

**2002 QUINQUENNIAL REVIEW OF THE
NATIONAL CENTRE IN HIV SOCIAL
RESEARCH AND
THE AUSTRALIAN RESEARCH CENTRE IN
SEX, HEALTH AND SOCIETY**

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6.1 SUMMARY AND RECOMMENDATIONS

6.1.1 Summary

In the five years since the last review, the National Centre in HIV Social Research and its collaborating Centre, the Australian Research Centre in Sex, Health and Society, have continued to do social research of the highest international standard.

Having reviewed a wide range of evidence from a number of sources, including submissions from both Centres, interested stakeholders, and an independent academic assessor, the Review Panel is of the opinion that the work of the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society is of the highest quality by international standards. The mix of work is intellectually rigorous and has led to the development of theoretical insight that has continuing relevance for policy and practice, both in Australia and elsewhere.

Current work combines theoretical rigour and engagement with a wide range of bodies responsible for developing HIV/AIDS policy and practice interventions. Both Centres have a record of working responsively with the communities that are most affected. This result would not have been possible without continued investment by government and the commitment and professionalism of the individuals working in each Centre. Sustained investment has paid off.

The importance of social research

It is important to recognise the significant contribution that social research has made to Australia's highly regarded partnership response to HIV/AIDS. Twenty years of international experience of the epidemic continue to demonstrate the value of this approach and the importance of social research as a vital component of a successful response. Social research is essential to explaining why and how patterns emerge within the epidemic. Importantly, and in addition, social research helps pinpoint the most effective areas of intervention and provides the best means of monitoring and evaluating interventions.

Research priorities for the next phase

The Review Panel considers that there are six key areas of endeavour in the field of social research that will continue to be fundamental to Australia's nationally coordinated response to HIV/AIDS, hepatitis C and the sexual health of Indigenous Australians. These areas are:

- ◆ understanding changing sexual and drug-related practices in especially vulnerable population groups, including gay and other homosexually active men, people who inject drugs, people in custodial settings, people living with HIV/AIDS and hepatitis C, sex workers, and people from non-English speaking backgrounds
- ◆ continuing studies of specific sexual and drug-related practices, subcultures and contexts
- ◆ work on prevention, response and sexual health in Indigenous communities
- ◆ studies of the role and effectiveness of education in programs targeting prevention

- ◆ studies of the changing life experiences of people living with, and affected by, HIV/AIDS and hepatitis C, and the contribution of these people to Australia's response to the epidemic
- ◆ studies in areas where gaps in knowledge exist—for example, the history, economics, and politics of the epidemic and documentation and analysis of the Australian response.

6.1.2 Recommendations

The following is recommended:

135. The Panel considers that the future social research program at both the National Centre in HIV Social Research and the Australian Research Centre in Sex, Health and Society would benefit from more formalised planning in a number of areas:
 - in relation to funding sources and conditions, the identification of priority fields for research and the need to achieve a balance between research in HIV/AIDS, hepatitis C and sexual health in both the Indigenous and general populations
 - clearer demarcation of research effort between the two Centres in relation to their respective strategic strengths and track records in the production of high-quality research
 - processes for undertaking international work in a coordinated fashion.
136. That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society continue to build on their respective research strengths, both substantively and methodologically, in a complementary and collaborative fashion.
137. That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society encourage exploration of joint activities such as publications, conferences and seminars, senior researcher training and development, new forms of community liaison, and induction for new research staff.
138. That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society encourage fuller involvement of their senior researchers in joint planning processes.
139. That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society prepare explicit statements dealing with joint agreements between the two Centres and ensure the dissemination of these statements.
140. That, with a view to promoting research-career development, the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society encourage the introduction of a rolling program of career and professional development for staff at all levels in both organisations. Such a program could include emphasis on the provision of support and mentoring for publication and the development of a staff exchange program within and between the various components of the HIV/AIDS social research programs, at these Centres and elsewhere.

141. That existing mechanisms for accountability and scientific direction, including the Scientific Advisory Committees, be retained. Efforts should be made to encourage joint planning with respect to the development of research programs, inclusive of the respective Scientific Advisory Committees of both the Centres.
142. That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society develop systematic policies for striking the best balance in relation to publication of research results—including consideration of formalising systems for encouragement and support for publishing and setting annual targets for staff at different levels in each Centre.
143. That the host institutions for both Centres give consideration to the creation of a greater number of stable research positions.
144. The Panel recognises that liaison with government is a two-way process, but pursuit of a clearer and more coherent relationship with AusAID would be a distinct advantage to both Centres. Beyond this, and to further augment the two Centres' capacity to work outside Australia, development of stronger relationships with UN agencies should become a priority.

6.2 THE REVIEW PROCESS

The members of the Review Panel were:

- Chair: Professor Peter Aggleton
Thomas Coram Research Institute
Institute of Education
University of London
- Members: Professor Lois Bryson
Department of Social Science and Planning
RMIT University
- Associate Professor Phyllis Butow
Medical Psychology Research Unit
University of Sydney

Secretariat support was provided by Mr Paul Lehmann, Commonwealth Department of Health and Ageing.

The Terms of Reference for the review are set out in Section 6.5 (Appendix A).

Both Centres were required to present a written submission to the Review Panel in April 2002, in the format of an NHMRC Program Grant, detailing projects, achievements and future plans.

Three independent experts were asked to assess and rate the achievements, research plan and team, and cooperation based on the Centres' submissions. Only one such assessment was received before the date of the review. The Centres were subsequently given the opportunity to reply to that assessor's report.

Submissions were sought from stakeholders and interested parties. Written submissions were received from:

- ◆ the Victorian Department of Human Services
- ◆ the New South Wales Department of Health
- ◆ the Australian Federation of AIDS Organisations
- ◆ the Australian Hepatitis Council
- ◆ the University of New South Wales
- ◆ the Australian Liver Association of the Gastroenterological Society of Australia
- ◆ the National Association of People Living with HIV/AIDS
- ◆ the Australasian Society for HIV Medicine
- ◆ the Australian Injecting and Illicit Drug Users League

- ◆ the National Drug Research Institute
- ◆ the Inter-governmental Committee on HIV/AIDS, Hepatitis C and Related Diseases
- ◆ Queensland Health
- ◆ the South Australian Department of Human Services
- ◆ the School of Health, University of New England
- ◆ the Australian and New Zealand Association of Nurses in AIDS Care
- ◆ the Burnet Institute for Medical Research and Public Health Ltd
- ◆ the Australian Red Cross Blood Service
- ◆ the Victorian Department of Education, Employment and Training
- ◆ the New Zealand AIDS Foundation
- ◆ the Victorian Department of Health
- ◆ the Victorian Health Promotion Foundation
- ◆ Straight Arrows, Services and Support for HIV+ Heterosexuals and their Families
- ◆ People Living with HIV/AIDS (NSW) Inc.

The Review Panel met with the Director and Deputy Director of the National Centre in HIV Social Research and the Director of Australian Research Centre in Sex, Health and Society on Monday 2 June 2002. This was followed by a site visit at Australian Research Centre in Sex, Health and Society, in Melbourne. The Review Panel continued its deliberations on Tuesday 3 June 2002, meeting with Director of the National Centre in HIV Social Research at the University of New South Wales for a site visit.

An oral report of the Panel's findings and provisional recommendations was presented by the Chair, Professor Peter Aggleton, to the Strategy Research Review Team on 4 June 2002. The draft report containing the Panel's recommendations was submitted by the Chair on the same day.

6.3 BACKGROUND

The National Centre in HIV Social Research was first established in 1990. Following a public tender, competing bids from the University of Queensland, the University of New South Wales and Macquarie University were combined to establish a three-site Centre, under the directorship of Professor Beverley Raphael at the University of Queensland.

The Centre was reviewed in 1992. The review recommended the closure of the University of New South Wales unit and made a number of other recommendations concerning the management and direction of the remaining two-site Centre.

The post-review arrangements did not work satisfactorily and there were unproductive tensions between the two units. Professor Raphael announced her intention to resign from the directorship in mid-1994, and at the beginning of that year the then Minister for Health asked a committee to make recommendations concerning future administrative arrangements for the Centre. The committee comprised of Professor Peter Karmel, Dr Claire Parsons and Professor Ann Daniel, who had chaired the 1992 review.

The Karmel committee considered three possibilities for future administrative structures:

- ◆ two or more operating units with a director at one unit
- ◆ a single national centre at one location
- ◆ a number of independent operating units.

In the light of the Centre's history, the Karmel committee proposed that social research in HIV be fostered by a number of independent programs, with the task of facilitating social research nationally being assigned to a member of the Commonwealth AIDS Research Grants Committee.

Accordingly, three priority programs were established: a program on gay and homosexually active men, at Macquarie University; a program on youth and the general population, at the Centre for the Study of Sexually Transmissible Diseases at La Trobe University; and a program on people living with HIV/AIDS and their carers, at the School of Nursing at La Trobe University. In September 1996, this third program was transferred to the Centre for the Study of Sexually Transmissible Diseases under Professor Doreen Rosenthal.

The Commonwealth's HIV/AIDS social research program was again reviewed in 1997. In addition to recommending that the National Centre in HIV Social Research based at Macquarie University be moved to the University of New South Wales, the Review Panel recommended that funding be continued for a further five years. Responsibility for developing annual programs of research for both the National Centre in HIV Social Research and the program based at La Trobe was given to reconstituted Scientific Advisory Committees. Also following the 1997 review process, the Centre for the Study of Sexually Transmissible Diseases at La Trobe University was designated a collaborating centre to the National Centre in HIV Social Research.

In 1998 the Centre for the Study of Sexually Transmissible Diseases changed its name to the Australian Research Centre in Sex, Health and Society. The National Centre in HIV Social Research completed its move to the University of New South Wales in January 1999.

6.4 COMMENTS AGAINST THE REVIEW PANEL'S TERMS OF REFERENCE

6.4.1 Research goals and priorities

Term of reference

The Review Panel was required to review and make recommendations on 'the current strategic planning processes, goals and priorities and progress made towards meeting the stated goals/priorities'.

Comment

Planning processes have been effective in following the National HIV/AIDS Strategy and, where relevant, the National Hepatitis C Strategy and the National Indigenous Australians' Sexual Health Strategy, each of which guides the work of the two Centres. As the Centres have matured they have also been successful in achieving a balance in responding to emerging issues at national, local and discipline levels.

Recommendation 135

The Panel considers that the future social research program at both the National Centre in HIV Social Research and the Australian Research Centre in Sex, Health and Society would benefit from more formalised planning in a number of areas:

- ◆ in relation to funding sources and conditions, the identification of priority fields for research and the need to achieve a balance between research in HIV/AIDS, hepatitis C, and sexual health in both the Indigenous and general populations
- ◆ clearer demarcation of research effort between the two Centres in relation to their respective strategic strengths and track records in the production of high-quality research
- ◆ processes for undertaking international work in a coordinated fashion.

Term of reference

The Review Panel was required to review and make recommendations on 'the relationship of current and projected research activities to the stated goals and priorities of the centres and the extent to which they reflect, and can inform, emerging priorities'.

Comment

The Panel is of the view that the different, but related, research perspectives and approaches of each Centre inform the current research programs of both Centres. In discussing these different approaches, the Panel noted the different research emphasis of the National Centre in HIV Social Research (theoretical aspects of sexual practice and its contextuality) and

Australian Research Centre in Sex, Health and Society (a focus on HIV in the broader context of sexual health).

The Panel considers that the complementary nature of these approaches is additive and likely to promote a suitable depth of engagement with aspects of social research relevant to the epidemics.

The perspectives brought by the two Centres have validity in the current research context and are producing valuable individual contributions. These complementary approaches enhance the capacity of social research in Australia to detect and effectively respond to emerging priorities.

Recommendation 136

That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society continue to build on their respective research strengths, both substantively and methodologically, in a complementary and collaborative fashion.

Term of reference

The Review Panel was required to review and make recommendations on ‘the extent to which the goals and activities reflect the needs of key stakeholders (ie the Commonwealth and State/Territory policy makers, ANCAHRD, Australian Federation of AIDS Organisations, hepatitis C virus organisations, National Association of People Living with HIV/AIDS, the medical and research communities (including the Australasian Society in HIV Medicine)), and Aboriginal people and Torres Strait Islanders)’.

Comment

The Panel took account of the views of a wide range of stakeholders (see Section 6.2). The view of the overwhelming majority of these stakeholders was very positive, and a clear majority appreciated the contribution and flexibility of the Centres in meeting stakeholders’ needs. The criticisms that were expressed came from a minority of submitters and, on the whole, were not related to the quality of the academic output.

The Panel recognises that calls for a nationally coordinated response to hepatitis C and sexual health have resulted in the Centres doing some limited work in these areas, within the constraints of existing funding. The Panel supports continued efforts to forge links with affected groups in the areas of hepatitis C and sexual health, including Indigenous Australians’ sexual health. The Centres have much to offer in terms of expertise and experience and, subject to resourcing, the capacity to take on additional work.

The Panel questioned the need to establish a radically new structure for social research related to hepatitis C. However, the issue of appropriate and adequate funding for hepatitis C social research must be resolved before substantial good-quality work can be done in this field without detriment to HIV/AIDS social research.

Term of reference

The Review Panel was required to review and make recommendations on ‘the contribution of each Centre’s organisation and management structure to the attainment of the goals and its role in fostering interaction with each other and with ANCAHRD’.

Comment

The current National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society management and liaison structures have developed over time and have served the Centres well thus far. Looking to the future, however, and in order to consolidate recent achievements, the Panel considers the Centres should give more consideration to:

- ◆ taking greater advantage of the considerable skills and experience of senior researchers through professional development of senior staff
- ◆ ensuring that the work of each Centre is disseminated as appropriately and widely as possible
- ◆ capitalising on the benefits of the different approaches the two Centres bring to social research in HIV/AIDS, hepatitis C and sexual health.

While recognising the value of general sexual health research and acknowledging the directions set by funding sources, the Panel is concerned that the imminent departure of Australian Research Centre in Sex, Health and Society’s Deputy Director for at least two years may pose a challenge to that Centre’s continuing direct contribution to Australia’s response to HIV/AIDS.

Recommendation 137

That the National Centre in HIV Social Research Australian Research Centre in Sex, Health and Society encourage exploration of joint activities such as publications, conferences and seminars, senior researcher training and development, new forms of community liaison, and induction for new research staff.

Recommendation 138

That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society encourage fuller involvement of their senior researchers in joint planning processes.

Recommendation 139

That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society prepare explicit statements dealing with joint agreements between the two Centres and ensure the dissemination of these statements.

Recommendation 140

That, with a view to promoting research-career development, the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society encourage the introduction of a rolling program of career and professional development for staff at all levels in both organisations. Such a program could include emphasis on the provision of support and mentoring for publication and the development of a staff exchange program within and between the various components of the HIV/AIDS social research programs, at these Centres and elsewhere.

Term of reference

The Review Panel was required to review and make recommendations on ‘the effectiveness and appropriateness of Centre mechanisms for providing scientific guidance and accountability with respect to research objectives, including the Scientific Advisory Committees where relevant’.

Comment

Although this matter was not explored in depth, the Panel is satisfied that existing processes for evaluation, scientific guidance and accountability with respect to research objectives are functioning satisfactorily and in a manner that lends support to the production of high-quality research.

The Panel notes that the membership of the Scientific Advisory Committees for both the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society is reflective of each Centre’s inclusive and responsive approach to the research it does.

Recommendation 141

That existing mechanisms for accountability and scientific direction, including the Scientific Advisory Committees, be retained. Efforts should be made to encourage joint planning with respect to the development of research programs, inclusive of the respective Scientific Advisory Committees of both the Centres.

6.4.2 Research dissemination and exchange

Term of reference

The Review Panel was required to review and make recommendations on ‘the nature, appropriateness and effectiveness of Centre mechanisms for disseminating findings and information policy developments’.

Comment

The ability to rapidly disseminate research results—via the Internet and in other ways—is a particular strength of both Centres. In addition, the Panel praised both Centres for their ability to package and pitch research results in such a way as to maximise the results’ relevance and usefulness for different target audiences, including affected communities.

The Panel is of the view, however, that more consideration should be given to the balance between publication of material relevant to policy and practice and more traditional academic publication. In particular, the Panel feels that, in some instances, additional emphasis on increasing the number and range of publications arising from Commonwealth-funded research, in peer-reviewed academic journals, is warranted. In reaching this conclusion, the Panel notes the respective publication records of the Centres and acknowledges that the nature and extent of the academic publication balance is an issue of which both Centres are cognisant.

The Panel considers that the establishment of a suitable balance of publication in peer-reviewed journals and other forms of research dissemination is important for a number of reasons, including:

- ◆ promoting greater international recognition of the high quality of Australian HIV/AIDS social research
- ◆ enhancing the capacity of both Centres to obtain funding
- ◆ assisting the development of career paths among senior researchers.

Recommendation 142

That the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society develop systematic policies for striking the best balance in relation to publication of research results—including consideration of formalising systems for encouragement and support for publishing and setting annual targets for staff at different levels in each Centre.

Term of reference

The Review Panel was required to review and make recommendations on ‘the extent and value of the collaboration of the centres with researchers in the HIV/AIDS, hepatitis C virus and related areas (eg Drug and Alcohol Research Centres) and the centres’ success in encouraging leading researchers to focus attention on HIV, hepatitis C virus and related research’ and ‘the value of the centres’ relationships/collaborative arrangements with other key organisations, such as

- ◆ centres funded under the Public Health Education and Research Program;
- ◆ funding bodies;
- ◆ government departments;

- ◆ the host university; and
- ◆ international bodies, such as UNAIDS, WHO and overseas universities/research centres’.

Comment

Both Centres’ submissions to the Panel provided ample evidence of a wide range of collaborative efforts between the Centres and other researchers in HIV/AIDS, hepatitis C and related areas. Contrary to the views expressed by a very small minority of stakeholders, the Panel found that the Centres were engaged in an impressive range of interactions and collaborations with external researchers, and more broadly, with communities and other stakeholders. The Panel considers that, while there is always room to improve in this area, with the maturing of the Centres over the five years since the last quinquennial review, significant progress had been made toward the goal of promoting inter-centre collaboration.

In addition to encouraging a national focus on social research through their many collaborative efforts, the Centres’ success in encouraging researchers in the field is further attested to by their capacity to attract postdoctoral social researchers and other multidisciplinary researchers.

The Panel found, almost without exception, that both the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society were highly regarded by the organisations with which they interacted. Very good working relationships were evident between the two Centres and their respective funding bodies and between the Centres and those communities most affected by HIV/AIDS. Importantly, the Panel found that both Centres have very good relationships with their host institutions. They both enjoy a high standard of physical accommodation and supportive academic and administrative arrangements from their respective faculties.

In discussing the question of relationships between the Centres and their respective host institutions, the Panel turned to consideration of possible future support for the Centres. In particular, the Panel sees a need to think more creatively about ways of working with university administrations in order to optimise staff-development opportunities within and between the two Centres.

For example, consideration could be given to the creation of a limited number of two- to three-year rolling contracts for researchers, offered subject to the availability research funds. The University of London has established such a mechanism for research staff at the Thomas Coram Research Unit, whose funding circumstances are quite similar to those of the Centres. An arrangement of this kind would provide staff with a greater sense of security, increase the attractiveness of the Centres as an employer of choice, and improve the capacity for longer term planning. At the same time, an arrangement of this nature would not ordinarily involve additional costs to the host university, except in circumstances where the associated funding stream unexpectedly diminishes. Even then, this would involve relatively small amounts of funding, since in such cases planning for redundancy would need to be factored into the process of managing the rolling contract arrangement.

Recommendation 143

That the host institutions for both Centres give consideration to the creation of a greater number of stable research positions.

Term of reference

The Review Panel was required to review and make recommendations on ‘the extent and value of additional funding attracted by the National Centres including:

- ◆ the extent to which this funding contributes to the Centres’ primary goals;
- ◆ the value to Australia of such external funding; and
- ◆ the capacity of existing centres to attract and maintain external funding’.

Comment

In reviewing the submissions from both Centres, the Panel found clear evidence that a range of Australian funding bodies now support research done within the Centres. For both the National Centre in HIV Social Research and Australian Research Centre in Sex, Health and Society, the quantum of these additional research funds has increased significantly over time. Funding sources beyond the core Department of Health and Ageing grant now include state health departments, the Australian Research Council, and the NHMRC.

The Panel is of the view that the Centres’ ability to augment and diversify their respective funding streams is largely a result of the relatively stable funding base. In the case of Australian Research Centre in Sex, Health and Society, this has enabled a broadening of work in the field of sexual health; in the case of the National Centre in HIV Social Research, it has added greater depth to its HIV/AIDS research program. In each case, additional funding has enabled primary goals to be more coherently addressed, strengthening the Centres’ capacity to contribute to Australia’s social response to HIV/AIDS.

Nevertheless, the Panel considers it important that both Centres remain vigilant in continuing to strike an appropriate balance between the core funded research program and other research they may be called on to do from time to time.

Term of reference

The Review Panel was required to review and make recommendations on ‘the extent and value of the training opportunities provided by the Centres for researchers and those working in areas relevant to the Centres’ activities’.

Comment

The Panel considered the submissions from both Centres and commended the Centres on the wide range of training opportunities provided, including training for researchers and others from outside the Centres.

While not seeking to make extensive comment against this point of the Terms of Reference, the Panel draws attention to other recommendations in this report that cover staff development and training.

Term of reference

The Review Panel was required to review and make recommendations on ‘other matters considered relevant or which emerge during the Review’.

Comment

Despite the Centres’ excellent record to date, the Panel considers that the work of both Centres would benefit from further strengthening of communication of the importance of social research to government, funding bodies and the broader community. In this respect, the Centres may wish to consider pursuing a focus on the value of social research in the evaluation of education and prevention programs.

Promoting the importance of social research for Commonwealth-funded interventions as a means of enhancing research programs would also strengthen support for an evidenced-based approach to program development and implementation.

Further, promotion of the role and importance of social research may also help to develop consensus on some of the diverse interests associated with social research, especially in newer social research fields such as hepatitis C and Indigenous Australians’ sexual health. It may also foster close interaction with social researchers outside the Centre structure and encourage growth in the quantity and quality of social research done outside the Centres and in other parts of Australia.

The Panel considers that both Centres are now exceedingly well placed to expand the nature of their HIV/AIDS work to incorporate international issues. Building social research capacity in other countries through cooperative intellectual, policy and practice interchange should be a focus for the Centres’ HIV/AIDS work.

As part of the process of developing their international strategy, and in order to undertake research relevant to the broader international context, the Centres may wish to consider targeting selected international funding bodies, including some of the better known charitable and philanthropic organisations, in a more systematic fashion.

The National Centre in HIV Social Research was last reviewed in 1997, and the reviewers made 14 recommendations (see Section 6.7 (Appendix C)). This current Review Panel noted key achievements against these recommendations during its deliberations, including the transferral of the National Centre in HIV Social Research from Macquarie University to the University of New South Wales.

Recommendation 144

The Panel recognises that liaison with government is a two-way process, but pursuit of a clearer and more coherent relationship with AusAID would be a distinct advantage to both Centres. Beyond this, and to further augment the two Centres’ capacity to work outside Australia, development of stronger relationships with United Nations agencies should become a priority.

6.5 APPENDIX A THE REVIEW PANEL'S TERMS OF REFERENCE

Following are the Terms of Reference for the Review Panel:

In the context of assessing the scientific quality and international competitiveness of research, each Discipline Specific Review Panel will review and make recommendations on:

Research goals and priorities

- ◆ The current strategic planning processes, goals and priorities and progress made towards meeting the stated goals/priorities;
- ◆ The relationship of current and projected research activities to the stated goals and priorities of the Centres and the extent to which they reflect, and can inform, emerging priorities;
- ◆ The extent to which the goals and activities reflect the needs of key stakeholders (ie Commonwealth and State/Territory policy makers, ANCAHRD, AFAO, Hepatitis C organisations, NAPWA, the medical and research communities (including ASHM), and Aboriginal people and Torres Strait Islanders);
- ◆ The contribution of each Centre's organisation and management structure to the attainment of the goals and its role in fostering interaction with each other and with ANCAHRD;
- ◆ To assess the effectiveness and appropriateness of Centre mechanisms for providing scientific guidance and accountability with respect to research objectives, including the Scientific Advisory Committees where relevant.
- ◆ Evaluate the cost-effectiveness, utility and efficiency of hepatitis C and sexually transmissible infections (STI) surveillance as carried out by the NCHECR.

Research dissemination and exchange

- ◆ The nature, appropriateness and effectiveness of Centre mechanisms for disseminating research findings and information policy developments.
- ◆ The extent and value of the collaboration of the Centres with researchers in the HIV/AIDS, hepatitis C and related areas (eg Drug and Alcohol Research Centres) and the Centres' success in encouraging leading researchers to focus attention on HIV, hepatitis C and related research.
- ◆ The extent and value of Centres' relationships/collaborative arrangements with other key organisations, such as:
 - centres funded under the Public Health Education and Research Program;
 - funding bodies;
 - government departments;
 - the host university; and
 - international bodies, such as UNAIDS, WHO and overseas universities/research centres.
- ◆ The extent and value of additional funding attracted by National Centres including:

- the extent to which this funding contributes to the Centre’s primary goals;
- the value to Australia of such external funding;
- the capacity of existing Centres to attract and maintain external funding; and
- the extent and value of the training opportunities provided by the Centres for researchers and those working in areas relevant to the Centres’ activities.

Other

- ◆ Other matters considered relevant or which emerge during the review.

6.6 APPENDIX B THE CENTRES' TERMS OF REFERENCE

Following are the Terms of Reference for the National Centre in HIV Social Research and the Australian Research Centre in Sex, Health and Society:

National Centre in HIV Social Research

Research

- ◆ To conduct research which describes and analyses the social understandings, meanings and practices of peoples, institutions and communities in relation to HIV, sexually transmitted diseases (STDs) and other communicable diseases implicated in and related to HIV transmission with a view to increasing the understanding of these aspects.
- ◆ To develop collaborative research internationally, particularly in the Asia-Pacific region.
- ◆ To establish the research of the Centre as an active and reflexive process which acknowledges the value of co-participation of the researcher and the researched in the research activity, and draws on diverse expertise from its co-participants.

Leadership and research resources

- ◆ To maintain collaboration with the National Centre in HIV Epidemiology and Clinical Research, the Australian Centre for the Study of Sex, Health and Society and other collaborating centres.
- ◆ To inform the development and implementation of policy and practice with respect to prevention and to the management of the epidemic.

Training and education

- ◆ To provide tangible opportunities and encouragement for post-graduate and post-doctoral training of social science and humanities students and staff in the social aspects of HIV and related diseases.
- ◆ To disseminate the results of the Centre's research through all possible means, including presentations at national and international meetings, publications, through the media, and in an annual report; and to support the dissemination of social research related to HIV/AIDS, blood-borne viruses and sexually transmissible diseases to relevant communities.

Other

- ◆ To perform other roles in HIV/AIDS social research which may be determined from time to time by the Director, in consultation with the ANCARD Research Advisory Committee and approved by the Department of Health and Family Services.

Australian Research Centre in Sex, Health and Society: objectives

- ◆ To cooperatively conduct research which complements and enhances the research program of the National Centre in HIV Social Research.
- ◆ To cooperatively conduct research within the Terms of Reference of the National Centre in HIV Social Research (see above).
- ◆ In accordance with the Conditions of Award which establish this research program, and in accordance with the Memorandum of Understanding between the Director of the NCHSR, the Director of the ARCSHS and the Department of Health and Ageing, the annual HIV/AIDS and related disease social research program at ARCSHS will be

developed in close consultation with the Director of the NCHSR, for submission to ANCARD.

6.7 APPENDIX C RECOMMENDATIONS OF THE PREVIOUS REVIEW COMMITTEE (1997)

The previous review committee made the following recommendations:

1. There should be a National Centre in HIV Social Research, funded for at least another five years.
2. There should be one geographical institutional focus for the National Centre in Sydney.
3. The Centre should make every effort to explore thoroughly, with the assistance of the Department of Health and Family Services, opportunities for re-location to the Faculty of Arts and Social Sciences at the University of New South Wales.
4. The PLWHAC (People Living With HIV/AIDS and their Carers) program should be sustained and managed, and it necessary enhanced, at the Centre for Study of STDs. Other programs such as the Youth and General Population program will continue until the end of 1998 and then be reviewed by the Advisory Committee. Future funding arrangements for National Centre projects would come through the new National Centre at University of New South Wales (UNSW). As part of this, an agreed formula for the allocation of infrastructure money should be developed between the Centre and the UNSW and any collaborating centres, including the one at La Trobe University.
5. The transition to UNSW should take place over the next eighteen months. The Director will be Sue Kippax who will hold the directorship for the following five years at which point, depending on the time line of implementing the changes, advice should be sought from the Advisory Committee.
6. The Centre should operate with a reconstituted Advisory Committee, chaired by an academic from outside the Centre, with members chosen from the research, community (including Aboriginal and injecting drug user (IDU) organisations) and government sectors. The Committee's membership should be drawn from across the country and should be chosen by the Director in consultation with the Chair of the Research Advisory Committee (RAC), the Director of the La Trobe arm, and the Department. The new Advisory Committee should be established from the beginning of 1998.
7. The Centre should develop a strategic plan to guide its operations for the next five years. This plan should encompass a research strategy which applies a conceptual framework that reflects the current and future dimensions of the research agenda. The strategy should be flexible and take into account the changing nature of the epidemic and community concerns and needs. This research strategy needs to be developed in consultation with the Advisory Committee and other national key stakeholders.
8. As part of its strategic plan, the Centre should develop a strategic approach to research dissemination. In the face of the changing epidemic and the development of technology, and advanced methods of communication, innovative dissemination strategies which complement existing strengths should be investigated, tested and evaluated. These may include the use of traditional and evolving personal networks, i.e. community development and interactive dissemination strategies that will expand the transfer of research into practice nationally.
9. As part of the development of the strategic plan, a series of consultative meetings should be held with a broad range of stakeholders in every capital city over the next eighteen months. Where possible these meetings should lead to the establishment of ongoing networks within each state.
10. The Centre should consider developing various national databases that would permit access to other researchers and collaborating centres to foster the expansion of social research in Australia and the region.

11. There should be a deputy director's position established for the Sydney Centre, at a senior level. In order to attract a high quality field of applicants, this position should have a guarantee of continuing employment from the host university should the Centre cease operation.
12. The Centre should develop a program approach to budgeting, which aligns the allocation of resources with its strategic plan. Special one-off funding should be provided to support the consultative workshops referred to in recommendation 9 and for the additional senior staff member at the Sydney Centre. The claimed \$50 000 shortfall in the Centre's budget should be investigated by the Department.
13. Greater use should be made by the Centre of strategies for attracting researchers to work in the Centre.
14. Collaborative research between the Centre and researchers in universities and other organisational locations, and collaborations within the Asia/Pacific region, should be systematically encouraged. One-off funding should be provided to set up a series of meetings or workshops to determine appropriate roles for various individuals and organisations in the national HIV social science research effort. This process should be jointly overseen by the Centre, RAC and the NHMRC.