictions were Living Positive Victoria does not have established direct communication with people living with HIV. Therefore, it is critical to engage (or partner) with the National Association of People with HIV Australia and the state-based positive voice organisations, if Living Positive Victoria is to attempt arts and cultural engagement activities with a national scope.

There is potential for this kind of model (the engagement of a group of individuals through participatory arts practice around shared themes) could be applied to specific groups of people living with HIV. Moreover, the arts activities could be culturally aligned and informed for target group to engage with health promotion in a less formal way. There is potential to partner with existing organisations to further arts and community cultural engagement activities, for example, Women's Health West, Footscray Community Arts Centre.

RECOMMENDATION

Partner with other organisations in arts and community cultural engagement activities as a way of reaching different audiences who would benefit from HIV-stigma-related health promotion activities (both those living with and without HIV).

Evidence of the Adaptation function

ENUF Voices

ENUF Voices was initially conceived within the context of the AIDS 2014 Cultural Program. The fact that the exhibition went on to tour other exhibition spaces within greater Melbourne demonstrates the adaptation function. Living Positive Victoria were able to identify and execute a life for the exhibition and reaching audiences beyond AIDS 2014.

VCA Partnerships A and B

There is evidence of adaptation among the VCA students and Living Positive Victoria in relation to the VCA partnerships. Partnership B came about only because of Partnership A – students saw an opportunity to further engage in the themes of ENUF and adapt their practice to produce works that differed to those performed in Partnership A.

Similarly, Living Positive Victoria demonstrated adaptation in working with the VCA students and adapting their summer festival health promotion stalls to place ENUF themes front and centre, while also presenting a unique take on health promotion and HIV stigma. This shows that Living Positive Victoria is capable of seizing opportunities when they are also strategically aligned.

ENUF Photographic Competition

There is no evidence for the adaptation function for this activity. However, should Living Positive Victoria attempt to undertake this model of activity in the future, the reimagining of this kind of arts and community cultural engagement activity must demonstrate adaptation in order to be successful.

Evidence for the Influence function

Community

ENUF Voices

It is impossible to quantify the influence ENUF Voices had on the audience, without surveying or interviewing audience members. Interviews with stakeholders did not address the influence function as it specifically related to ENUF Voices. In addition, this activity was one of the first of the ENUF Program, four years prior to the interviews. Stakeholders were able to identify and evidence that engagement was the strongest indicator for this activity.

That said, it is possible to document the influence this exhibition had on the individuals involved in the project. This was a first of its kind within a contemporary context of HIV, in that people living with HIV were putting a human face and their own words and experiences about HIV stigma into the public realm. The influence this had on other people living with HIV was personal. It could be argued that this led to a broader empowerment of people living with HIV able to disclose publicly their status.

VCA Partnerships A and B

These partnerships had a profound influence on the students involved in the activities. Every stakeholder from the VCA commented on this fact. The influence was multifaceted. First, there was the influence the speakers from the Positive Speakers Bureau had on the performing arts outcomes:

It's one thing to have general stories but it's another thing completely to get the specifics of people's lives and the reality of their world and experience. That's what brought it home, that's what makes the difference is the human connection.

–

The speakers were the most significant eye-opening experience for the students.

–

There was someone who just graduated from the drama school, so the students knew him well. He had just two or three months [before] been diagnosed [with HIV]. He came in and talked to us as well and that was something that really brought it home. We're not talking about other people here, we were talking about us.

–

The partnerships also influenced the VCA students in their knowledge about sexual health and their HIV testing practices, both individually and among their peers.

...many of them had absolutely no exposure to any of the issues at all. I didn't realise how little people knew about the history of the AIDS epidemic or even about the facts of HIV and how it is transmitted, what type of virus it is and really very little about the era of awareness of stigma was very low.

–

They were experts - not just empowered to do those things [going for an HIV test], but to engage with some of the science as well. I think they would be going for tests and evangelising to other people such as their friends.

–

The partnership also had influence on a range of the student's own and collective performing arts practices.

From our perspective, it was so successful and completely changed the curriculum and what that group did, how they saw themselves and probably what they've gone on to do as well. Afterward they were more empowered, the queer students in the group, to go on and make work about their lives and what they thought was important.

Therefore, the partnerships with the VCA were successful at influencing a new generation of change makers, increasing their health literacy, encouraging sex positivity and sexual health screening, as well as the students themselves influencing their peers.

ENUF Photographic Competition

The ENUF Photographic Competition had the greatest influence on the participants, people living with HIV. Specifically, the winner of the competition reported that the experience had enabled him to disclose his HIV status for the first time publicly:

I completed the interview with [NAPWHA's] Positive Living Magazine and shared the story on my social media. That was the first time I've been public about my status. It was really empowering.

–

The prize money was spent on relocating the winner's piano interstate. For the winner, their piano provides an important activity that has a therapeutic effect on their mental health. In this instance, having the piano back in their company, provided an opportunity for the winner to connect with his niece.

My niece won a viola through this competition. She had to learn this chord sequence, so I did these little lessons or studies based on the notes and played those on the piano for her.

–

The evidence suggests that there was a strong indication of influence the competition had on the winner and other entrants. This type of model for empowering individuals living with HIV to tell their stories of resilience (and stigma) through an artform can have a profound effect, and offers an alternative approach to building resilience.

Policy

VCA Partnership A and B

The partnership models demonstrated in both A and B projects have the potential to impact upon the policy approach for Living Positive Victoria. There should be no hesitation for Living Positive Victoria to embark upon this kind of arts and community cultural engagement activity in the future, where there is strategic alignment with the partner organisation. It would, however, be useful to capture some of the successes and lessons learned from Partnership A (if it hasn't already been done) to inform appropriate resource allocation.

RECOMMENDATIONS

Identify opportunities for partnerships that follow a similar arts and community cultural engagement model as demonstrated in VCA Partnership A.

Successes and lessons learned from VCA Partnership A be documented to inform resource allocation if this kind of activity is pursued in the future.

Evidence of the Alignment function

In this section, I consider arts and community cultural engagement activities on the whole and where and how there is a demonstration of the Alignment function for Living Positive Victoria.

There is an existing strong body of published evidence of the benefits of arts and community cultural engagement, particularly how it related to health promotion outcomes¹⁹ and even healing.²⁰ For example, there is a strong association between mental health and social connection. For people living with HIV, particularly those experiencing social isolation, may benefit from engaging in arts and cultural activities as an alternative health promotion, health literacy and treatments knowledge activity. One paper²¹ that discusses the National Arts and Health Framework, states:

Just as sports engagement does not need to be therapy to influence public health, arts engagement (in its own right) influences health, health determinants and quality of life.

Importantly, arts and community cultural engagement activities must align with a strengths-based approach, rather than focusing on deficits. A strengths-based approach features empowering narratives that align with the aims of reducing HIV stigma and discrimination both externally and internally for people living with HIV.

RECOMMENDATION

Future arts and cultural engagement activities to align with a strengths-based model.

¹⁹ See: Cameron et al., *Promoting Well-Being through Creativity*; Clift, *Creative Arts as a Public Health Resource*; Davies et al., *Arts, Public Health and the National Arts and Health Framework*.

²⁰ Stuckey and Nobel, *The Connection Between Art, Healing, and Public Health*.

²¹ Davies et al., *Arts, Public Health and the National Arts and Health Framework*.

Further commentary on the arts and community cultural engagement

There are other arts and community cultural engagement activities that Living Positive Victoria have participated in supporting both financially and in-kind by way of promotion and other support. These activities did not come under the ENUF Program, but it would be remiss not to reflect upon successes and lessons learned as an observer.

Supporting artists living with HIV whose work has strategic alignment with Living Positive Victoria's programs, events, policy positions and advocacy or advances similar aims to those of Living Positive Victoria is critical for the agency and for the artists living with HIV. However, it is essential that the kinds of support being offered are defined and communicated to interested parties to help manage responsibilities and expectations of all parties.

For example, support could comprise any of the following:

- Marketing and promotion through Living Positive Victoria's communication channels;
- Letter(s) of support:
 - arts grants applications to state and local government, and philanthropic organisations; and
 - individual donors or fundraising activities.
 - Making introductions to potential stakeholders in health and social services, particularly where there are strong existing relationships;
- Establishing a relationship with Regional Arts Victoria as an opportunity to refer artists wishing to pursue work in regional Victoria; and
- Use of Coventry House facilities (board room, yoga room), subject to availability, for workshops and rehearsals.

It is important to note that Living Positive Victoria is not an arts producer and should avoid entering a co-producer relationship with individual or groups of artists living with HIV. (This comment doesn't include engaging and leading activities like ENUF Voices nor the ENUF Photography Competition).

It would be beneficial for all parties for Living Positive Victoria to formalise a policy and process of engagement with artists living with HIV who are seeking support from Living Positive Victoria. The process should include:

- Description of the support offered by Living Positive Victoria;
- Clear timelines (lead times, deadlines) to ensure that Living Positive Victoria communications can be scheduled in a timely manner including responsibilities for the artist (providing draft copy, media release, images, images copyright release form); and
- Letter Agreement or similar, documenting the agreement between Living Positive Victoria and the artist(s).

RECOMMENDATION

Formalise a policy and process for engaging with artists living with HIV who are seeking support from the agency.

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Appendix 1: ENUF Pledge

I pledge to challenge HIV stigma whenever and wherever I see it.

I will not sit by and allow anyone living with HIV to fear disclosure.

I will take action when I see others gossiping about, rejecting and/or promoting negative stereotypes about people living with HIV.

I commit to being part of the solution, not part of the problem.

–

Appendix 2: ENUF Ambassadors

Rowena Allen

Victorian Commissioner for Gender and Sexuality

Prof. Dennis Altman AM

Professorial Fellow in Human Security, La Trobe University

Dean Arcuri

Performer, Journalist, Media Commentator and Gender Activist

Mo Barry

HIV/AIDS Activist

Dean Beck

Journalist, Media Commentator and HIV/AIDS Activist

Rachel Berger

Writer and Entertainer

Edwin J Bernard

Global Coordinator of the HIV Justice Network

Deanna Blegg

HIV/AIDS Advocate

A/Prof. Alyson Campbell

Associate Professor in Theatre, Victorian College of the Arts

Melbourne Chargers

Melbourne's Gay Men's Rugby Team

Cameron Clarkson

HIV/AIDS Activist and Youth Advocate

Leonie Derr

Young Adult Librarian, Melbourne Library Service

Chris Driscoll

Publican and Event Promoter

Dr Beng Eu

Director, Prahran Market Clinic

Laurina Fluer

Reality television celebrity

Eric Fleutelot

Regional Advisor on Global Health in South East Asia

Sam Hibbins MP

Victorian State Member for Prahran and Victorian Greens Spokesperson for LGBTI People

Nic Holas

HIV/AIDS Activist, Writer and Journalist

Prof. Jennifer Hoy

Director of HIV Medicine at the Alfred Hospital and Monash University

Tony Judson

HIV/AIDS Advocate and Healthcare Professional

- Richard Keane**
HIV/AIDS Activist and former President Living Positive Victoria
- Mike Kennedy**
Chair, Victorian Ministerial Advisory Committee on LGBTI Health and Wellbeing
- Paul Kidd**
HIV/AIDS Activist and Writer
- Mark S King**
HIV/AIDS Activist, Writer and Journalist
- Dr Chris Lemoh**
Infectious Diseases Physician, Monash Health
- Prof. Sharon Lewin**
Director, The Peter Doherty Institute for Infection and Immunity
- David McCarthy**
HIV/AIDS Advocate and Media Commentator
- Craig McLure**
Associate Director and Chief of HIV/AIDS Program Division for UNICEF
- Daniel MacPhail**
HIV/AIDS Advocate and PrEP Activist
- John Manwaring**
HIV/AIDS Activist
- Tass Mousaferiadis**
HIV/AIDS Advocate and Media Commentator
- Prof. Rob Moody**
Professor of Public Health, University of Melbourne
- Anmarie O’Keefe**
Non-resident Fellow, Lowy Institute, Pacific Islands Program
- Marama Pala**
Chair, International Council of AIDS Service Organisations (ICASO), Canada
- Nic Parkhill**
Chief Executive Officer, ACON
- Mitchell Payne**
HIV/AIDS Advocate
- Susan Paxton**
HIV/AIDS Advocate
- Ben Reithmuller**
HIV/AIDS Advocate
- Olivier Rescaniere**
Member, Institut Pasteur for Research, Health and our Future
- Prof. Juergen Rockstroh**
Professor of Medicine and Head HIV Outpatient Clinic, University of Bonn
- Yolanda Simon**
Regional Coordinator, Caribbean Regional Network of People Living with HIV/AIDS
- Catherine Smith**
HIV/AIDS Advocate
- Senator Dean Smith**
Liberal Senator for Western Australia
- Ian Smith**
Corporate Advisor and Founder, Bespoke Approach
- Damien Stevens**
Community Development Worker, Kildonan Uniting Care’s Diversity Project
- Natasha Stott-Despoja**
Australia’s former Ambassador for Women and Girls and former Leader of the Australian Democrats
- Sean Strubb**
HIV/AIDS Activist and Founder of POZ Magazine
- Sönke Tremper**
Former Chair, Goulburn Valley Medical Workforce Fund
- Ji Wallace**
HIV/AIDS Advocate and Australian Olympian
- Prof. Andrew Way**
Chief Executive Officer, Alfred Heath
- Jessica Whitbread**
HIV/AIDS Activist
- Chris Williams**
HIV/AIDS Advocate and PrEP Activist
- Paul Woodward**
HIV/AIDS Advocate, Director/Dramaturg, Performer and Storyteller

Appendix 3: Interview questions (final version for online survey)

1. How did you first come in contact with the ENUF campaign, activities and events?
 - a. Comment:
2. In your own words, what was the campaign trying to do?
 - a. Comment:
3. The campaign has been multifaceted. Which components are you aware of?
 - a. Anti-HIV-stigma health promotion messages
 - b. ENUF Ambassadors
 - c. Stories of people living with HIV
 - d. Community cultural engagement (HIV and the arts)
 - e. ENUF pledge to call out HIV stigma
 - f. I was not aware of the campaign, activities or events
4. What impact did the campaign have on your personal or professional understanding of HIV stigma?
 - a. A great deal
 - b. A lot
 - c. A moderate amount
 - d. A little
 - e. None at all
 - f. I had an existing understanding of HIV stigma
 - g. Comment:
5. Did the ENUF campaign, activities and/or events prompt you to talk about HIV? Who did you speak to?
 - a. My partner, spouse or lover
 - b. Family (parents, children, aunts, uncles, cousins, etc)
 - c. Friends
 - d. People living with HIV
 - e. Colleagues
 - f. The public
 - g. No one
 - h. Other (please specify)
6. What did the ENUF campaign, activities and events do well?
 - a. Comment:
7. What would you recommend Living Positive Victoria consider when planning anti-HIV-stigma campaigns in the future?
 - a. Comment:
8. Did the ENUF campaign, activities and events utilise contemporary experiences of HIV stigma?
 - a. Yes
 - b. No
 - c. Comment:
9. Who are you?
 - a. Person living with HIV
 - b. Clinician
 - c. Researchers
 - d. Community health worker
 - e. Media
 - f. Other (please specify)

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