

# Annual Report 2002 – 2003



4 The Parade, Norwood SA 5067 ● PO Box 782, Kent Town SA 5071  
Phone: 8362 8443 or 1800 021 133 (Regional Callers)  
Fax: 8362 8559 ● Email: [admin@hepcouncilsa.asn.au](mailto:admin@hepcouncilsa.asn.au)  
[www.hepcouncilsa.asn.au](http://www.hepcouncilsa.asn.au)

September 2003

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# 1. Board members

Chairperson	Helen Johns
Vice Chairperson	Dean Wilkins
Secretary	Fred Robertson
Treasurer	Barry Horwood
Members	Debraha Bills
	Craig Ratcliffe
	Penny Mount
	David Arnold
	Catherine Bunting
	Peter Underwood

# 2. Staff



Laurie Schapel  
Manager



Deborah Warneke  
Metro Educator



Sharon Drage  
Community Programs



Leslie Wightman  
Rural Education  
Officer



Janette Chegvidden  
Volunteer Coordinator



Kristy Schirmer  
Information Officer



Steve Bobyk  
Newsletter Editor



Sabine Whittlesea  
Administration Officer  
Website Administrator



Catherine Healy  
Administration Officer



Fred Robertson  
Administration Officer



Farewelled Staff: (L-R)  
George Valiotis, Jeanette  
Dal Santo, Liz O'Keefe,  
Kerry Paterson

### 3. Chairperson's Report

I have been on the Board of the Hepatitis C Council of South Australia for two years and took on the position of Chair when it became vacant in October last year. There have been several staff changes. In this past year the Council said goodbye to Kerry Paterson as Manager. Liz O'Keefe took on the role as "caretaker" Manager for six months. I would like to thank Liz for taking on the role and keeping staff and volunteers motivated through the transition. In March this year, the Council welcomed Laurie Schapel as Manager.

Throughout this time the staff and volunteers showed great strength in maintaining the Council's service delivery to the affected community. It was incredible to witness the way the staff and volunteers handled the change that surrounded them. Their professionalism, expertise in the issues and their dedication to the Council was highlighted at this time. I would like to thank all staff and volunteers for their dedication throughout the year but particularly through the change in management. Services provided continued to increase during this time. Well done.

Awareness Week was held in November 2002. This is a great opportunity to raise broader community awareness of hepatitis C and the related issues. The staff and volunteers worked tirelessly to provide information, raise awareness and support other organizations working with at risk communities in educating them.

As stated, services provided by the Council to the affected community have continued to grow. 88,000 information resources were disseminated in the past financial year. The Hep C Info and Support Line took nearly 900 calls and the support groups have been maintained. There has been an increase in the number of people accessing information from the Council's website.

The Council is represented on various state and national bodies having direct input and influence on policy. This is integral in maintaining services and voicing the affected communities' concerns. The Council works in collaboration with a variety of agencies to provide the best services for those affected by hepatitis C.



Helen Johns  
Chairperson

With the metro educator's hours extended it has given the Council the opportunity to develop networks with workers from the areas that are outlined as priority areas in the key strategies. Congratulations to staff for gaining great inroads into the Indigenous and homeless community by engaging with at risk people at BBQ's in the parklands. This opportunity would not have been realized if not for the credibility, expertise and level of workers skill.

The Board has also evolved over the past year. Recently, training has been provided to the Board on aspects of management. This has greatly increased the enthusiasm and

capacity of Board members. The commitment of the Board has been highlighted by the attendance on weekends for this training.

Once again I would like to thank staff and volunteers for their continued commitment and enthusiasm. I would also like to thank the Board members and to those that are leaving us this year I wish them all the best. Thanks also to the many individuals and organizations that support the Council and its activities.

I am looking forward to the next twelve months. I can see the enormous opportunity we have presently with dedicated staff, volunteers and management. The Council can enjoy some stability around staffing and increased opportunities for awareness raising, education, support and advocacy for the affected community.

**Helen Johns**  
Chairperson

## 4. Manager's Report

I have only been in the role as Manager of the Hepatitis C Council of SA for three months. It has been a challenging and rewarding time. As in most cases there are always going to be challenges when taking on a new position in an already established organisation. Fortunately for me the groundwork had been well established by Kerry in her time and then given a bit of polish by Liz so the transition was a reasonably smooth one. I think it would be very remiss of me not to thank both of those people for their input into the organisation during the past 12 months and also in helping me through the early days of adjustment. I would also like to thank all the staff and the Board for their support and help and in particular Barry and Leslie for their wealth of knowledge, experience and patience.



Staff and volunteers farewelling Kerry

We continue to be funded by HHARP, however due to an internal review our funding for next year has been rolled over. The good news is that the Volunteer program is continuing to be funded with the recurrent funding. At this stage we remain unsure of the future funding for the rural program. The funding for this is due to finish in August and although we have made every effort to find out if it may continue – including writing to the Minister we do not at this stage have an answer. Some small additional grants were received during the year for volunteer training and an Arts Therapy program. In the latter part of the year we did a joint submission with Aboriginal Drug and Alcohol Council and DASC for a rural youth Indigenous program. The submission went to National Illicit Drugs Strategy for \$80,000.

The State Hepatitis C Strategy has continued to evolve over this time and has progressed considerably, however there is still not a release date for when it will go to the Minister. The Council has been actively involved in the process to ensure the affected communities have had adequate representation.

We have continued to advocate strongly at both the state and national levels on issues relating to hepatitis C. We have addressed a diverse range of issues for our community and in that process our own knowledge and experience continues to grow. These issues range from workplace discrimination, misinformation about the virus, fear following diagnosis and complaints about doctors. One of the more challenging issues related to transportation of a deceased person to another country.

There has been a recognition that we need to continue to work in partnership with other agencies to create innovative health promotion strategies. This will contribute to the reduction of new infections while concurrently promoting the health and well being of communities affected by hepatitis C. Working in various partnerships will also enable us to offer services in more accessible locations across the state.

During the year the council has had representation on a number of working groups and committees. These include: AHC, SAACHHARD, OARS, State Strategy Working Group, C Clearly, Hoi Sinh, ADAC, Hepatitis C Network, CWYAN, SA Primary Health Care Policy Forum plus working groups around resource production and training packages.

Now that we have permanent staff settled again into their positions we are all looking forward to the next year and its new challenges.

**Laurie Schapel**  
Manager



Laurie Schapel  
Manager



# 5. Project Reports

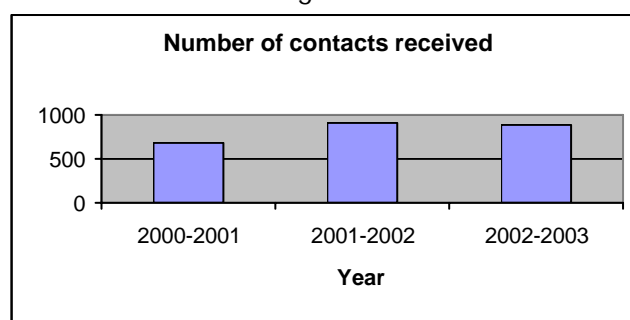
## Information Program

### Hep C Info and Support Line

The Hepatitis C Council provides information and support on hepatitis C and related issues. Where possible, contacts are taken by trained peer information officers. Thanks must be extended to these workers who provide this excellent service to the South Australian community.

In 2002-2003, the Hep C Info and Support Line received 891 contacts. This is a slight (but not significant) decrease from the previous year when 898 contacts were received. See figure 1.

Figure 1



While most of the contacts (over 90%) received by the Hepatitis C Council were via the telephone (including a freecall 1800 number for SA regional/rural callers), others chose to contact us by email or by visiting the council for a "face to face" information session.

The geographical spread of people contacting the Council showed that the majority of contacts were received from the metropolitan area (83.1%), and rural/regional areas made up 13% of contacts. The remaining contacts were received from interstate or overseas.

65% of contacts were from the Council's primary target group being those living with, or affected by, hepatitis C. The majority of the remaining contacts were from the health sector, other workplaces or students.



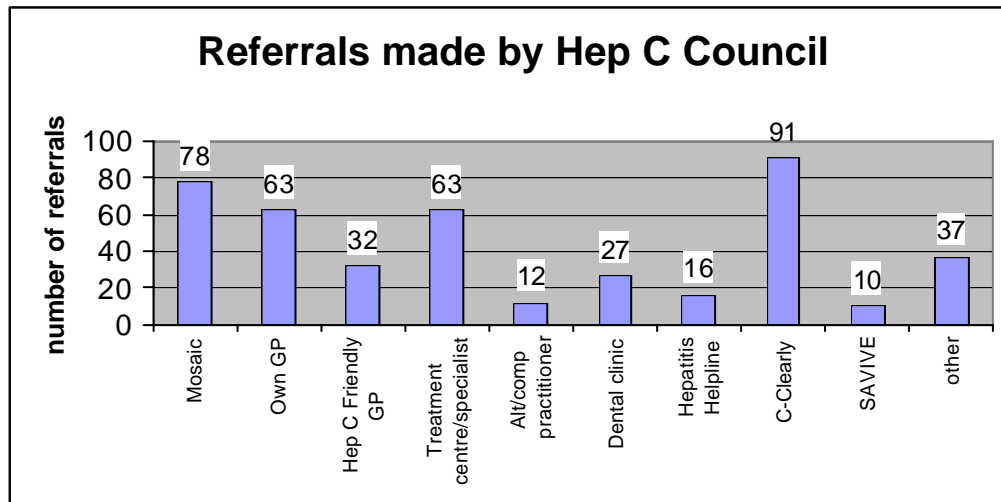
Contacts from the primary target group were received, on average, more from females than males at an approximate rate of 1.25:1

The Hep C Info and Support Line provides a range of information about various hepatitis C issues including testing, transmission, treatment, healthy eating, discrimination and disclosure (and many other areas). The most commonly discussed topics were natural history, transmission, testing, and Hepatitis C Council services. Also noteworthy is that over 16% of all contacts involved a discussion about discrimination or disclosure.



The Council remains an important point of referral to other services. This year we made 429 referrals to services outside the Hepatitis C Council including C-Clearly, Mosaic, or to a specialist. A breakdown of different referral services can be seen in figure 2.

Figure 2



Feedback provided by clients continues to be positive and is often an expression of gratitude for the chance to speak to someone who takes time to listen without being judgemental. Many clients express relief for being able to talk to someone who themselves is affected by hepatitis C. This service is crucial not only in empowering the affected community to better increase control over their health, but also in reducing the isolation and fear of discrimination in disclosing their Hep C status.

Feedback given on Council Services over the past year includes:

[Redacted] The info sent in the mail was received with many thanks.  
 [Redacted] they (the resources) will be of great use to me  
 Some of my ignorance has been controlled (nurse)  
 Thanks for listening to me  
 I found the answers to my questions – thanks for well trained  
 workers who are supportive and knowledgeable  
 It is comforting to know I'm not alone

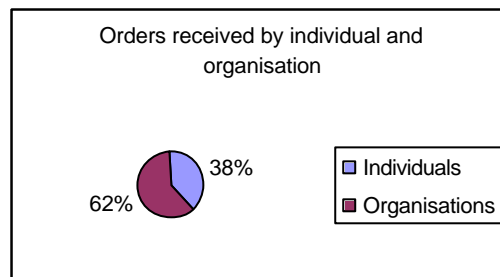
### Information Resources

The Hep C Council produces a wide range of information resources on hepatitis C and related issues that are distributed to individuals and organizations throughout South Australia. The Council also distributes hepatitis C information resources produced by other organizations.

The Hepatitis C Council received a total of 653 orders for resources this financial year. This is a 12% increase in orders received compared to last year. 247 (37.8%) of orders were received from individuals resulting from contacts.

406 (62.2%) of orders were received from organizations requesting bulk resources to then distribute themselves. See figure 3.

Figure 3

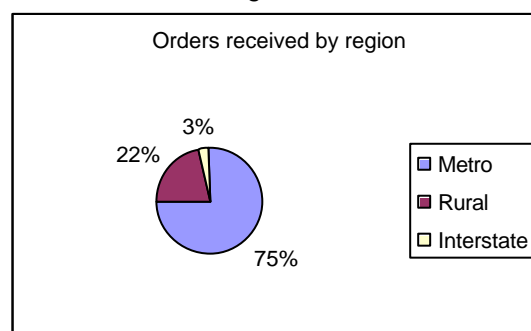


Of the orders received from organizations:

- 301 (74.1%) were received from metro areas
- 91 (22.4%) were received from rural/regional areas
- 14 (3.4%) were received from interstate

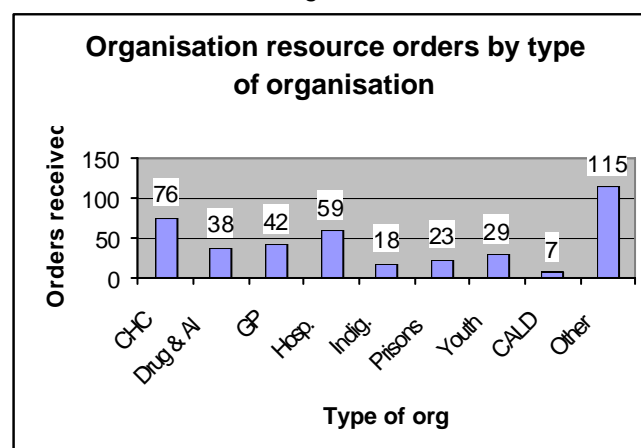
See figure 4.

Figure 4



Each order for resources received by an organization was categorised by the type of service that organization provided. Specifically, the categories were: community health centre (CHC); drug and alcohol; GPs; hospital; Indigenous; prisons; youth; CALD; other (comprising of a range of services including housing/homelessness, government agencies and universities). See figure 5.

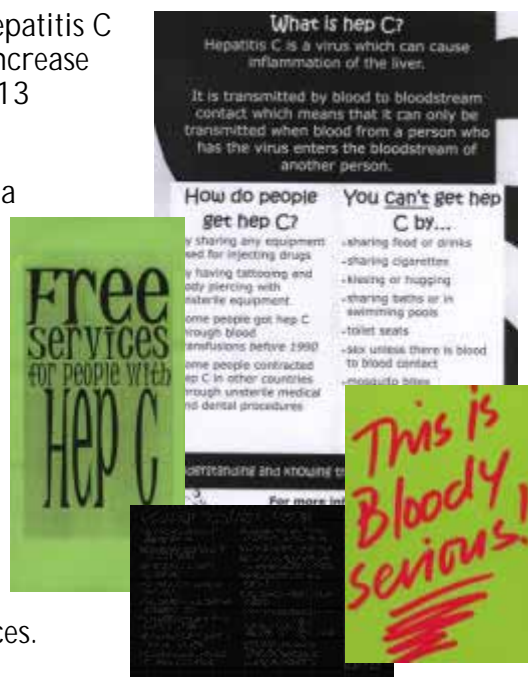
Figure 5



In total 88,014 resources were distributed by the Hepatitis C Council of SA in 2002-2003. This is a substantial increase compared to the previous financial year when 54,213 resources were distributed (an increase of 62%).

The increase in distributed resources was a result of a combination of factors, including improved collection of data across the Council, planned resource drops to agencies by the volunteer program and Hepatitis C Awareness Week which involved distribution of information to a variety of services.

New resources developed by the Council included the "Basic Hep C" poster, "Free Services for people with Hep C" pamphlet and an Awareness Week "This is Bloody Serious" poster and postcard. The Hepatitis C Council also collaborated with a range of other agencies in the development of new resources.



### Hepatitis C Awareness Week

Hepatitis C Awareness Week was held from November 4-10 2002. With a great deal of planning and the fantastic efforts of a multi-agency steering committee, Awareness Week once again proved to be an exercise in demonstrating the strength of the Hepatitis C sector and the Hepatitis C Council.

It was felt that the focus for Awareness Week this year should shift to help promote Hep C prevention messages particularly for young people. In the past our Awareness Weeks have aimed to shed misinformation in the community with the aim of reducing stigma and discrimination. Although this year we wanted to achieve this goal, we also wanted to target a slightly different audience.

The slogan "This is Bloody Serious!" was adopted as the key message to attract people to learn more about hepatitis C.

*This is Bloody Serious!*

The week itself was a collection of a variety of different projects aiming to provide information and education both to the affected community (including those "at risk" of Hep C) and the wider community.

Highlights of the week included:

- The launching of Awareness Week by Rod Givney (Communicable diseases branch, Department of Human Services) held at the Festival Centre Amphitheatre
- "Let's get bloody serious" an evening for health professionals including interstate speakers Dr Ingrid Van Beek (Medical Director of the Sydney Medically Supervised Injecting Centre) and Dr Alex Wodak (Director of the Alcohol and Drug Service, St. Vincent's Hospital, Sydney) in conjunction with local health professionals



Crowd at the Awareness Week Launch

- Adelaide Train Station information stall
- The launch of the Vietnamese Hep C Prevention Poster
- Flinders uni information stall and BBQ
- Nungas and Hep C: Everybody's business information session at the Parkes Community Centre
- Adelaide Information Evening
- POPping into the prisons (with thanks to the Partners of Prisoners Program)
- Celebrating Community Achievements of the PEACE Program (with thanks to PEACE)
- HIV/Hep C Coinfection Workshop and lunch
- Roving the Riverland (Hep C Awareness throughout the Riverland area)
- Youth Theatre Workshop (a weekend where young people used dance, drama and music to express themselves and develop a tool for learning about hepatitis C prevention)
- This is Bloody Bananas! (With thanks to the Department for Correctional Services where people in prisons throughout SA received bananas with hep C information)
- Royal Adelaide Hospital Information Stall and Television info (with thanks to Catherine Bunting and Fiona Bellizzi from the RAH)



Performers at Awareness Week launch



Rod Givney launching Awareness Week



Dr Alex Wodak at "Let's get bloody serious"

- Information Display Packs (a total of 31 went to Community Health Centres throughout SA as well as going to all Clean Needle Programs with thanks to DASC)
- Hepatitis C information printed in the Messenger and Sunday Mail newspapers
- Community Service Announcements on Fresh FM youth radio station
- Several radio interviews throughout SA



Performers at the Youth Theatre Workshop

## Other Community Awareness

In addition to the work during Hepatitis C Awareness Week, the Council operated information stalls at a variety of events and venues throughout the year to raise public awareness about Hepatitis C and engage the community. Events the Hep C Council participated in included: Vietnamese Festival; Feast Picnic in the Park; Womadelaide; 1st International alcohol, tobacco and other drugs Nursing and Midwifery conference; and Adelaide University Orientation Week.



Womadelaide info stall

## Website [www.hepccouncilsa.asn.au](http://www.hepccouncilsa.asn.au)

The Hepatitis C Council of SA website received 44,094 visits during this financial year period. On average, the site received 120 visits per day. This is a 60% increase from the number of visits last year indicating the growing use of the Internet in the community in conjunction with the need for easily accessible hepatitis C information. It would appear that some people would prefer the relative anonymity of the web to access initial information about hepatitis C. Unfortunately we are unable to ascertain where hits are coming from, theoretically people could be logging on from almost anywhere in the world! Thank you to Sabine Whittlesea, Website Administrator for maintaining the website.

And finally...

I would like to extend a heartfelt thanks to all of the dedicated staff and volunteers at the Council over the past year for your hard work in contributing to the information program and the inspiration you have given me.

**Kristy Schirmer**

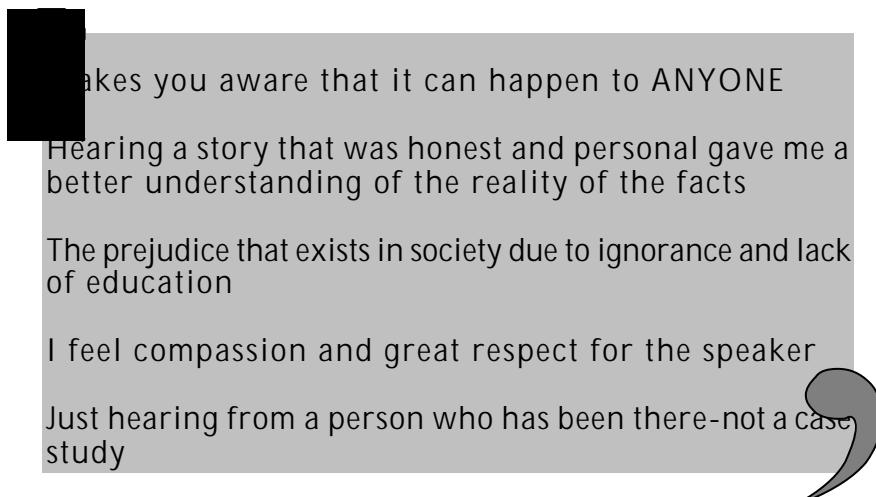
**Information Officer**

# Education Program

## Positive Speakers

Throughout the year the Council has continued to actively promote the use of positive speakers within our metropolitan education program and increasingly in rural areas in conjunction with the Rural Education Officer. Positive speakers continue to be one of the most effective educational tools in breaking down fear and stereotypical attitudes and behaviours toward people living with hepatitis C. Listening to a positive speakers story has benefited many groups including TAFE, drug & alcohol workers/students, youth workers/students, Centrelink, hospitals, nursing students and people newly diagnosed with hepatitis C. The Council has also provided speakers for GP training through the C-Clearly Program, DASC Clean Needle Program and COPE/Relationships Australia education services.

When asked what stood out most from the speaker's story comments included:



It is not uncommon for people after hearing a speaker to feel empowered and comfortable to disclose their or another family members experience with hepatitis C.

## Support Groups

The Adelaide Information Evenings are held for affected community, their family, friends and interested health care & community workers monthly at the Council premises. Guest speakers present on different topics each month with the opportunity for questions and answers. After the presentation we break for refreshments and have time for people to talk and catch up. The Council and all the people who attended Information Evenings throughout the year sincerely wish to give a big thanks to the many guest speakers who shared their expertise so freely with us. A special thankyou must go to Dr William Donohue from C-Clearly, the RAH and Mosaic for their continuing commitment and support of the affected community.


The Council is planning a treatment support network to commence before the end of the calendar year.

## Education sessions

The Council Educators presented 58 education sessions in the metropolitan area this year, a 30% increase from last year. About 1/3 of sessions were with primary target groups (those affected by hepatitis C & those at risk of infection) and 2/3 with secondary targets (those who have influence with primary targets).

Sessions were delivered to varied groups including people newly diagnosed, homeless centres for men & women, youth education, Centrelink, Social Security Appeals Tribunal, Commonwealth Rehabilitation Services, TAFE, GPs, Flinders Uni, hospitals and nursing homes. Education was also provided to people engaged in training with the Council as Positive Speakers and Info and Support Line workers. Feedback from participants was tremendously constructive, with many requesting further sessions.

The flavour of comments was as follows:



Information was clearly presented and easy to understand  
I learnt more in this 45 min than in any previous lecture  
More aware of educating younger people about hep C  
A better understanding of the problems experienced by our clients with hep C  
I will be more aware of the actual information on hep C rather than the stereotypes  
Be more consistent with infection control  
I am now more comfortable...I am informed  
To treat everyone as equals, have confidentiality, no discrimination  
Be aware of own possible discriminatory behaviours

## Deborah Warneke

Metro Educator

### Community Programs

Deborah has already covered all the statistical analysis and information relating to our shared roles as Metropolitan Educators, so I will only focus on the work I have been doing in Community Programs.

This part of my work is both challenging and rewarding. I am targeting three main groups of people: Indigenous, Homeless and Youth with some promising inroads being made in these areas. These are recognised in both the National and upcoming State Strategy as priority groups. I have also made contact with workers in both Cavan Detention Centre and Magill Training Centre. Leslie Wightman and myself have collaboratively worked on submissions with DASC (Drug and Alcohol Services



Council), and ADAC (Aboriginal Drug and Alcohol Council). I am currently working with The Second Story Youth Organisation, The Parks Aboriginal Health Service and Port Youth Theatre on a drama and dance initiative for young Indigenous people. I have attended BBQ's in the West Parklands for homeless Aboriginal people which I found to be both challenging and rewarding. I am also part of an Action Learning Group regarding homeless people and hepatitis C based at COPE. Networks in these three areas are still being developed and take time and energy, both of which I am willingly giving. I am very much looking forward to the ongoing development of these areas.



Another component of my work has been developing alternative style programs started by Jeanette Dal Santo who sadly left us in February for the Hepatitis C Council in Tasmania. Since then some of the initiatives that Jeanette had obtained funding for have been presented.



Explore yourself through Art, an initiative sponsored by DASC, ran from 10 am-4 pm on one Saturday a month during May and June 2002/2003. Sessions were really successful and attracted 10 women. The women worked with clay and paint, and also got interested in drumming and chanting.



Lunch was a time for making new friends and eating healthy food. A great time was had by all. I would like to say thankyou to Gina Allain and Debra Cooper the Art Therapists who had such a large amount of input into this. These two dynamic women did an excellent job.

Explore yourself  
through Art pieces

Meditation Evenings have been going now for some time on Tuesday evenings and have attracted 16 people. Usually there are between 5 and 9 people at any one meditation evening. The feedback for these has been impressive.

The Hepatitis C Council of South Australia was successful in obtaining funds for a Mosaic project for youth during this time also. This project is to operate across 6 different groups of young people and will stretch across next financial year as well. This initiative is very exciting. A special thanks needs to go to Jeanette Dal Santo for arranging the funding for both the Explore Yourself Through Art program and also the Mosaic project for youth.

**Sharon Drage**

Metro Educator – Community Programs

# Rural and Remote Hepatitis C Education and Prevention Project

During this 12-month period, the Rural Education Officer has travelled approximately fourteen thousand kilometres and had contact with a diverse range of workers and individuals. The focus of this project has been to increase the knowledge and awareness about hepatitis C of workers within rural and remote communities with the aim of increasing the capacity of communities to respond positively and effectively to individuals affected by hepatitis C. In this role the Education Officer has also met directly with a range of individuals with, and affected by, hepatitis C who have been seeking further information and often a 'safe place' to share experiences and insights.

Developing creative working relationships with workers and individuals within community takes time. The past 12 months of networking and building support for an increase in understanding about hepatitis C is gradually gaining momentum. Increasingly individuals and workers are making contact the Council as a result of previous connections established.



During this time the Rural Education Officer has focussed on providing information and support to agencies and individuals within the Eyre, South East, Murray Mallee and Mid North regions of South Australia. The approach has initially been to promote Council education services and then to negotiate specific arrangements with agencies according to their needs and worker/consumer profiles. People with hepatitis C were an integral part of the education provided, speaking as part of the Council's positive speaker program.

Whilst in these regions, information on hepatitis C and Council services has been promoted through local field days, community health forums, local radio and newspapers via articles and paid advertisements.

During this twelve-month period, thirty education sessions have been provided to 294 workers across a diverse range of settings. These have included workers from the following areas: community health, hospitals, Family and Youth Services, Indigenous health, Centrelink, South Australian Housing Trust, youth agencies, drug and alcohol rehabilitation, aged care, mental health teams within community health services, prisons, Lifeline and a regional dental service.

Through these education sessions it has become very evident that there is a great deal of misinformation and misunderstanding amongst workers about hepatitis C and related issues such as harm reduction. Many workers have openly identified that they have felt quite fearful of 'catching' hepatitis C from day to day contact with people who have disclosed or people they have assumed might have hepatitis C. Feedback has indicated that the information provided has had a positive impact on improving levels of understanding.

assumed it is transmitted by touching or coming into skin contact with blood. I feel more relaxed now that I know about transmission risks and this will impact on how I relate to people with hep C

I have a better understanding of the virus which will impact on how I relate to people with hepatitis C in the future

Wonderful combination of the 'academic' with the personal story

Workers have also reported an increased confidence in their ability to provide accurate information, referral advice and support to people affected by hepatitis C:

Will begin to promote the correct information about hepatitis C and hopefully in time the stigma will shift as a result of these types of sessions

Will feel more able to discuss information about hepatitis C with young people especially those leaving guardianship

Six education sessions were provided to a total of 68 individuals affected by hepatitis C and/or at risk of getting hepatitis C. These sessions were requested by Family and Youth Services, prisons, Indigenous employment agencies and an Indigenous community agency. One group involved individuals from a culturally and linguistically diverse community agency in the Whyalla region. Feedback from these sessions has consistently been very positive with individuals appreciating the opportunity to explore frankly issues such as harm reduction, injecting drug use and hepatitis C transmission.

Through discussions with individuals and workers, a wide range of issues have been highlighted that clearly impact upon the capacity of communities to implement effective harm reduction strategies and which severely impact on the health and wellbeing of people affected by hepatitis C.

These include:

- Lack of accurate information available through local GPs and health services and lack of available choices
- Experiences of discrimination in healthcare and employment settings and the fear of discrimination as a deterrent to people accessing services
- Fear of breaches of confidentiality and the resulting consequences for family members
- The impact of stigma
- Lack of knowledge about treatments and limited access to specialist services

- Limited access to Clean Needle Programs and other Harm Reduction Strategies. Some individuals and workers reported that the attitudes of some workers within CNP sites appeared to be punitive rather than health promoting
- No access to Clean Needle Programs in prisons
- Limited resources for people with more complex needs e.g. a person with a mental illness, addiction issues and hepatitis C
- The impact of limited funding for health promotion and harm reduction strategies in most communities and particularly in Indigenous communities

There is still a great deal of valuable work that this project can contribute in partnership with workers and individuals in rural and remote communities. At the time of writing this report, ongoing funding for this project is still uncertain. With ongoing funding this project would continue to provide education services to agencies and information to individuals but will also seek to be more directly engaged in partnerships promoting community development projects, community education and ongoing capacity building.

Thank you to all of the workers who have provided invaluable support to this project and who have worked jointly on projects or shared resources. Special thanks to PEACE project; Aboriginal Drug and Alcohol Council, MOSAIC, Drug and Alcohol Services Council (especially the Manager of Country Services, Manager of Aboriginal Programs and each of the country outreach workers), Gay Men's Health country worker, COPE

Community Education team, POP, Dept for Correctional Services, C Clearly Project, RAH Viral Hepatitis Centre Clinical Nurse Consultant and the workers from regional communities who have co-ordinated and promoted education sessions within their agencies. Thanks also to HHARP staff for their support and assistance over the past year. Finally thank you to the many individuals who have shared their stories and provided valuable information towards the development of effective services and government policy. A very special thanks to the team of positive speakers who have spent many hours travelling with me and providing the most powerful contribution to people's understanding of the impact of living with hepatitis C.

**Leslie Wightman**  
Rural Education Officer





# Volunteer Program

The volunteer program over 2002/2003 was varied and interesting, providing a total of 20 volunteers with the opportunity to work with and for the Hepatitis C affected community in South Australia. Nine volunteers worked within our resources program. As resource volunteers, people produce and distribute resources ordered by individuals and organizations. The remainder trained for and staffed our Information and Support Line. The training program in September was superbly facilitated and provided a jam-packed three days of Hepatitis C information and telephone skills training.



Wayne  
Volunteer

The volunteers provided both volunteer co-ordinators with stimulating and challenging work over the whole year. (Janette Chegwiddden went on maternity leave in September and returned at the end of January following the birth of a rambunctious redhead, Tamalia Rose, in October). Thank you to George Valiotis who filled in for Janette during this period.

Particular highlights over the year included the expansion of our resource drop program, which targets agencies that have not ordered information from us previously. The aim of the program is to expand awareness on Hepatitis C issues throughout the whole community. We have considerably increased the

production and distribution of resources through this strategy to an additional 145 agencies, including community health centres, general community centres, drug rehabilitation centres, chemists, blood collection centres, youth services and multiple doctor practices.



Lyn  
Volunteer

Another highlight of the program this year was the obtaining of training funds specifically for the volunteers. Volunteers attended workshops in many diverse areas including first aid training, advocacy skills, public speaking, desktop publishing, the accidental counsellor, mentoring and introduction to computers.



Fred  
Volunteer

A number of volunteers moved on from the program this financial year, some to paid work and further study. A special tribute must be offered to Fred, a long term volunteer who has undertaken some important peer educator work this year in the "Living Well" workshops run by Mosaic. Fred also attended the Hepatitis C Community Conference in Melbourne this year.

A recent planning day identified a number of exciting projects that will commence over the 2003/2004 year, for example, the social club project, the peer computer training project, the treatment support program and the volunteer editorial group.

Following a very positive independent evaluation of the program, funding for the co-ordinator's position has been extended until 30 June 2004.

A very sincere "thank you" is extended to all the volunteers who participated in the program this year, giving up their time to work for the Council in supporting the affected community.

**Janette Chegwidden**  
Volunteer Coordinator



Megan  
Volunteer



Craig  
Volunteer



John  
Volunteer

## 6. Acknowledgements

The Hepatitis C Council of South Australia Inc would like to acknowledge the following organizations for their support during the year:

- Dept. of Human Services - HHARP
- Aboriginal Drug and Alcohol Council
- Adelaide Central Mission
- Adelaide Dental Clinic
- Adelaide Diocesan AIDS Council
- AIDS Council of SA
- ASP Harm Reduction Systems
- Australian Hepatitis Council and State Hep C Councils
- Care and Prevention team
- C-Clearly
- Child and Youth Health
- Clinic 275
- Community Benefit SA
- COPE
- Department for Correctional Services
- Department of Health and Aged Care – HIV/AIDS and Hepatitis C Section
- Drug and Alcohol Services Council
- Flinders University
- Fresh FM
- GlaxoSmithKline
- Govt of SA, Department of Premier and Cabinet
- Haemophilia Foundation
- Marion Youth Centre
- Mosaic Counselling
- Nunkuwarrin Yunti
- Parkes Community Centre
- Partners of Prisoners - OARS
- PEACE project
- PLWHA
- Relationships Australia
- Riverland Regional Health Service Inc.
- Roche
- SAVIVE
- Schering-Plough
- Second Story
- SHine
- Streetlink
- Vietnamese Community in Australia SA Chapter
- Viral Hepatitis Centre - Royal Adelaide Hospital
- Viral Hepatitis Clinic – Flinders Medical Centre
- Youth Drug Action Team





## 7. Treasurer's Report

Total grants received for the year were \$398966. This consisted of \$330166 of funds allocated from HHARP in the financial year, which included \$16451 for the volunteer program. A further \$59000 was received from the Commonwealth Department of Health and Aged Care for the Rural Program. Other grants received were \$7800 from the Premiers Department and \$2000 from DASC to be used for a Mosaic Art Program for youth. This program will be carried out in the next financial year. A further \$2000 was received from Community Benefits SA for volunteer training.

The amounts showing in grants in advance in the liabilities is the amount invoiced to HHARP for the first quarter of next financial year of \$82542, rural program to 31<sup>st</sup> August \$9800 plus \$9800 held over for the rural program to continue for a further two months until funding is secured.

Total income from grants in the income and expenditure statement is \$422408. This is the net result of the twelve months recurrent funding for the financial year of \$330166, funding for the rural program for twelve months \$59000, training grants received \$2000, monies held back last year, this includes awareness week – \$11500, four months of the volunteer program - \$8698 and sundries as reported in last years report of \$9878. There was also one further grant from Marion youth for \$1000 towards the art therapy program.

Other sources of income for the year were: interest received - \$4118, donations - \$704, memberships - \$1512, positive speaker fee payments - \$1574, sponsorships - \$3202 and sundry income of \$2554 which is reimbursements from the government for staff training. The total income for the year was \$436072.

Total expenditure for the year was \$433810. The major expense was the salaries, wages and oncosts for staff, totalling \$265000. Rent and outgoing on the premises were \$38825. Main variations from previous years are the allocation of money to allow for increased rent and relocation of the office, which will need to be attended to in the new year as the current office space is inadequate. Allowing for the move was important due to the review in HHARP meaning we cannot apply for additional funds next year. Consultants increased due to evaluation requirements of HHARP

for the volunteer program, a privacy audit was attended to, counselling services with OCAR for staff were set up and strategic planning and training for the Board was undertaken. Staff training costs includes training for volunteers and part of this money was funded by a separate grant as mentioned previously.

The rural program has a total expenditure of \$51669 leaving a surplus of \$7331. This money has been allocated to allow for the program to run past it's finish date of 31<sup>st</sup> August particularly as Leslie (the rural education officer) spent much of the time during changes in management as relieving manager and assisting in the handover process to the new managers preventing her from going out to the rural communities.

For the financial year 2002 –2003 the council had a net surplus of \$2262.

The accounts for the financial year were audited by Peter Hall and Co Chartered Accountants.

**Barry Horwood**  
Treasurer

## 8. Audited Financial Reports