



Towards ending the HIV epidemic

Trustees' Annual Report 2024

for the year ended 31 March 2024

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Foreword

2023-24 was a year readying for change – in the country, in the sector and the organisation. Terrence Higgins Trust embraced that change. I hope you enjoy hearing about how and the impact we had.

As an organisation we continue to impact those living with HIV in transformational ways. The year saw the first TV campaign about people living with the virus since the 1980s, removal of the 1980s rules about 'driving with AIDS', and a year-long HIV storyline on BBC's Eastenders. Our lobbying resulted in another £20 million in funding for NHS England to continue the highly successful 'opt-out' A&E testing for HIV and funding for NHS Scotland to pilot the approach in three hospitals. Each of these successes are body blows to the HIV-related stigma that holds back too many living with HIV and is the single biggest reason why people do not test for HIV. This work is done with our unrestricted funds from our generous supporters or those willing to form unique partnerships with us. To our donors and our partners we say a massive thank you. None of this work is possible without you.

This year shows our value and our impact as a national HIV charity. The Wales HIV Action Plan was operationalised, with Terrence Higgins Trust Cymru as a key partner. Terrence Higgins Trust Scotland was contracted by the Scottish Government to not just run the anti-HIV stigma TV campaign but a national HIV Postal Testing Service. Our flagship HIV Prevention England programme was extended by the Department for Health and Social Care. Those in our teams who led these important work streams should be very proud. I am lucky to hear time and again from our service users the appreciation they have for our colleagues at the frontline and the difference they make.

The TV campaign in Scotland deserves singling out, and not just because I am Scottish. It was a real triumph, putting front and centre the stigma that is experienced by people living with HIV in the 2020s – from friends and family, on dating apps, when using the NHS or social care or when living in rural communities. The Scottish Government was a generous partner, the channel three broadcaster STV went above and beyond and match funded our TV spend with credits, and it led the news agenda for days. It got the whole country talking about

HIV and how it has changed. It enabled a very special moment where a woman living with HIV was breastfeeding on national TV showing that because she takes her medication her baby cannot get HIV from her breast milk. It was Terrence Higgins Trust's values in action: itself an ambitious endeavour, and a tour de force in collaborative working with Waverley Care, the Scottish Drugs Forum and people living with HIV from all backgrounds.

As the country hurtled towards a general election, we worked across the HIV sector to get agreement on our demands of a new or re-elected government and a firm commitment to HIV in each of the party manifestos. It was easier than we first thought to get sector-wide agreement and the hard work paid off with every party manifesto committing to ending new HIV cases by 2030 and a renewed action plan to get there. In fact, HIV was the third most spoken about health care issue after cancer and mental health. No small achievement. Among other things, the new government has been quick to commission a new HIV Action Plan, now due Spring 2025.

The sector embraces change – refocusing around the new data on those diagnosed but no longer taking their HIV medication. This is a phenomenon that the COVID-19 lockdowns have exposed. As Terrence Higgins Trust, we have changed key ways of working and sourced new funding to address this. There is, as ever, more to do.

But Terrence Higgins Trust has not been immune from the wider struggles of the voluntary sector. Austerity restricts our funding, inflation explodes our cost base, and the cost-of-living crisis continues to pile pressure on our service users, generous donors, and committed staff and volunteers.

Under the leadership of our new Chief Executive, the organisation faced these challenges head on. It made the decision to focus on HIV, to work toward a balanced unrestricted budget,

and to exit the market as a provider of local authority commissioned sexual health services. Statutory funders, due to their own financial challenges, are making less and less resources available whilst expecting delivery of more and more key performance indicators. This decision was not taken lightly by the Board and we modelled various iterations of a new model of working, all backed up with detailed financial analysis through the costing model. A whole organisation change management programme started at the end of the financial year, ran through into the next, and resulted in considerable reduction of staff – mainly through TUPE transfer and voluntary redundancy. It was a tough and unsettling period for staff and volunteers. It was not a reflection on our view of the importance of sexual health outreach work. In fact, the opposite. It is too important to do on a shoestring and making up the shortfall from local government funding cannot be at the expense of HIV services that have long been defunded. Nor could the shortfall be funded at the expense of our organisation as a whole. We want to be here until the last person living with HIV needs us, and this aim has been at the heart of all the tough decisions we have taken. At the time of writing, we are seeing our new business model taking shape in the way we had planned. The change programme required the Board to adopt an interim budget going into 2024/25; an early, post-restructure reforecast suggests we are on target to achieve that budget. I am pleased to note that service users and wider stakeholders have been supportive of this move, and the decision to focus on HIV.

We sustained an operational deficit of £2.8 million in the year against a budgeted £1.5 million (a £1.3 million variance). The main reasons for this variance are £0.3 million relating to restricted funds where income was received in the previous financial year, the timing of a significant and generous legacy donation of £0.7 million means that it will be recognised in the next financial year rather than this one, and redundancy costs of £0.5 million associated with the organisational restructure (a further £0.1 million of redundancy costs will be incurred in 2024/25). It is the impact of these factors (which total £1.5 million) that have created a large variance against the planned deficit for the year. This does not have long term impact for the charity and we remain within the agreed reserves policy (please see Financial Review section page 40).



Together we remain focused on our goals of ending new HIV cases by 2030 and supporting people living with HIV. We are changing to ensure we have the resources and capabilities to be here until the last person living with HIV needs us – and as we enter a new and smaller chapter – to remain as impactful as ever.

Enjoy the report and please get in touch if you have any questions or ideas.

Jonathan McShane
Chair, Board of Trustees

Objectives, mission and vision

Terrence Higgins Trust is at the forefront of the fight against HIV and improving the nation's sexual health. Our vision, mission and values are set out below.

Our vision

We strive for a future where there are no new cases of HIV, where people living with HIV get the support they need and there is good sexual health for all.

Our mission

- End new cases of HIV by 2030.
- Be here until the last person living with HIV needs us.
- Make sexual and reproductive health the priority it deserves to be.

What this means to our service users, stakeholders and supporters

- There are no new HIV cases.
- People living with HIV get the support they need.
- Everyone can access good quality sexual and reproductive health services and information is tailored to their needs.
- HIV and sexual and reproductive health are free from shame and stigma.
- Everyone in our organisation respects and values diversity, creating an environment that is inclusive of all, and by working in partnership with others we reduce inequalities in sexual health.

Our values

- **Ambitious for change:** We set ambitious targets, ranging from ending HIV transmissions in England by 2030 to changing social attitudes towards sexuality. Our organisational targets are made possible by ambitious staff and volunteers aiming high in their own areas of work.
- **Working together:** We are most successful when we work together with each other and with our partners. We will ensure that knowledge and expertise is shared more widely within the charity. We will continue to develop new and existing partnerships with the NHS, local authorities, voluntary organisations and community groups.
- **Drawing on diverse lived experience:** We are founded by people directly impacted by HIV. We will continue to draw strength and understanding from the lived experience of our people. We will do more to learn from the experience of the full range of people we serve and employ, including women, people from racially and ethnically diverse communities, trans and non-binary people.

In developing its objectives for the year, Terrence Higgins Trust has considered the Charity Commission's guidance on public benefit. We believe that the range and accessibility of the services and activities offered and undertaken by the charity clearly demonstrate the public benefit that our work provides.

Strategic report

Throughout the year, we had our eyes firmly set on the future as we worked to tackle the inequity seen in HIV and sexual health, and what urgently needs to be done now if we are to realise our goal of ending new cases of HIV by 2030.

Our challenges

HIV in the UK¹

- It is estimated that around 107,000 people are living with HIV in the UK – 1 in every 600 people. Around 5,150 are undiagnosed.
- There were 6,008 new cases of HIV in England in 2023, 270 in Scotland and 119 in Wales². Many of these are not new diagnoses but people previously diagnosed abroad registering with the NHS for their continuing care.
- New HIV diagnoses have risen. In 2023, there were 2,810 first ever HIV diagnoses in England, a rise from 2022 and plateau from 2019. England is therefore not on course for an 80% reduction by 2025, as recommended by the 2020 HIV Commission and pledged in the 2021 government HIV Action Plan.
- Late diagnosis remains high, with 40% of people diagnosed with HIV in England in 2023 being diagnosed at a late stage. The increase in late diagnosis since 2022 was disproportionately high among Black people (40% increase).
- It is estimated that up to 14,393 people in England (data from 2023) and 1,115 people in Scotland (data from 2024) have been previously diagnosed as living with HIV but are not currently accessing care^{3 4}. (No figure for Wales available.)
- HIV testing is essential so that everyone living with HIV can be offered lifesaving treatment, which also prevents onward HIV transmission. There has been some progress in getting testing back to pre-COVID levels in sexual health services, but they are still 4% lower than pre-COVID. Testing among gay and bisexual men is at record levels, but for heterosexual men testing rates are still 22% lower than pre-COVID.

Sexual and Reproductive Health in the UK⁵

- 401,800 new diagnoses of sexually transmitted infections (STIs) in England in 2023 – a 5% rise on the previous year.
- Number of gonorrhoea and syphilis diagnoses continue to be at record-breaking highs – 8% increase in gonorrhoea, 9% increase in syphilis since 2022.
- There was a larger proportional increase in syphilis diagnoses among heterosexual men and women than among gay and bisexual men.
- Chlamydia diagnoses were stable but there was a 2.1% drop in tests since 2022.
- Demand for sexual health services is higher than pre-pandemic levels and rising – 5% increase in the number of consultations at sexual health services since 2022 and an 8% increase in sexual health screens.
- 50% decrease in genital warts among young women aged 15 to 17 since 2019 – this is attributed to the successful HPV vaccination programme.
- Mpox cases remain low in the UK but a new clade is circulating in central Africa and has put the UK on high alert.
- Stark inequalities along ethnicity and socio-economic deprivation among test positivity rates for young women.
- STIs are on the rise across Scotland with 5,999 cases of gonorrhoea and 13,400 cases of chlamydia recorded in 2023⁶.
- Wales has seen an increase in the number of diagnoses of STIs, with a rise in diagnoses of gonorrhoea (4,126 cases), chlamydia (9,215 cases) and syphilis (417 cases)⁷.

¹ UK Health Security Agency, HIV testing, PrEP, new HIV diagnoses, and care outcomes for people accessing HIV services: 2024 report

² 2023 data are not available for Northern Ireland. For comparison, there were 100 new cases of HIV in Northern Ireland in 2022

³ UKHSA, HIV testing, PrEP, new HIV diagnoses and care outcomes for people accessing HIV services: 2023 report

⁴ Public Health Scotland, HIV in Scotland, September 2023

⁵ Sexually transmitted infections and screening for chlamydia in England: 2023 report, UKHSA, June 2024 Sexual Health in Wales report, Public Health Wales, July 2023.

⁶ Gonorrhoea infection in Scotland 2014-2023, Public Health Scotland, June 2024; Chlamydia infection in Scotland 2014-2023 report, June 2024

⁷ Sexual Health in Wales report, Public Health Wales, July 2023



What we've achieved in 2023-2024

It was the second year of our strategy, with equity, diversity and inclusion at its heart, to end new cases of HIV by 2030, ensure those living with HIV are supported, and create change to improve sexual and reproductive health services.

In spring 2023, we launched our new campaign to end new cases of HIV in the UK by 2030, spear-headed by Terrence Higgins Trust's new Chief Executive Richard Angell. The '2030: HIV Time's Up' landmark campaign aims to engage and mobilise support to finally bring an end to the HIV epidemic in the UK. The campaign focuses on what needs to be done if we are to meet the 2030 global target to end new HIV transmissions – and for the UK to be the first country in the world to achieve this. Its key message highlighted that it's possible to be living with HIV and not know it, and that we urgently need help to find and test everyone living with HIV in the UK, as people with HIV who are on effective treatment can't pass it on.

On World AIDS Day 2023, it was the culmination of nearly two years of campaigning for an expansion of opt-out HIV testing to A&Es in all areas with a high prevalence of HIV. The government announced a £20 million investment in opt-out HIV testing in 47 more emergency departments across England. We have worked hard to get people lost to HIV care on the policy and political agenda, and the expansion of opt-out HIV testing will include funding for retention and re-engagement in care.

It was an historic year for our work in Scotland, partnering with the Scottish Government for our anti-HIV stigma campaign. The 'Stigma Is More Harmful than HIV' campaign included the first TV advert on HIV since the UK Government's 'Don't Die of Ignorance' campaign featuring tombstones almost 40 years ago. The advert provided a much-needed update on the huge medical progress in the fight against HIV, as well as highlighting the abhorrent stigma which remains. Our powerful message was shared on TV, billboards, newspapers and online.

Our work to fight HIV stigma and end discriminatory rules for people living with HIV saw more success when in January, the DVLA rescinded its "driving with AIDS" ban and updated its HIV guidance to reflect the reality of living with HIV today.

In the second year of the renewed contract for the National HIV Prevention programme, we had a successful National HIV Testing Week campaign, continuing the 'I TEST' rebrand. The increase in HIV testers kept pace, and we found high levels of recognition among key populations, especially gay, bisexual men and other men who have sex with men and Black African people, and the highest number of Black African testers since National HIV Testing Week began.

We continued to tackle sexual health inequalities and innovate in our offerings of sexual and reproductive health services to marginalised and seldom heard from communities. Our service in Brighton marked 25 years since Terrence Higgins Trust became the lead local HIV provider. Leading with a key focus on community coproduction and service innovation, the new PrEP2U clinic crucially aims to remove some of barriers to PrEP provision and uptake, by bringing the sexual health clinic out into the community. As at March 2024, over half of clinic users had never accessed sexual health services before. As we work towards ending new HIV transmissions in the UK, Brighton & Hove is striving to be the first city that achieves this goal.

Over the past year we have been undertaking research to examine unmet needs in sexual health, in particular the experiences of communities whose sexual health needs are currently not met. In early 2024, our UK-wide Mystery Shopper report on the state of sexual health services showed that while the poor state of sexual health in the UK affects everyone, some groups bear a greater burden

of STI diagnoses or face additional barriers to accessing sexual health services. Our clear recommendations are a vital tool to catalyse government to act now for urgent improvement and commit to a new sexual health strategy for the country.

We continued to support people to live well with HIV, with a special focus on growing older with HIV. The average age of people living with HIV in England is getting higher – half of people receiving specialist HIV care in 2022 were aged 50 or over. Working together with service users we designed and delivered a number of Gilead funded pilot projects focussing on physical wellbeing, and support around relationships and intimacy. In early 2024, we launched an online social care training programme on HIV to educate those working in social care settings to tackle stigma and discrimination in the provision of care to people living with HIV

Throughout the year, our supporters, volunteers and staff have shown the same incredible dedication as they have done in previous years.



Our year in numbers



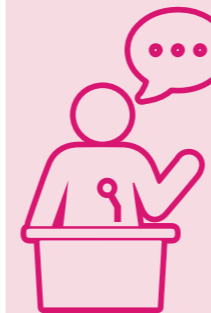
Our campaigns

- Over **25,000** test orders during our new National HIV Testing Week 'I Test' campaign
- Had **1.7 million** video views from our content on all digital platforms



Our services

- Answered **12,951 enquiries** to our confidential free helpline THT Direct
- **1,799 members** of online peer support My Community Forum



Our volunteers

- An average of **105 volunteers** every month contributed nearly **14,000** hours to projects, equivalent to nearly **8** full time working staff
- **Over 21,100 people** were reached through **278 Positive Voices sessions** in a record-breaking year for our Positive Voices speakers programme
- HIV Ambassadors delivered **13 talks** to **601 people** in health & care in London



Our supporters

- Individuals gave us **over £1.4 million** in response to our appeals, or by giving a regular gift



Opt-out HIV testing in A&Es

- ✓ Saves money
- ✓ Relieves pressure on the NHS
- ✓ Tackles health inequalities



AIM ONE: End new cases of HIV by 2030

Our sights are set on ending new cases of HIV in the UK by 2030, and to become the first country in the world to do so, and the first time the transmission of a virus has been stopped without a vaccine or cure.

We have a clear roadmap to ending new HIV cases in the UK by 2030. We need to make sure that across the country we never miss an opportunity to test and get everyone onto effective treatment so they can't pass on HIV. We need to end the stigma and discrimination that stops people from getting support and tackle the health inequalities that stop people testing and receiving care.

In 2023/24, we were successful in our work to win the expansion of opt-out HIV testing and launched our '2030: HIV Time's Up' campaign. Throughout the year, we targeted our work to ensure that decision makers understood the urgency of acting now if we are to achieve our ambitious goal.

2030: HIV Time's Up

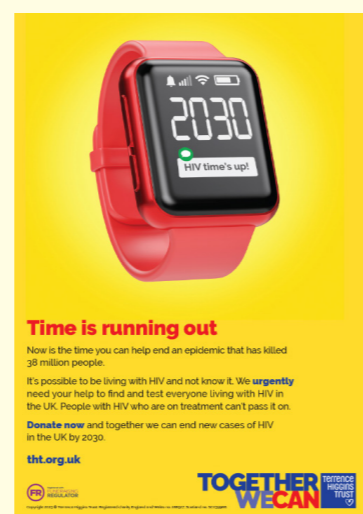
In April 2023, we launched our flagship campaign to end new cases of HIV in the UK by 2030, 'HIV Time's Up'.

Based on one of our key objectives as an organisation - to end transmissions of HIV in the UK by 2030 - the campaign takes our mission to the general public, partners and policy-makers to bring awareness and elicit support. It aims to effectively communicate what exactly the goal is, how it is achievable and what we as an organisation are doing to make it a reality. Our key messaging focuses on the urgency of the 2030 goal and that 'time is running out' as we approach this milestone.

The campaign used a variety of media platforms, including print and social media, and ran across many of our projects over the year, from ongoing challenge events such as the London Marathon, Pride, fundraising appeals and our 2024 Election manifesto.

The 2030 goal

- Ending new HIV transmissions by 2030 is a WHO, Global Fund and UNAIDS global strategy.
- We have successfully campaigned for the Westminster, Holyrood and Cardiff Bay governments to commit to this target.
 - In England, we saw the first reporting to Parliament on progress against its HIV Action Plan in December 2022.
 - Wales announced their 30-strong promises to end the epidemic in March 2023.
 - In March 2024, Scottish Government published its plan to end HIV transmissions by 2030.



Time is running out

Winning the expansion of opt-out testing

In England

We spearheaded the campaign for an expansion of opt-out HIV testing to A&Es in all areas with a high prevalence of HIV. In December this year, we were successful.

On World AIDS Day 2024, the then new Health Secretary Victoria Atkins announced a £20 million investment in opt-out HIV testing in 47 more emergency departments across England. This brings England in line with NICE, BHIVA, BASHH and BIA guidelines and is the realisation of the flagship recommendation of the HIV Commission.

This win was the culmination of nearly two years of campaigning: our policy and public affairs team organised open and private letters, multiple interventions in parliament and a series of events at conferences, online and in person as part of the campaign. We facilitated more than 50 MPs, mayors and peers raising the issue with successive health secretaries.

Hospitals from Birmingham to Bristol, from Portsmouth to Peterborough, are benefitting from a year of funding, with the first A&Es due to start testing in summer 2024.

Results from London, Manchester, Brighton and Blackpool have continued to remind us just how game-changing this type of testing is. More than 5,000 people have been found with HIV, hepatitis B and hepatitis C in two years, having passed through A&E and received a blood test in one of those four cities.

We're already working with politicians to campaign for an extension of the programme, so that testing can continue in all areas with a high prevalence of HIV until we've found the last person living with undiagnosed HIV.

In Scotland

On World AIDS Day 2023, the Scottish Government announced funding for three short opt-out HIV, hep B and hep C testing pilots – in NHS Lothian, NHS Grampian and NHS Highland. This investment is a crucial first step and we continue to call for long-term investment in opt-out HIV testing across Scotland.

The Scottish HIV Elimination Plan

We played a central role in ensuring Scotland's HIV Transmission Elimination Delivery Plan was published in March 2024 – a crucial step on the road to ending new HIV cases in Scotland.

This plan was long-awaited, following the publications of recommendations from Scotland's HIV Transmission Oversight Group in 2022. Terrence Higgins Trust worked on that oversight group and has been working to influence the plan since.

Our work to secure an inquiry from Holyrood's Equalities, Human Rights and Civil Justice Committee played a key role in ensuring that the plan was published.

The plan includes short, medium and long-term actions, and reaffirmed previous commitments, which include: work on the 'Stigma is more harmful than HIV' campaign, which was delivered by Terrence Higgins Trust; introducing a national postal HIV self-sampling service; funding opt-out testing pilots; and making PrEP available online.

Finding people not engaging in HIV care

During the year, we worked to educate both organisations that work on HIV, and decision-makers, on why finding and re-engaging people lost to care is so vital to achieving the 2030 HIV elimination goal. Opt-out HIV testing in A&Es has highlighted the scale of this problem – more than 1 in 3 of those found with HIV in A&Es have been previously diagnosed but were not accessing care.

Up to 14,393 people living with HIV in England have not been to their HIV clinic for more than 15 months. Because they are not on treatment, they are at higher risk of developing serious illness and dying, and may be at risk of passing on the virus. In 2023, UK Health Security Agency (UKHSA) reported that previous data on the number of people diagnosed with HIV who were not receiving care had been systematically underestimated by only taking into account those not in care in the last 15 months.

Our team's work on lost to care last year directly informed the model for the lost to care work that HIV services are exploring. We provided secretariat for a task and finish group of the HIV Action Plan Implementation Steering Group on people lost to HIV care, which did a deep-dive into the latest data and best practice in this area, and expert advice to a concurrent group on low prevalence parts of England. Both groups are due to report in Autumn 2024.

Our 2023 report on people lost to care directly informed the design of our new re-engagement service in London. Terrence Higgins Trust is working in partnership with six HIV clinics and a consortium of other support organisations to re-engage people living with HIV across London through funding from Fast Track Cities London. We have recruited an HIV Care Coordinator to work on this project and sought similar resources to work with clinics outside London. We have called for the national funding of a 'HIV Retention England' programme and its equivalent in Scotland and Wales.

We have worked hard to get people lost to HIV care on the policy and political agenda – and the issue has been raised several times in parliament. The expansion of opt-out HIV testing will include a 10% funding allocation for community support, in recognition of the important of retention and re-engagement in care.

Unblocking access to PrEP

Expanding access to HIV prevention pill PrEP (pre-exposure prophylaxis) is key to our mission to end new cases of HIV by 2030.

We provided expert opinion to the government leading up to the publication of its roadmap for improving PrEP access in February 2024. While we welcomed its publication, our response highlighted that it didn't go far enough in outlining a definitive expansion of access to the game-changing drug which currently can only be prescribed in sexual health clinics. These services are often over-stretched, and thus more than 60% of people trying to access PrEP are stuck on long waiting lists, raising the possibility of acquiring HIV in the meantime⁸. We continued our work to call for PrEP to be made available through an online initiation tool, in community pharmacies and for those in prison.

Self testing service

We provide low-cost and free HIV tests to people across the UK via our website test.tht.org.uk. We are the only service across the country that will provide a free test to eligible individuals irrespective of their location if they are from a group that has a high risk of HIV, and can't afford to buy at the low cost of £15. People are offered an option of a finger-prick blood test or an oral swab test.

Between April 2023 and March 2024, there were **15,663** orders placed. There were 11,168 finger-prick blood test orders and 4,495 oral swab orders. From these orders, we received results for 8,629 tests of which **38** reported a reactive result.

For 8,796 tests, people indicated that they had either never tested or last tested over a year ago. We provided 3,519 tests for free to individuals who could not afford to pay £15.



⁸ Not PrEPared: Barriers to accessing HIV prevention drugs in England, Terrence Higgins Trust et al, November 2022

Brighton: Innovation and working together to end HIV transmission

This year our service in Brighton marked 25 years since Terrence Higgins Trust became the lead local HIV provider, a testament to how long our community has been fighting for the care we need to end HIV. It has taken the combined powers of people living with HIV and those who are not to fight for the innovations and progress made over the decades.

Our service in Brighton & Hove has been at the forefront of this mission and has a proud track record of working together to design services that fit the needs of both people living with HIV and of those at risk of acquiring HIV.

One of the more recent examples of this community co-production is our innovative community PrEP clinic, PrEP2U. A partnership between Terrence Higgins Trust and the local integrated sexual health service, SHAC, our focus has been on raising awareness and improving access to HIV prevention pill PrEP. We are particularly motivated to understand how community innovation and building trust can support us to address health inequalities.

Getting PrEP to the people who most need it is a work in progress; many still do not know what it is or how to access it. There is also a cohort of people who do not want to go to mainstream sexual health clinics. There are many reasons why someone might not want to go to a clinic, such as previous bad experiences, stigma, or experiences of discrimination. Concerns about homophobia, transphobia and racism are sadly still very much alive.

PrEP2U has removed some of these barriers by bringing the sexual health clinic out into the community. Every Monday and Thursday, we open our doors to people who want to start on PrEP. During an appointment, we offer a full HIV and STI screening, advice, information, vaccinations for HPV and Hep A/B, and a prescription of PrEP to take home.

We began in spring 2022 and have seen 287 individuals up to March 2024. Just over half had never accessed sexual health services before. Everyone was suitable for PrEP but



almost 80% had never used it before. About half had reported condomless sex in the past 3 to 12 months with between 1 to 5 casual partners. Of those who had used it before, some had been sourcing their PrEP through private prescription, which was common before it was available on the NHS. In addition, for those who had previously been using PrEP but had stopped, PrEP2U has been an easy way to get restarted.

The majority of people coming to PrEP2U have been gay or bisexual men. However the numbers of women, trans people, migrants and non-white individuals was more than double that seen via the local NHS PrEP clinic. We found that often PrEP2U service users are vulnerable in complex and compound ways that our community healthcare workers are familiar with. These include pressures associated with poverty, housing and low income, lack of choice, ongoing substance use, or mental health recovery.

The continued success of our PrEP2U service in Brighton is ensuring that under-represented groups know about PrEP and provides a community gateway to access it. We are working towards ending new HIV transmissions in the UK and Brighton & Hove is striving to be the first city that achieves this goal.

Our campaigns change lives

Our impact in numbers

- **25,000** HIV self tests or self sample tests ordered during National HIV Testing Week (NHTW)
- **123,150** visits to the It Starts With Me (ISWM) website
- **436,000** video views from our YouTube and TikTok accounts
- **29,779** completions of online tools, including condom quiz, when to test, which test, and prep tools
- **676,241** visits to our main website information
- **677,981** people engaged online with the NHTW campaign and 33,577 with the ISWM campaign website
- **828,739** people engaged with the ISWM campaign on digital channels
- **106 million** opportunities to view targeted print and outdoor advertising
- **1.7 million** video views on digital platforms
- **9,530** pieces of coverage
- **12,303** resource orders placed during NHTW
- We were the **11th** most mentioned charity by MPs on X (formerly Twitter) in 2023.



Health Promotion

HIV Prevention England

HIV Prevention England activity consisted of the "It Starts With Me" and National HIV Testing Week campaigns, as well as a range of partnership and capacity and skills development activity.



National HIV Testing Week (NHTW)

In February 2024, the National HIV Testing Week campaign continued its focus to increase testing in key groups most affected by HIV using the strapline 'I Test', which positions testing as something normal and desirable, that we can all take personal accountability for. The campaign was promoted through print advertising, targeted broadcast, Out of Home (OOH) promotion, and digital advertising.

As a result of the campaign:

- There were **9,579** orders for HIV self-sampling kits and **15,353** for self-testing kits.
- **2,763** kits were ordered by people of Black African ethnicity, one of our key target groups, up from 2,132 in 2023, and **12,889** were ordered by gay, bisexual and other men who have sex with men (GBMSM) up from 9,260 in 2023.
- **255** organisations including HPE partners, clinicians, STI clinics and GPs ordered over **12,303** resources including posters, HIV & STI resources and supporting merchandise.

- Our local activation partners (LAPs) delivered **1,647** HIV point-of-care-testing (POCT) tests, 3 of which were reactive.
- **8,523** information and advice interventions were delivered by LAPs across 14 main areas across England, 10 being outside of London.
- Over **22 million** people were reached online, **2.7 million** through print advertising, and **102 million** people through outdoor advertising.
- Online, our videos had **911,077** views and **15,000** active users on the It Starts With Me campaign website.

Some of the highlights of NHTW included:

- In HIV Testing Week, we facilitated two Health Ministers – the Shadow Equalities Minister and the Deputy Leader of the Labour Party – doing HIV self tests during HIV Testing Week, arranged a visit with the Equalities Minister to our Brighton Service, and supported numerous MPs to promote HIV testing online.
- We secured **317** pieces of media coverage mentioning NHTW, including BBC News, BBC Morning Live, Sky News, Sunday Mirror, and The Sun, with people living with HIV at the heart of all coverage.
- We collaborated with celebrities, influencers and MPs to create a buzz around the week across social media platforms, including Charity Shop Sue, an influencer who has a huge LGBT+ following, and celebrity medic Dr Amos Ogunkoya, who has chosen Terrence Higgins Trust as one of the three charities he supports.



It Starts With Me

In July 2023, the It Starts With Me summer campaign focused on raising awareness of HIV and sexually transmitted infections (STIs), alongside HIV and STI prevention. Using the tagline 'Ready for a hot summer' and a positive, fresh and summer-themed creative, the campaign sought to remind people of the importance of looking after all aspects of their sexual wellbeing. It was targeted at gay, bisexual and other men who have sex with men (GBMSM), heterosexual people of Black African ethnicity, and other key populations affected by HIV or poor sexual health.

The campaign achieved **26,171,082** digital impressions online with **194,465** video views and **85,000** active users on the ISWM website. We received **8,682** condom pack orders (a significant increase on the previous year).

Highlights include:

- **8,100** information and advice interventions were held via local activation partners (4,812, 2022)
- **1,059** point-of-care tests (POCT) were conducted (1,011, 2022)
- **8,838** resource items obtained through the HPE portal (4,438, 2022)
- **5,890** orders for condom packs were made (256, 2022).

Capacity and Skills Development

- HIV Prevention England hosted the HIV Stigma Symposium in March 2024 in Birmingham. The event brought together HIV experts, activists, healthcare professionals and individuals affected by the impact of HIV stigma. We aim to use the learning from this event as a catalyst for further sector engagement work on HIV stigma.
- As part of activity during National HIV Testing Week, we hosted a webinar on the latest HIV testing data and an update on emergency department opt-out HIV testing in partnership with colleagues from the UK Health Security Agency, NHS England, and the Department of Health and Social Care.
- We commissioned NAM aidsmap to produce a briefing paper that provides an overview of PrEP use for cisgender women. It reviews relevant guidance and research relating to types of PrEP, if/how PrEP affects contraception, menstrual cycle, pregnancy, and menopause, and the barriers to PrEP use among women.
- We promoted our latest briefing on gonorrhoea for sector stakeholders, providing an overview of gonorrhoea epidemiology in England, research on gonorrhoea and antibiotic resistance, treatment guidelines, and the implications for HIV prevention and services.

In early 2024, the Department of Health and Social Care confirmed the extension of the contract for an additional year until the end of March 2025.



AIM TWO: Be here until the last person living with HIV needs us

For four decades, we have provided support for people living with HIV that's tailored to their needs. As the first HIV charity in the UK, we pledge to be here for those who live with the virus until the last person needs us. During the year, we've continued to have historic wins in our work to end the stigma and discrimination that still surrounds HIV, and we've focused on what more needs to be done to meet the needs of an ageing population living with HIV.



Anti-stigma campaign in Scotland

A key moment of the year was our partnership with the Scottish Government for the Stigma Is More Harmful than HIV campaign, launched in October 2023. The campaign aimed to help ending HIV transmission in Scotland by 2030 by finding people living with HIV (some undiagnosed) and support getting them into or back into HIV care and treatment. The campaign supported this aim through reducing stigma that makes some people less likely to access HIV prevention, testing and treatment services.

Our powerful message that stigma has a bigger impact on the lives of people living with HIV than having HIV does was shared on TV, billboards, newspapers and online, with a dedicated website hivstigma.scot, and provided a much-needed update on the huge medical progress in the fight against HIV, as well as highlighting the stigma which remains and its impact on people living with HIV.

As part of this, we launched the first major TV advert on HIV since the UK Government's 'Don't Die of Ignorance' campaign featuring tombstones almost 40 years ago. Long after they first aired in 1987, the adverts have continued to impact public attitudes towards



HIV. Although they saved lives at the time, an update on HIV was long overdue. While the 1987 advert's message was 'it's a deadly disease and there's no known cure', our advert explained how an HIV diagnosis has transformed with 'you can live a healthy, happy life just like anyone else', but stigma continues to have a devastating impact.

Our impact

- TV advert played on STV's network over 90 times, changing the hearts and minds of those who remember the tombstone adverts and bringing a true-to-life portrayal of HIV to a younger generation.
- 10,401,000 viewers / listeners across the UK with press and TV coverage including BBC Radio 4's Today Programme, BBC Scotland News, STV News and STV Tonight, BBC Radio Scotland, Sky News, LBC, BBC Radio 5 Live.
- 31,000 visits to campaign website.
- Campaign mentioned in Scottish parliament by Claire Haughey MSP, with First Minister Humza Yousaf affirming that he is 'absolutely committed to eliminating HIV transmission in Scotland by 2030'.
- Accolades at the Charity Film Awards, Marketing Society Awards and Proud Scotland Awards.

Our challenges: Growing older with HIV

The recommendations produced by our 'Growing older with HIV' strategy review were used to develop a new programme for people growing older with HIV in 2023/24. The average age of people living with HIV in England is getting higher – half of people receiving specialist HIV care in 2022 were aged 50 or over, compared to 27% in 2012⁹.

Together with service users, we designed and delivered several Gilead-funded pilot projects focusing on physical wellbeing, support around relationships and intimacy, and an online social care training programme to educate their workforce about HIV. 48 people living with HIV and 18 sector professionals benefitted from group work and expert talks, including introduction to psychosexual support, sexual difficulties, managing comorbidities, eating well for less, and engaging your GP.

Social Care training

We produced a new online Social Care training programme for those working in social care services. With 50% of people living with HIV now aged 50 and older it is critical that the Social Care sector has awareness and knowledge of HIV, and is provided with up-to-date information, enabling those who work in these settings to provide respectful and supportive care.

While, thanks to effective HIV treatment, many people living with HIV are worrying less about the medical impact of HIV on their lives, they are



concerned that they will be treated differently in social care settings because of stigma and out-of-date attitudes and beliefs about HIV. People should be able to grow older with HIV knowing they can access the support and care they need without fear of discrimination or prejudice.

The training was coproduced with people growing older with HIV as well as people working in the care sector to ensure it is pitched at the right level, is accessible and 'bitesized'.

“I've learnt that people on effective HIV treatment can't pass on the virus to anyone. This has given me more confidence when I look after people who are living with HIV. I know I have nothing to worry about and I can focus on giving them fantastic care. It's important that everyone is treated with respect and dignity.”

Training participant

for easier understanding. Three Positive Voices speakers were filmed for videos for the online training, as well as Janusz Domagala, a Great British Bake Off contestant who is Polish and works in social care. The training highlights the all-important "Can't Pass It On" message, and contextualises the key facts around HIV and transmission for people working in social care. The training went live in March 2024, with the full media launch scheduled for spring 2024.

Removing outdated HIV-related rules in the DVLA



In January, the DVLA updated its HIV guidance to reflect the reality of living with HIV today. With British HIV Association, we worked with the DVLA to remove outdated language that required a driver to tell the DVLA if they 'have AIDS' – with a £1,000 fine if they didn't.

Through positive engagement with the DVLA, we secured a change to the rules to remove all stigmatising language from the guidance. Crucially, new rules make it clear a person does not have to tell the DVLA if they are living with HIV.

Our volunteers

As an organisation founded by a group of committed friends who recruited volunteers to join the cause, a strong volunteer culture developed in the organisation and we are proud to say that continues today.



Our incredible volunteers work in many roles across lots of our departments. Their roles include peer support, counselling, outreach, sharing their lived experience, fundraising and event support, answering calls on THT Direct, and working on reception as well as cheering on our challenge event competitors and using their skills – and learning new ones – to assist with finance and other office administration.

Our volunteers are at the heart of our services. Their dedication and commitment to our service users and the impact they have on the community we serve is seen every day.

During 2023-24 we had an average of **105 volunteers** per month, which, with an additional 12 Trustees, contributed **13,804 hours** to Terrence Higgins Trust projects – equivalent to **over £175,000 donated work** hours and **8** full time working staff.

As always, we are so grateful to our dedicated and passionate volunteers who contribute so much to the work of the charity.

THT Direct

Last year, we had over **12,951 enquiries** to our confidential free helpline THT Direct on a range of subjects related to HIV and sexual health. Around 25% of our enquiries were via email or online, sometimes from different parts of the world. We answered **2,474 live chats** through our web-chat service.

The advice team helped **763 new service users** (759 in 2023) with the key subjects explored being related to HIV transmission; information on HIV and symptoms; HIV testing; PrEP and PEP, and STIs. Over a third of the helpline talking time was spent supporting people living with HIV and/or signposting them to other support services.

Our helpline volunteers dedicated **514 hours** to the service over the year, and our hardship fund volunteer gave **633 hours** to the service.

⁹ UKHSA, 2023. HIV testing, PrEP, new HIV diagnoses and care outcomes for people accessing HIV services: 2023 report.

Therapies service

Our low-cost counselling service provided one-to-one online and in-person counselling to **238 service users** through **2,488 hours**. In January, we introduced a new fee structure for service users earning over £50,000, and offered free counselling to those living with HIV who cannot afford the low-cost service. This was a change from previous years where free counselling was open to everyone at risk of poor sexual health. An evaluation that reviewed the service outcomes of 275 service users showed a significant positive impact of counselling.

The service successfully delivered a new counselling protocol to address a waiting list of 75 service users. In three months, we saw the waiting list reduced to 36 service users. The new protocol not only reduced the waiting time but also responded to the most urgent needs, such as the mental health of those waiting.

120 counselling staff, volunteers and front-line staff attended **7 workshops** for HIV and Mental Health in a training pilot led by internal and external trainers. The pilot aimed to raise awareness, knowledge and skills on the importance of mental health when living with HIV.

The service has made significant strides in the development of psychosexual therapy delivery. We have trained and upskilled a staff counsellor, recruited an external therapy supervisor from COSRT (College of Sexual and Relationship Therapists), and brought on board two qualified volunteer therapists specialising in sex and relationship therapy. This development not only enhances our service offerings but also opens new avenues for collaboration.

Through our partnership with COSRT, we will also support the delivery of counselling after the end of the chemsex group 'Let's talk about chemsex,' and support complex needs service users as part of the Fast Track City London contract.



Chemsex support

Chemsex means sexual activity, mostly between men, while under the influence of drugs. If you're under the influence of drugs you might not use a condom, which can put you at risk of HIV and other STIs.

The 6-week learning and support programme for gay and bisexual men and trans and non-binary people, 'Let's talk about Chemsex,' assisted **28 people** through online group and individual support. The impact of the chemsex support was significant, and 98% of service users reported improved psychological health; physical health and overall quality of life (as measured by the Treatment Outcome Report – NTDMs). 96% increased their sense of control over their substance use and the decisions they make; 83% of participants reduced the frequency with which they use recreational drugs.

The initial stages of redevelopment of our chemsex website and digital self-help tool were completed.

Work and skills programme

The work and skills programme continues as an online national service. Further to a strategic review the programme underwent a redesign and since April 2023 offers a 3-months journey open 3 times a year. Service users benefit from a suite of 11 work ready workshops, being paired with an employment mentor for 1-2-1 tailored support and resources for self-directed learning. **43** service users have completed the programme (with a small drop out number due to personal circumstances or citing mental health issues). Of those, **12** have secured full or part time work and a further **7** taken up volunteer roles within and outside of Terrence



Higgins Trust. The new cohort model has been well received and the added peer support element has enhanced participant engagement and motivation.

Workshops delivered throughout the programme focused on building confidence, overcoming barriers to employment, understanding skills, setting goals, CV writing, application forms, interview preparation and techniques, managing part-time work and benefits, and living well with HIV in the workplace. **90%** of service users reported improved levels of confidence and improved their employment-related skills and knowledge.

Our partnership with ViiV healthcare has been strengthened with a further 3 service users securing 1-year paid contracts under their Back to Work scheme. The programme continued its partnership with the candiNETWORK and provided a mix of in-person and online work and skills workshops to **23 individuals**.

Common Bond Women's Group: Supporting each other

Over a third of people living with HIV in the UK are women, yet too often they feel invisible. Our monthly online peer learning and support group for women, Common Bond, was set up in 2022 and currently has **170 members**, of which **65** attended in 2023/24. 56% of the women are from Black African or other Black and minority ethnic communities, and 42% live outside of London.

We'll continue work to support women living with HIV, co-producing programmes with women and external partners going forward.

MyCommunity Forum – online peer support

National online peer support continued to be offered through MyCommunity Forum, a safe space for people living with HIV to connect with peers. This continued to grow, with **412 new members** joining during the year, taking membership to **1,799**. A wide range of concerns were discussed including new diagnosis, sharing your status while dating, and obtaining health insurance.

A team of **8 volunteers** engage with and moderate the forum on a rota basis. In the coming year, we will be launching a new platform optimised for mobile use to increase engagement and integrate our online peer support groups.

A partnership concluded with the NHS Health Economics Unit to archive ten years of data from the now closed MyHIV Forum. Poster abstracts were accepted by IAS 2024 in Munich and an e-book is in development to include the data and personal stories.



“ My self-criticism has reduced massively doing these sessions, and I'm more confident of being me, I'm blown away with everyone's work. ”

Common Bond creative writing session attendee

Specialist peer support

Our monthly hybrid learning and support group for people long term diagnosed, Before96, supported **39 people** this year. **36 people** attended our 50+ social activities in London to reduce isolation and loneliness by providing visits to local London attractions, this year including visits to Kew Gardens and the British Museum alongside crafting workshops. Common Bond, our online group for women, including anyone who identifies as female, supported **65 people**.

Our partnership with Positive East, Positively UK and METRO Charity for those newly diagnosed continued to thrive with funding secured by Fast Track Cities for 18 months from 2024 onwards. The partnership supported **43 people** over the year. In November we hosted a hybrid session with 13 participants.

Learning to Live Well with HIV

Learn about HIV | Staying well | Sex and Relationships | Connect with others

Have you been diagnosed with HIV in the last 3 years?

Our course will help you deal with your diagnosis and gain the knowledge and tools to live well with HIV.

The course is free of charge to anyone recently diagnosed with HIV in London.

Four Monday evenings: 14 and 21 October, 4 and 11 November 6pm to 8.30pm.

To find out more and register a place please email livingwell@tht.org.uk or call Met on 07552 891 547 (Wednesday to Friday) or speak to the in-clinic peer support staff.

Logos: Positively UK, METRO, PositiveEast, Terrence Higgins Trust

Hardship Fund

Throughout the year, there were **265** (up from 205) successful applications to our vital Hardship Fund and we distributed **£29,150**, helping people living with HIV experiencing financial difficulties or affected by poverty-related issues. Shrinking

disposable income due to the cost-of-living crisis has been noted as a contributing factor for applicants.

Towards the end of the year, we increased the payment from £100 to £125, and changed the criteria to reflect amendments to the benefit thresholds to widen the scope of those we support.

Macfarlane programme

Throughout the year, we worked hard to support and advocate for people who were either infected or affected by HIV as a result of the contaminated blood scandal. During the year, we provided case management, advice and general support while continuing to fight for justice for survivors. Alongside our trauma counselling offering, we ran a facilitated peer support programme for those both infected and affected by the contaminated blood scandal.

The campaign for justice for the victims of the infected blood scandal took many significant steps forward this year. The publication of the Infected Blood Inquiry report was a damning indictment of the way people were treated over decades. The Macfarlane team have been lobbying effectively over the last year for compensation for victims. We lobbied both in Westminster and at party conferences to keep the issue high on the agenda in Parliament and for the inclusion of compensation in election manifestos. We commissioned polling, hosted a reception where politicians could meet with members of the community, and carried out research in partnership with The Hepatitis C Trust to support the case for compensation. We have continued to support The Factor 8 - Independent Haemophilia Group who have played a significant role in the fight for justice, especially around the adoption of the Hillsborough Law.

I support fair compensation for the infected blood community

Terrence Higgins Trust logo

Amplifying the voices of people living with HIV



diverse and inclusive group of speakers and have plans and funding in place to improve this even further. We have created new audiences in health & care, police and prisons and reached out to more areas of the UK than ever before.

HIV Ambassador Programme

We successfully launched our new HIV Ambassador Programme, having won the contract to deliver it as part of Fast Track Cities London. This programme aims to educate the health & care sector in London about HIV stigma and support people living with HIV to deliver information and act as ambassadors for their communities. During the year, we recruited and trained **20 Ambassadors** and launched the health & care talks two months ahead of schedule. The programme is expanding and gathering data and is collaborating with the HIV Confident charter programme, delivered by National AIDS Trust with Positively UK and NAM aidsmap.

Positive Voices: User-led stories changing hearts and minds

Over **21,100 people** were reached through **278 sessions** in a record-breaking year for our Positive Voices speakers programme. HIV Ambassadors delivered a further **13 talks** to **601 people** in health & care in London, bringing the total of **21,701 people** reached through **291 talks**. Our speakers have been nominated for multiple awards, including one for a National Diversity Award.

We had an exceptional year for recruiting and training Positive Voices speakers, with more previously-unheard voices than ever before. 12 new speakers joining the programme, including two women from racially minoritised communities, one heterosexual man, three men from racially minoritised communities and a trans person. We welcomed three speakers with physical disabilities who have been speaking about the intersecting levels of discrimination they face. We also welcomed our first asylum seeker as a Positive Voices speaker.

Our audience has grown **470%** this year, with our annual number of talks delivered up by **277%**. Created and owned by people living with HIV, this flagship user involvement programme clearly demonstrates the power of co-production. We have a much more

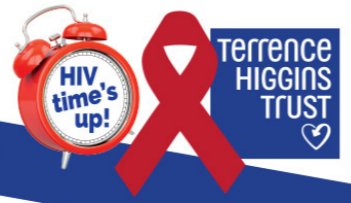
Expanding our work in Prisons

During the year, we worked with our partners at Cl2 Bureau, Sophia Forum and National AIDS Trust to plan and expand our work in Criminal Justice. We delivered **28 HIV Awareness events** in **18 prisons** across England, including 4 Young Offenders' Institutes and 2 women's prisons. We also delivered awareness training to people working in the Probation Service.

We collected over a thousand surveys from people in prison to understand knowledge and attitudes around HIV and this is being evaluated.

We secured £35,000 of dedicated funding to develop and expand this work and are applying for joint funding to expand this to other prisons as well as providing support to people living with HIV in prisons and advocating on their behalf for much-needed policy changes. One early win was getting the Ministry of Justice to agree to add our helpline, THT Direct, to the list of numbers all people in prison can call so that people in prison have the right to access free, confidential information about HIV and sexual health.

World AIDS Day - 1 December
Join us this World AIDS Day



World AIDS Day

This World AIDS Day, we remember those lost to this epidemic, supporting memorials across the country. We received wide coverage across the media and social channels with 530 pieces on the day itself on a range of topics including the work of our charity, real life stories of people living with HIV, and opt-out HIV testing.

- We secured our biggest ever World AIDS Day presence with Scottish politicians, with a reception at which the Minister for Public Health committed to continue funding Terrence Higgins Trust's testing programme and explore a Scottish NHTW. We organised a photo call in parliament which was well attended by MSPs, and a World AIDS Day parliamentary debate.
- In Wales, we co-hosted a World AIDS Day reception with Fast Track Cymru which was well attended, as well as speaking at the Cardiff WAD Memorial event.
- For the first time, we ran the Big Give, a match giving campaign, across the week around World AIDS Day, which raised 150% more than the year previously and more in one year than the previous 3 years combined.
- Sir Elton John was the keynote speaker at the House of Commons World AIDS Day reception. Victoria Atkins MP, the new health secretary, announced the expansion of opt-out testing to 47 additional A&Es and leader of the Opposition Keir Starmer pledged to commission a new HIV Action Plan within 100 days of any government were he to lead.



Remembering our namesake Terry Higgins

We collaborated with the National Portrait Gallery and artist Curtis Holder on a portrait of Terry Higgins. 'Terry Higgins - Three Ages of Terry' was released to mark what would have been his 78th birthday. This is the first time that the gallery has accepted a posthumous portrait as part of their permanent collection.

In summer, we revealed the Terry Higgins Memorial Quilt at the Festival of Quilts in Birmingham. The creation of the quilt was overseen by the charity's co-founders Dr Rupert Whitaker (who was Terry's partner) and Martyn Butler, as well as Terry's close friend Linda Payan, who worked closely with talented quilters from across the UK. Each of the eight panels celebrates different aspects of his life, including as a Welshman, a gay man and his time in the Royal Navy. The quilt also celebrates how much progress has been made because of people like our founders who took positive action during the darkest days of the epidemic.

We secured coverage on BBC Midlands featuring interviews with Dr Rupert Whitaker,



'Terry Higgins - Three Ages of Terry' by Curtis Holder.

Richard Angell and a quilter. The quilt has since been at the Fitzrovia Chapel in central London, the Millennium Gallery in Sheffield, and the National Museum of the Royal Navy in Portsmouth.

The quilt has joined the virtual AIDS Quilt gallery, created in collaboration with Google Arts and Culture.



AIM THREE: Make sexual and reproductive health the national priority it deserves to be

While the poor state of sexual health in the UK affects everyone, some groups bear a greater burden of STI diagnoses or face additional barriers to accessing sexual health services. Your race, gender, sexuality, geography and socio-economic background should not affect your right to enjoy a healthy life and good sexual health. Tackling inequalities in sexual health is vital if we are to stop the rise of STIs and continue our progress toward meeting the 2030 goal of ending new HIV transmissions.

Throughout the year, our focus was on ensuring everyone can access information, support and services to achieve good sexual health, and doing the essential research groundwork needed to push decision makers to action.

STI update

Sexually transmitted infections (STIs) such as gonorrhoea, chlamydia, and syphilis are on the rise across the UK. Sexual health services are struggling to meet the increasing demand as a result of a decade of under-investment.

- The UK Health Security Agency (UKHSA) reported there were 401,800 sexually transmitted infections (STIs) reported in England in 2023 – a 5% rise on the previous year¹⁰.
- In Scotland, STIs are also on the rise with the number of infections more than doubling since 2017. Figures published by Public Health Scotland show there were 13,400 chlamydia cases¹¹ and 5,999 gonorrhoea cases¹² reported in Scotland in 2023 – with a 56% increase in gonorrhoea diagnoses since 2019.
- In 2023, Public Health Wales announced that the number of diagnoses of chlamydia and gonorrhoea were at a 10-year high in 2022¹³.



¹⁰ Sexually transmitted infections and screening for chlamydia in England: 2023 report, June 2024

¹¹ Public Health Scotland, Chlamydia trachomatis infection in Scotland 2014 to 2023

¹² Public Health Scotland, Gonorrhoea infection in Scotland 2014-2023

¹³ Sexual Health in Wales: Sexually Transmitted Infections, Emergency and Long-acting Reversible Contraception provision and Termination of Pregnancy Annual report 2023

Mystery shopping sexual health services

In July, we published the findings of our research into sexual health services access. The report 'Overstretched and under strain: a mystery shopper approach to access to sexual health services in England, Scotland and Wales' revealed the scale of access issues in services. The findings were stark: more than half of sexual health services across Great Britain don't offer an appointment to people not reporting symptoms, while 30% of services in rural England don't have postal STI testing.

We made three clear calls for urgent action: free country-wide postal STI testing, appointments for all within 48 hours, and easy booking via NHS apps.

The findings and recommendations were directly picked up in the Women and Equalities Committee's inquiry into STIs in young people and continue to inform our policy asks. The Committee stated that the government has 'failed to heed' warnings over adequately funding sexual health services amid 'deeply concerning' data on STIs in young people and published wide-ranging recommendations including on the need to radically increase the public health grant, universal access to free postal STI testing and the pressing need for a government strategy on sexual health.

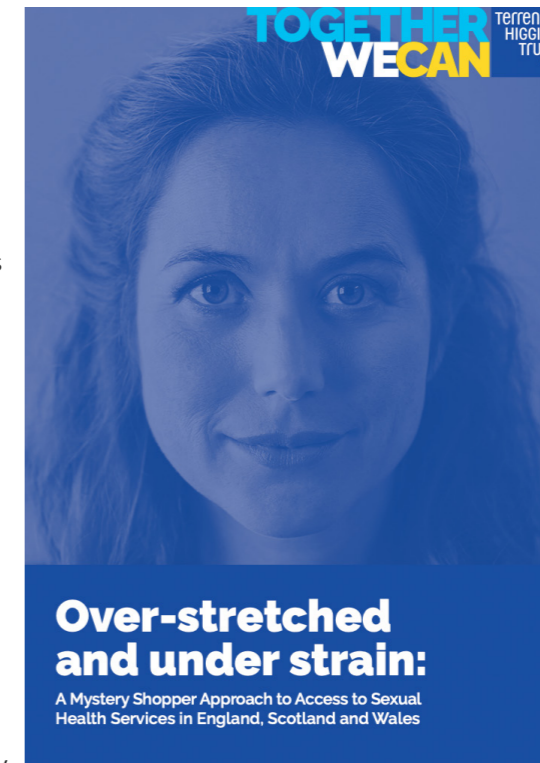
Reducing health inequalities and increasing HIV and STI testing in the community

Our work as a service provider delivering statutory services continued over the year, contributing to the ambitions and aims of our strategy in relation to both sexual and reproductive health and ending new HIV transmissions by 2030. During 2023/24, our services delivered activities and targeted interventions aimed at increasing STI/HIV testing, reducing health inequalities, particularly amongst minoritised groups and communities, and improving sexual and reproductive health.

We deliver our services in partnership with a wide range of NHS and other local organisations to maximise our reach as we work to raise awareness of the importance of good sexual and reproductive health. We work with local Commissioners and Public Health leads to inform our service models to ensure they are cost effective and responsive to emerging needs and trends.

As an organisation with a trusted reputation within local communities, particularly within more marginalised groups and communities, we are well positioned to focus our work on our key aims: increase access to STI and HIV testing; support for people living with HIV; contribute to promoting good sexual and reproductive health, and preventing unplanned pregnancies, particularly in areas of high rates of teenage conception, and high prevalence and late diagnosis of STIs and HIV.

To achieve these aims we delivered a range of high quality Sexual and Reproductive Health services and HIV Support in England, Scotland and Wales. In England, we are established throughout Brighton, Solent, Essex, Bristol & South Gloucestershire, Norfolk, Suffolk, Oxford, Milton Keynes, Cambridgeshire and Peterborough, Teesside and the London Boroughs of Harrow, Hillingdon, Brent and Enfield. In Scotland we deliver a wide range of services targeted at Glasgow, Fife, Ayrshire and Arran, and in Wales we continue to deliver a highly valuable structured counselling service for people diagnosed with, or those who are living with HIV.



Highlights from the year:

- Chlamydia testing campaign targeting 16-year-olds and over across Norfolk, Suffolk, Bedfordshire/ Milton Keynes, Cambridgeshire & Peterborough was delivered via TikTok and Snapchat, driving 22,500 people to the chlamydia test order portal. Significant uplift in completed tests with Cambridge & Peterborough and Suffolk seeing notable increases in positive cases.
- Launch of Solent Netreach, a digital marketing campaign in Solent area to boost STI testing in Black African communities and gay, bisexual and other men who have sex with men, and generated 4,586 clicks across Twitter/X and Facebook/Meta.
- Launched our new Essex service offering NHS funded sexual health services across the county, delivered with partners including Provide Community. They are committed to ensuring everyone receives empathetic, appropriate and effective advice and care.
- Commissioned by several councils to repeat our Syphilis campaign.
 - Launch of Relationships Sex and Health Education package focused on supporting people with Special Educational Needs and Disabilities.
 - During year 1 2023/2024 the service has delivered a total of 33 sessions to 676 people working with young people, and a total of 69 sessions to 1,056 young people. In addition to this the service also delivered 6 specialist sessions to 66 other organisations/general public and 10 sessions to 102 people accessing community groups.
- Commissioned by several councils to repeat our Syphilis campaign.
- During Testing Week, the team in Bristol set up a testing session at City Hall with the Mayor to raise awareness.
- In Oxford the team delivered education to 330 students via group sessions in 7 schools over 29 sessions. Topics covered in these sessions were: sexual health, HIV awareness, healthy relationships, consent, contraception, and intimate photos and the law.

Promoting good sexual and reproductive health for young people

During the year, we delivered a range of C Card schemes (including THT Young and Free), throughout Norfolk, Suffolk, Cambridge & Peterborough, Milton Keynes, Essex and Oxford - with the aim of promoting good sexual and reproductive health, and helping young people access services. Between 2023/24 our services signed up at least **30,698** young people to C Card schemes.

Through the C Card scheme, young people between the ages of 13-24 can access an appropriate range of free condoms and lube, information and STI test kits (chlamydia and gonorrhoea) whether they are having sex, thinking about having sex or are curious about condoms, from a wide range of joining and pick-up points (CDS points). Pick-up points include youth venues and organisations, schools, colleges, universities, pupil referral units and pharmacies and GPs.

In accordance with best practice, young people aged under 16 can only have access to CDS points provided they have completed a consultation with a trained practitioner who has a valid DBS certificate and a unique ID (PIN) number to ensure they are safe and supported with their sexual health choices before joining the scheme.

Our work in digital accessibility

We are working to ensure our digital services are accessible to everyone who requires them and that the information we provide is both adaptable to meet individual needs and is culturally appropriate.



Quarterly accessibility audits of our websites now test against the new Web Content Accessibility Guidelines (WCAG) 2.2. A new AI accessibility widget was piloted and is now being rolled out across our sites which, along with enabling users to personalise their experience of our websites, enables text to speech and voice commands. Usability testing and user research are the basis of incremental user experience (UX) improvements. We continued to see growth in the number of people using our main website to access services and information, with **2.3 million** people viewing over **2.6 million** web pages.

Our statutory services

- delivered **114,283** personal contacts (face to face and digital)
- undertook a total of **25,180** HIV and STI tests resulting in 14 positive HIV tests and 1,084 positive STI tests
- delivered **7,026** hours of blood-borne viruses (BBV) support interventions (face to face and digital)
- distributed **671, 117** condoms
- delivered **6,449** outreach and health promotion episodes (face to face and digital)
- delivered **443** training / capacity building interventions and 8,921 people trained
- reached **289,180** people via digital marketing and campaigns
- engaged with **767** different communities and groups
- undertook **1,307** co-production activities.

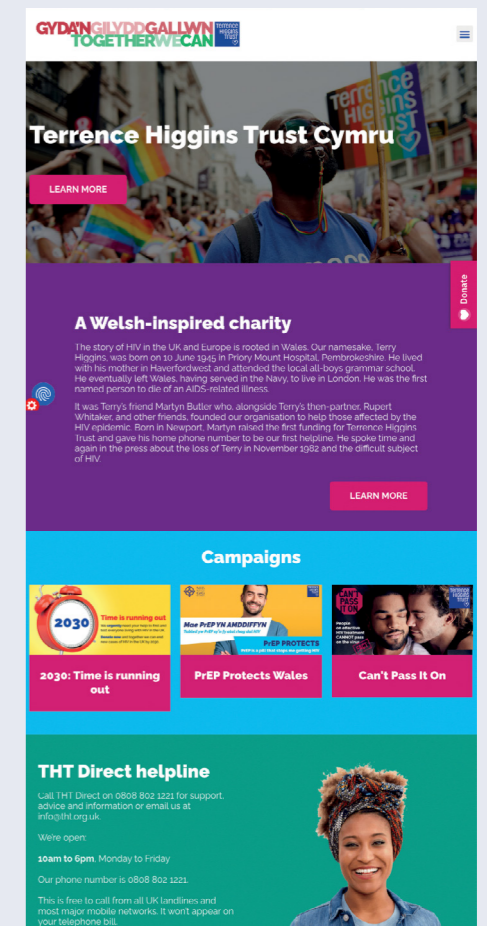


Wales

We expanded our presence in Wales with the launch of the new Terrence Higgins Trust Cymru website, development of policy and advocacy, and the re-starting of service delivery. A national volunteer programme was initiated to give us national reach and an active base of supporters to support our work.

We supported Social Care Wales in their work to ensure people entering the social care system do not face discrimination or stigma because of their HIV status. Highlights from the year:

- Launched a new, fully bilingual Terrence Higgins Trust Cymru website.
- Co-hosted a World AIDS Day reception with Fast Track Cymru which was well attended as well as speaking at the Cardiff World AIDS Day Memorial event.
- Took part in several Pride events and a climb to the summit of Snowdon with our Chief Executive, Director of Income Generation, and former Welsh rugby captain (and a person living with HIV), Gareth Thomas – in association with his TackleHIV campaign and colleagues from Viiv Healthcare.
- Translated our BMA Patient Information Award shortlisted trans & non-binary sexual health print resources into Welsh.



Scotland

This was a year of notable success across our campaigns, services and policy and public affairs in Scotland.

Working with partners from the NHS, academia, Public Health Scotland, other third sector organisations and the Scottish Government, we were privileged to lead on the development and delivery of a landmark new HIV anti-stigma campaign for Scotland. Informed at every stage by the voices of those with lived experience, Scotland's first nationally televised HIV campaign since the infamous tombstone ads of 1980s sought to update public awareness with the powerful message that in Scotland today, Stigma is More Harmful than HIV.

Our Living Well services continued to respond to increased demand for basic needs support, including working with the National Lottery to deliver a range of financial inclusion support for people living with HIV in Scotland most adversely affected by the cost-of-living crisis. Our Peer Support Scotland team also continued to collaborate closely with our service users to develop our peer support work in a number of areas, including ageing with HIV and combatting HIV stigma through storytelling, also facilitating service user focus groups to inform Scotland's ground-breaking new HIV anti-stigma campaign.

Our health promotion services continued to adapt and grow testing offerings to increase the options available to people experiencing or at risk of sexual health inequalities. As part of this, we were delighted to launch HIV Self Test Scotland, enabling any eligible adult in Scotland to access an HIV self test kit. Funded by the Scottish Government, this free national service is the only one of its kind in the UK to offer users the choice of a finger prick or oral swab test kit delivered to their home or a click and collect pick up point of their choosing. We also continued to offer postal STI testing services and a range of HIV and sexual health training and awareness raising options in partnership with NHS boards for Ayrshire and Arran, Fife, Lanarkshire and Tayside.

Our policy and public affairs work continued to focus on ensuring no communities are left behind in Scotland's work to tackle sexual health inequalities and end new HIV transmission by 2030. This included membership of expert advisory panels to help shape and drive the launch of two key Scottish Government strategic plans, Scotland's Sexual health and Blood Borne Virus Action Plan 2023 to 2026, and Scotland's

HIV Transmission Elimination Delivery and Implementation Plan 2023 to 2026. We were also pleased to work with the Scottish Parliament's Equalities, Human Rights and Civil Justice committee, with Terrence Higgins Trust Scotland service users and staff giving evidence to its inquiry, HIV: Addressing Stigma and Eliminating Transmission.

In September 2023 we purchased new office premises in Glasgow, which is being refitted. We anticipate moving in during the summer of 2024.



Highlights from our work in Equity, Equality, Diversity & Inclusion

- Launched our Equity, Equality, Diversity and Inclusion Strategy across the organisation.
- Held our first staff and volunteer health inequalities conference, enabling colleagues to share work being done on addressing sexual and reproductive health inequalities in "at risk" populations across the charity, including young people, women, LGBTQ communities, and those from Black communities. 75% of staff attended.
- Embedded Equality Impact Assessments across the charity.
- Mandatory staff training to ensure all staff are aware of principles and concepts relating to equality, equity, diversity and inclusion.
- In response to the recent publication of statistics on HIV in the UK, we produced a leaflet that informs people, especially migrants, who have recently arrived in the UK with information on accessing HIV care.
- Held focus groups for people who have recently arrived in the UK, working alongside Dr Farai Nyatsanza, GUM/HIV consultant, iCaSH Cambridgeshire and Africa Advocacy Foundation. The information gathered will inform how we can best support this group of people with their sexual health and HIV requirements.
- Worked with Purple Pen to create a co-production toolkit for staff and volunteers to support embedding the voices of those with lived experience in all that we do as an organisation.



Looking forward

There is a lot to look forward to in the coming year. Our flagship success – to get the Westminster government to fund a 47-hospital expansion of A&E opt-out HIV testing – is being rolled out in Summer 2024. Nottingham, Birmingham and Sheffield are the first to go live. This will be another breakthrough in the diagnosis of people living with HIV but don't yet know it. This route is more effective with women, people of Black ethnicity, older people, men who have sex with men but don't identify as gay or bisexual and those least likely to use sexual health services. This will change, and even save, lives. In Scotland, a three-hospital opt-out testing trial is due to end shortly and we hope to secure more funding to see this continue making a difference.

As we embrace the new financial year, it is beyond doubt that the COVID-19 'new normal' means Terrence Higgins Trust has to evolve its business model. Austerity has remained, high inflation has not just raised our costs and eroded the value of our contract income, but rendered our local government partners unable to fund delivery of sexual health services. Added to this, our generous supporters are experiencing the same cost of living pressures. Demand for our service continues to increase, while the service people need is becoming more complex.

The Executive Team, with the trustees, have agreed a new organisational strategy. This will see the organisation's advocacy, services and fundraising aligned around our HIV goals: ending new cases by 2030 and being here until the last person living with HIV needs us. Our particular focus will respond to the changing nature of the epidemic. New data shows ending new HIV cases is not just about finding the 5,150 undiagnosed people, but supporting the 14,000 diagnosed people with HIV who have become disengaged in care. We will focus on those undiagnosed, newly diagnosed, lost to care and feeling stigmatised. In the coming financial year we will align our resources around this new strategy, fundraise against it and centre our work in London, Glasgow, Brighton and Cardiff to ensure a truly UK-level footprint and impact.

We are having conversations with sexual health commissioners about the longevity of that contracted work, meeting the remaining KPIs and finding organisations that can take on this

level of risk. This needs to be a wake-up call for both commissioner and commissioned alike. Fund what you value and value who you fund. The troubles of the state sector should not be diminishing the voluntary and community sector.

The focus on HIV is already reaping rewards. We have secured funds from Fast Track Cities London and ViiV Health to focus on those disengaged in care; EJAF has given the go ahead for another funding application in this area. We are seeking other funders for this new area of work.

We are sharing the learning from Peer Support Scotland with the rest of the UK organisation and rolling out a similar model in Wales alongside a new online peer support platform. Existing funders have been joined by new ones to make this happen, and people living with HIV guide this every step of the way.

By the year end, the UK general election, a new crop of MPs and a potential change of government are imposing changes in the new period. Having secured our key sector-wide manifesto asks from all parties and an explicit promise for a new HIV Action Plan in the Conservative, Green and Labour manifestos, work to operationalise this culminated in the new Public Health Minister announcing the start of a new plan at a Terrence Higgins Trust/HIV Prevention England conference. With 'one parliament left to end new HIV cases by 2030' there is a lot a new government has to do in order to make the vision a reality. We will work with the MPs elected and the government formed to bring this about. We know our supporters are with us every step of the way.



Growing support and income

Our incredible supporters

It has been a challenging year for many, and our fundraising activity has continued to be affected by the cost-of-living crisis. However, our supporters have continued to show their commitment to our cause, and have raised an incredible amount that has made such a difference in difficult times. To all of our supporters we can only say a heartfelt thank you – together we can make change happen.

Generous individuals

Over **11,200** people have generously supported our life-changing work this year, of whom **1,567** are new supporters and over **8,033** giving a regular monthly gift. Their loyalty means we can plan the support we are able to give people with a higher level of certainty. We have delivered campaigns supporting people to live well with HIV, looking at the impact of stigma, focusing on prevention, and raising money for World AIDS Day. Our match-giving campaign The Big Give, running for a week around World AIDS Day, raised 150% more than our previous year's World AIDS Day campaign, with £6,000 from bucket collections helping us reach our **£75,000** target. We've also run successful campaigns to appeal to new donors, and launched our new DIY fundraising pack.

Leaving a gift in your will is a very effective way of ensuring a long-lasting legacy after your passing, and this year over **£2.9 million** has been kindly given to Terrence Higgins Trust.

Throughout the year, fundraising with communities and events has raised £355,000.

Many of our supporters like to get proactive in their fundraising by running, walking and other challenge events. We've also worked with many LGBT+ venues, groups and companies.

Our TCS London Marathon runners raised over **£88k** in 2023 and our Royal Parks and Cardiff Half Marathon participants raised almost **£25k**.

We worked in partnership with Tackle HIV and Gareth Thomas to take on the Three Peaks challenge. We raised **£5k**, which was match funded by ViiV and raised a total of **£10k**. Richard Angell, Christine Neubeiser, and Rhys Goode took on the hiking challenge, raising an additional **£5k**.

We fundraised for the first Classical Pride at the Barbican which raised just over **£2.5k**.

We held our first live Big Shave off event with supporters choosing to shave their head or chest raising over **£5k**.

We raised an incredible **£50k** from working with theatres and West End shows including Moulin Rouge and Cabaret.

Our charity shop Boutique reached £1,000,000 milestone

Our charity shop Boutique has raised £1 million for our life-changing work since it opened almost two decades ago. Kylie Minogue and Stephen Fry donated items to help us mark this important milestone. Terrence Higgins Trust hosted an event at the shop where our Chief Executive, Richard Angell, presented volunteers with a commemorative plaque.



“Having managed the Boutique for 19 years, I'm so proud we have reached the incredible milestone of raising £1 million. Knowing the income we raise goes directly to supporting people living with HIV and ending new cases of HIV in the UK by 2030 makes all our hard work worthwhile.”

Retail Manager, Christopher Relevitch

Our many partners and supporters

Our special Cabaret event in October 2023 to celebrate the 50-year broadcasting career of Paul Gambaccini, a supporter of Terrence Higgins Trust for decades, raised **£45,000**. The Barclays Spectrum Gala took place in October, raising **£220,000**.

Through our work with charitable trusts and corporate foundations we have partnered with inspiring funders to make long-term change happen. Particular thanks go out to the National Lottery Community Fund England, the National Lottery Community Fund Scotland, the Rhone Trustees (Singapore), The Goldsmiths Company Charity, and the JJ Fenwick Charitable Trust.

Partnering with business who share our values and goals is a key way of getting our message across. By partnering with the LGBT+ networks at Barclays, Apple, Amazon, Linklaters, and Reach, we have shown how inclusive workplaces are better for all. Our fabulous corporate supporters have raised **£41,840** for World AIDS Day 2023. We've worked with companies such as NEXT, Echo Design Group and Tatty Devine to launch exclusive merchandise lines to support the programmes we deliver.

Looking ahead

We have big plans to engage with new and existing supporters alike, from securing a **£480,000** grant for our Bridge to 2030 Garden at the RHS Chelsea Flower Show with Project Giving Back, improving our supporter journey, and hosting many community and challenge events. We will launch our new major donor product, 'The 2030 Club' which replaces our Friends Network.

We look forward to continuing to support people living with HIV through our fantastic fundraising. Our supporters are the reason we can make an impact, and we are committed to making our goal to end new cases of HIV in the UK by 2030 a reality.

How we raise money

We are committed to providing the best possible standards for all our supporters. Our fundraising activities are carried out respectfully and we are a member of the Fundraising Regulator (FR) and the Chartered Institute of Fundraising (CIOF), working within their agreed guidelines.

We are compliant with the General Data Protection Regulation (GDPR), and at all times we respect the wishes of our supporters about how they are contacted, offering them frequent opportunities to change these preferences, which are recorded on our database. We also follow the CIOF's 'Treating Donor Fairly Guidance 2016' to ensure vulnerable people are treated in a suitable way.

We respond to all complaints promptly and include clear contact details on communications so that new or existing supporters can raise any issues or make changes to their contact preferences. Any official complaints made in relation to fundraising are registered as part of our official complaints process and the complainant is allocated a Director to resolve the issue. In 2023/24 we received no complaints in relation to fundraising.

We use third party suppliers to undertake telephone fundraising and payroll giving fundraising on our behalf. All of these suppliers are subject to written agreement to ensure that they meet our high standards of engaging with supporters.



Thank you!

A huge thank you to the following supporters for your inspiring generosity:

- Amazon.com, Inc
- ATG Entertainment
- Richard Angell OBE
- Apple Computers Inc.
- The Austin & Hope Pilkington Trust
- Awards for All Wales
- Barclays Bank, PLC
- Alfonso Barroso
- Andy Bell and Stephen Moss
- Martin Bowley
- Christies International, PLC
- Mark Crawford
- The David Bowie fan club
- Echo Design Group
- The Eveson Trust
- Reinhard Fischer-Fuerwentsches
- Stephen Fry
- Paul Gambaccini and Christopher Sherwood
- Gilead Sciences Ltd.
- The Goldcrest Charitable Trust
- The Goldsmiths' Company Charity
- The Hospital Saturday Fund
- John James Fenwick Charitable Trust
- Fawn James
- François Jourdain and Verity Soper-Jourdain
- Jonathan Kemp and Tim Pryce
- Kings Cross Steelers Rugby team
- Melanie Knight and Stuart Ogilvie
- KPMG
- Liam and Terru – Tuk Tuk adventurers
- Limahl
- Linda E
- Linklaters LLP
- London Gay Men's Chorus
- The Lovelies Help
- M·A·C VIVA GLAM
- Sir Ian McKellen
- Douglas Moffitt
- National Lottery Awards for All Wales
- National Lottery Community Fund England
- National Lottery Community Fund Scotland
- Next plc
- Reach plc
- Redbus Information Ltd.
- Sir Reo Stakis Charitable Foundation
- Rhone Trustees (Singapore) Ltd
- Royal Vauxhall Tavern
- Alex Schultz
- Brian Smith
- Tesco
- ViiV Healthcare Ltd/ GlaxoSmithKline
- Steven Wardla

And as ever, to everyone who has volunteered, baked cakes, ran, walked, given online, responded to an appeal or left a legacy, thank you! You are the reason we are able to do everything we do.

Restricted Income (Over £5,000)

Trusts and Foundations

Name of Donor	Project Title	Amount received
Gannochy Trust	Peer Support Scotland	£15,000
NLCF Trenau Cymru	THT Cymru	£10,000
The Eveson Trust	THT Direct	£11,488
Goldsmiths' Worshipful Co	Prisons partnership	£30,000
Hospital Saturday Fund	Cymru volunteer co-ordinator	£10,000
Sir Reo Stakis Charitable Foundation	Peer Support Scotland	£10,000
The Dearie Family Trust	Scotland	£6,050
The Goldcrest Charitable Trust	HIV self-testing	£5,000
The National Lottery Community Fund	THT Hardship, THT Direct & Peer Support Scotland	£109,780
The Austin & Hope Pilkington Trust	Prisons partnership	£5,000

Corporates

Name of Donor	Project Title	Amount received
Estee Lauder	Living Well	£50,000
BASHH	MPs sexual health research	£10,000
Soho Estates	Chemsex	£32,100
Project Giving Back	Chelsea flower show	£399,600 (£80,000 received in 2024/2025)
Gilead	Positive Voices African outreach & Ageing with HIV	£38,792

Charity fundraising: reporting by the Trustees

The Trustees have been guided by six key principles:

Planning effectively

Our fundraising strategy was scrutinised and agreed at Terrence Higgins Trust's Finance, Audit and Risk Committee (FARC) and a subsequent Board Meeting.

Supervising our fundraisers

Authority to oversee our Income Generation team is delegated to our CEO and Director of Fundraising and Communications. Our FARC receives and scrutinises regular reports on key areas of income generation.

Protecting our charity's reputation, money and other assets

Our FARC considers and approves reputational and financial risk and agrees our overall budget framework and investment strategy.

Following the law and upholding compliance

We carry out our fundraising activities respectfully and are a member of the Fundraising Regulator and the Institute of Fundraising.

Following recognised standards

We work within the Code of Fundraising Practice and other agreed guidelines to ensure that our fundraising is open, honest and respectful.

Being open and accountable

We receive regular reports of any fundraising complaints as part of Terrence Higgins Trust's overall complaints procedure, which is accessible, open and transparent.



Financial review

The overall picture

When the board launched its new three-year strategy in April 2022, it made good its commitment to reducing reserves in keeping with the reserves policy, while ensuring that the new strategy was fully funded. However, due to external pressures including high inflation, poor market performance and underfunding of statutory contracts, the level of investment from reserves was higher than planned. Faced with projected unrestricted deficits going into 2026/27 and beyond, the Board took a decision at the end of 2023/24 that a restructure of the charity was necessary to ensure its financial security – and indeed the future of the charity itself.

In 2023/24, we sustained an operational deficit of £2.8 million compared to a budgeted deficit of £1.5 million. Of this £1.3 million variance the main contributing factor are, £0.7 million delay in an expected legacy payment, £0.5 million being the cost of redundancy payments due at the year end as a result of the restructure (total redundancy costs associated with the restructure are £0.6 million), and £0.3 million relates to restricted activities where the deficit was £0.3 million higher than budgeted.

There was an unrealised gain on investment portfolio of £0.3 million in the year. As the charity has used reserves to cover expenditure requirements this has meant we have liquidated investments and thus investment gain has reduced. There was a small adjustment (£43,000) to the pension trust liability on the SOFA, however the pension scheme remains in surplus as at the year end, and an adjustment between restricted and unrestricted reserves. This brings the overall deficit for the year to £2.6 million of which £1.7 million related to unrestricted activities.

Where our money comes from

In 2023/24, we saw a decline in statutory income as a result of a decision by the charity not to enter into service contracts which would not cover the cost of providing those services – and would therefore contribute to an ongoing financial deficit.

Our operational income for 2023/24 totals £12.0 million compared to £12.3 million in 2022/23. This decrease in 2023/24 of £0.3 million relates to a decrease in statutory income. This decrease in statutory income is in line with the refined

strategic goals and given the subsidy required to run those contracts, the reduction in this area of income will result in a strengthening of the Trust's financial sustainability.

Donations and legacies

In 2023/24, donations and legacies contributed £6.0 million to overall income. This is a large increase from £4.8 million in the previous year and reflects the large level gifts bequeathed to Terrence Higgins Trust from legacies (totalling £2.9 million). When compared to budgeted income (£6.4 million) this is a reduction against budget (£0.4 million).

Charitable activities supported by statutory income from Local Government and health organisations.

Statutory income in 2023/24 is £5.3 million and makes up 44% of our overall income. In real terms, this is a decrease of £1.4 million (21%) against 2022/2023.

A large number of statutory contracts either had no or limited annual increases built into the costs. With the majority of our contracts being multiyear and with high inflation, this meant that it was impossible for Terrence Higgins Trust to cover the true full cost of statutory services. This led to us being much more prudent when bidding for work and we took the decision in this financial year not to bid for contracts that would require a subsidy from Terrence Higgins Trust reserves or unrestricted income. This led to an overall decrease in income in the year.

During the year, we carried out a full costing exercise across the charity. This enabled us to understand better the cost drivers and therefore enabled us to pinpoint more clearly those areas of work requiring investment from reserves. This analysis made it clear that statutory contracts required £1 million of investment from reserves each year.

Other trading activities

Trading activities have reduced this year with a decline in fundraising events by £0.1 million. There is also a reduction in Sponsorship which is attributable to a prior year adjustment. This is not a key area of income for the charity, and we therefore expect this area to stay consistent over the years to come.

Other income

Income in this area is primarily from administration fees, rental income and training. Rental income did increase in the year as we decided to rent out a large part (40%) of our office in London. Going forward this will generate an additional £0.2 million of income in the future year. In general, this is not a key area of income for the charity, and we therefore do not plan for any significant growth in this area over the years to come.

How we spend our money

Total expenditure for 2023/24 was £14.4 million. This is an increase of £0.7 million from 2022/23 and is in line with our budgeted position.

In 2023/24, we spent £12.0 million directly on charitable activities (an increase of £1.0 million compared to 2022/23), representing 82% (78% in 2022/2023) of our overall expenditure.

- £4.7 million (£4.1 million in 2022/23) on Ending new cases of HIV by 2030
- £3.9 million (£3.3 million in 2022/23) on Being here until the last person living with HIV needs us
- £3.6 million (£3.6 million in 2022/23) on Making sexual reproductive health the national priority it deserves to be.

The cost of raising funds was £2.7 million, making up 18% (20% 2022/23) of overall expenditure. Following an organisational restructure completed in July 2024, the Fundraising Department's staff size has been halved, which will drive lower fundraising costs in the future.

Support costs in 2023/24 are £2.8 million (£2.7million (restated) in 2022/2023). This represents 18% of total expenditure - previous year 18%. It should be noted that the basis of allocating costs to support costs has been revised and the prior year numbers are restated. The reason for this revision is that a number of costs were incorrectly classified as support when they could directly be attributed to the delivery of charitable activities. We are focused

on keeping our support costs in line with the needs of the services and to ensure value for money. These costs, which are made up of head office costs, IT, facilities, HR, governance, monitoring and evaluation, Equality Equity Diversity and inclusion, and Finance, and have been allocated across areas on the basis of staff whole-time equivalent. This is detailed fully in note 10 to the accounts. A full review of the costing and recharging model has been undertaken to ensure an accurate and fair process for allocating costs across Terrence Higgins Trust is in place.

Our reserves

In the current economic environment, it is essential we maintain a strong reserve position and ensure the most appropriate use of funds. At Terrence Higgins Trust, our focus is on ensuring that investment in long-term operational and financial sustainability has the highest impact on the needs of service users.

Our reserve position at 31 March 2024 is £18.3 million. Overall this is a decrease of £2.5 million against the 2022/23 position of £20.8 million. Unrestricted reserves have decreased by £1.7 million, being the deficit incurred in the year.

FRS 102 dictates how pension scheme assets and liabilities are calculated and disposed in the accounts. In 2023/24, the market conditions resulted in a decline in the pension fund assets/liabilities however the pension scheme remains in surplus as defined under FRS 102 and is now valued at £0.1 million (£0.8 million surplus in 2022/23).

The reserve policy agreed by the Trustees ensures that the free level of reserves held should be between the equivalent of three months and six months of expenditure. At the end of 2018/19 the organisation committed to spending the excess free reserves over a period of five years to ensure the development of the organisation and services. Our budgeted (reforecast) expenditure for 2024/25 is £11.0 million. Within the framework of the reserve policy this indicates a required reserve level of between £2.8 million and £5.5 million. The free reserve position on the 31 March 2024 is £5.4 million (5.9 months running costs), made up of unrestricted reserves net of fixed assets £8.2 million, investment property £1.3m, purchase of the Glasgow office and other fixed assets £0.7 million. In 2022/23, the free reserve position was £6.5 million, therefore a fall of £1.1 million in the year.

Over the next three years we plan that free reserves will remain between 5 and 6 months running costs.

Going concern

The Trustees note the challenges in the economic and funding environment. The Board also acknowledge the pressure of inflation both of the cost of delivering service, but also the impact of the cost-of-living crisis on Terrence Higgins Trust staff, volunteers, donors and service users. In 2021/22 the board agreed to use reserves to meet the cost of delivering on the new strategy - this investment however was not enough to counteract the impact of soaring costs and declining income. At the start of 2024 it was clear that a more radical approach was required to ensure the financial sustainability of the charity. Early in 2024 the Board of trustees took a decision to restructure Terrence Higgins Trust in light of ongoing financial pressures where we experienced the perfect storm of continued underfunding of statutory contracts, a lower than expected level of donations (as is being experienced across the sector,) and increasing costs due to inflation.

As an organisation we have developed a new business/operating model which focusses only on HIV and with greater reliance on fundraising income as opposed to contractual income. In the short term this change of focus will cost Terrence Higgins Trust to transition. The budget for 2024/25, a year of transition, projects a deficit of £0.6 million, and we project that from 2025/26 onwards we will be operating a break even budget. The majority of service contracts will be transferred to other providers in 2024/25 on the basis that they were costing Terrence Higgins Trust money to deliver, and did not contribute to Terrence Higgins Trust's updated key goals.

The Trustees believe that Terrence Higgins Trust has adequate financial resources. Our planning process, including financial projections, has taken into consideration the current economic and funding environment and its impact on income and expenditure. The Board has agreed a three-year budget to support the refined strategy, and beyond, covering the period April 2024 to March 2027. During this time, the Board has permitted unrestricted free reserves to reduce to a minimum of 4 months expenditure, and this is within the limits of the reserves policy which states that free reserves should be between 3 and 6 months running costs. In practical terms, we project this will mean using approximately £1.3 million of free reserves during the period April 2024 to March 2027 (before taking into account investment gains). Expenditure in the period not only will support the strategy implementation, but it will also support the internal restructuring of Terrence Higgins Trust which we intend will ensure flexible and scalable support systems.

The Trustees acknowledge our pension fund obligations. The triennial valuation, concluded in 2022, showed a deficit position and the trustees of both Terrence Higgins Trust and the Pensions Trust will agree a new deficit recovery plan where we will contribute £0.2m to the scheme each year until May 2030 with an additional £0.5 million paid in 2022/2023. We expect the revised plan will eliminate the deficit by 2030. In the year 2023/24 there was a decline in the pension fund liabilities and the calculation, however. The liability, as calculated according to FRS 102 is still showing a surplus. In this year it is £0.1 million (£0.8 million surplus in 2022/23). This surplus is included as a note in these accounts but is not reflected as an asset on the Balance Sheet, as per the SORP, it does not impact on the operational finances of the charity except for the agreed payments under the deficit recovery plan. The plan was last reviewed in 2022/23 by the Trustees of the Pension Scheme and Terrence Higgins Trust and a revised deficit recovery was agreed, details of which are contained in Note 14 to the accounts. The next triennial valuation will commence in the financial year 2024/25 and the results of this exercise will inform any revision to the repayment plan with the Pensions Trust at that time.

Therefore, Terrence Higgins Trust has a reasonable expectation that it has adequate resources to continue in operational existence for the foreseeable future. The Trustees believe there are no material uncertainties that call into doubt the charity's ability to continue. The accounts have therefore been prepared on the basis that the charity is a going concern

Investments

The group has four investments areas.

Terrence Higgins Trust Charity has two investment funds, both of which are managed by Rathbone Investment Management Limited;

- A capital fund was established to accommodate a legacy received in 1994/95 as a permanent endowment. In 2023/24, the invested endowment made a realised return of £8,000 and an overall (total return) £30,000 gain on the fund. This is a +10.8% gain in value over 12 months. The value of the fund at the end of the year was £310,000.
- In 2015/16, a fund was established to manage on a discretionary basis the proceeds from the sale of our Lighthouse West London Property. In 2022/23, £2m from the sale proceeds of Gray's Inn Road was also invested in the fund. The fund fell in value by £2,200,000.

on the 1st April 2023 position, however this includes £2,600,000 which was withdrawn from the portfolio during the year. The long term investment target is a total return of CPI plus 4% per annum after expenses. From inception (30 June 2016) to 31 March 2024, the fund produced a total return of 66.9% cumulative (6.8% annualised). CPI plus 4% was 79.0% cumulative (7.8% annualised) over the same period. High inflation and weaker market conditions have caused the fund to fall behind the long term target in the short term, however we expect the fund's performance to return to target over the medium term. The value of the fund at the end of the year was £3.9 million.

The subsidiary Charity, HIV Research Trust, has two investment funds totalling £1.2 million as at 31 March 2024. This investment funds are managed by Schroder Investment Management Limited UK (£0.5m) and by CCLA - COIF Charity Funds (£0.7m).

Gains over the past two years have been low and as the charity continues to liquidate assets to fund activities, potential for investment income or gains in value are reduced. In 2024/2025 we will undertake a full investment fund review with a view to ensuring that investment returns are maximised in line with Terrence Higgins Trust's risk appetite. As an organisation we are focused on the need to manage the risk and return of our investment portfolio on a long-term basis, therefore, we expect to manage the fund through this time of instability. The diversification of our asset classes within the portfolio do guard against a certain level of risk and we are working with Rathbones and our independent investment advisors (Broadstones) to manage the risk of the portfolio, through the current situation to medium- and long-term stability. The cash position of the organisation is stable and cash flow is monitored on a regular basis through new robust processes introduced this year.

The agreed investment policy for Terrence Higgins Trust Charity is as follows:

Overview and Objectives of the investment

Terrence Higgins Trust has around £5.5 million in investments.

The organisation will ensure that:

- A minimum cash balance for daily operational needs is to be held by the charity which will be instantly accessible.
- Additional funds for short term strategic capital and revenue investment will be held in appropriate short term accounts to maximise the return and ensure cash is accessible in line with business requirements.

The investment profile will be drawn down in line with the long-term agreed business plan of the organisation.

Terrence Higgins Trust aims to maximise the financial return on the investments with an acceptable level of risk and volatility as defined below.

Roles and Responsibility

The Board of Trustees delegates the appointment and monitoring of investment managers to FARC.

Investment decisions, within the confines of this Investment Policy Statement, are delegated by the Board to the Investment Manager.

The key contacts authorised to instruct the investment manager on behalf of the Board are any two of the Director of Corporate Services and the Chief Executive and the Board Chairperson¹⁴.

Acceptable level of risk

Assets should be invested to protect against inflation in the long term, however, it is recognised that Terrence Higgins Trust intends to draw both capital and income out of the fund and as such its value will decrease over time.

Terrence Higgins Trust can tolerate some volatility in the capital value of assets as long as withdrawals can be met from total return as and when required. Any capital withdrawals should be planned to minimise the realisation of any capital losses.

Ethical restrictions

Terrence Higgins Trust assets should be investing in line with its charitable objectives. Investments should be excluded if perceived as conflicting with the charity's purpose. Specifically, Terrence Higgins Trust does not wish to invest directly in tobacco producing companies.

¹⁴ Usually this would be the chair of FARC, however by virtue of this person's employment they are not permitted to make investment decisions for the charity.

Target Asset Allocation

Main fund

Asset Class	Tactical weight %	Strategic weight %	Range %
Fixed Interest	11.6	18	0-30
UK Equities	27.7	20	50-80
Overseas equities	48.2	50	50-80
Diversifiers	11.5	10	0-20
Cash	1	2	0-20
Total	100	100	

Endowment fund

Asset Class	Tactical weight %	Strategic weight %	Range %
Fixed Interest	12.5	18	0-30
UK Equities	20.7	35	50-80
Overseas equities	53.0	35	50-80
Diversifiers	11.4	10	0-20
Cash	2.4	2	0-20
Total	100	100	

Currency

The base currency of the investment will be sterling

Long-term investment objective

Target return = Consumer Price Index (CPI) plus 4% after expenses.

Industry benchmark

Composite index benchmark, as detailed below, and Asset Risk Consultants (ARC) Steady Growth Charity Index

The composite benchmark will comprise:

Asset Class	Main Fund Weight %	Endowment Fund Weight %	Ranges %	Index
UK Equities	20.0	35.0	50-80	FTSE All-Share
Overseas Equities	50.0	35.0	50-80	FTSE All-World (ex-UK) (£)
Property	5.0	5.0	0-20	IA UK Direct Property
Alternatives	5.0	5.0	0-20	BoE Base Rate +2%
Fixed Income	18.0	18.0	0-30	FT Brit Govt All Stocks
Cash	2.0	2.0	0-20	BoE Base Rate
Total Portfolio	100.0	100.0		Composite of the above

HIV Research Trust Investment Strategy

The current policy of the trustees is to cautiously invest funds in order to generate income in excess of that achieved in the bank account and protect capital. The long term aim is to generate a return of CPI plus 4% after costs.

Risk management

The risk register for the Trust focuses on the following:

- Identification of principle risks which stop us or could support us to achieve the strategy of the organisation.
- Identification of the main causes behind the principle risks.
- Identification of our approach to risk and risk tolerance for each area. The risk tolerance is classified as either seeking, avoiding or maintaining a cautious approach to risk.
- Weighting risks based upon the severity of their impact over their likelihood.
- Risks are classified as either 'strategic', 'operational', 'financial' or 'compliance'.
- Risk scores are calculated both before and after mitigating actions to ensure that mitigations are effectively reducing overall risks.

Risk is managed through the Executive and Directors Team through the overarching Charity Risk Register. The register is reviewed at least monthly by this group. The Charity Risk Register is reviewed by the Board's Finance, Audit and Risk Committee at its quarterly meetings. The register is also provided to the full Board quarterly. The review considers:

- principle risks to which the charity is exposed, and their causes
- impact and probability associated with each risk
- existing internal controls and mitigating actions to reduce each risk to a level within the charity's Risk Appetite.

As part of the restructuring process we developed a risk register focussed on that restructure as well as updating the main existing risk register to reflect changes in the operating environment. The risk register is under continual review due to the heightened level of risk in the external environment.

Principal risks and uncertainties

Terrence Higgins Trust charity and Terrence Higgins Trust Enterprises (Top 4 risks on the risk register)

Principal Risk	Risk Management (internal controls and actions)
Diminishing external recognition of the importance of HIV and Sexual Health.	<ul style="list-style-type: none"> Proactive work with politicians, sector leaders and policy partners at a strategic and operational level. HIV Action Plan in place in England and Wales, and still being developed in Scotland.
Financial sustainability.	<ul style="list-style-type: none"> The organisational strategy is fully costed and fully funded. Short, medium and long term financial planning is structured on prudent income growth levels. Revised income generation strategy is in line with changing economic conditions, which ensures return on investment is maximised and is in line with the new strategy. Proactive management of commissioner relationships to ensure future viability of contracts. Review of operational model to ensure it is viable within the financial framework. Proactive management of Pension Fund Liability and relationship with Pension Fund Trustees.
Delivering quality services.	<ul style="list-style-type: none"> Equity, Equality, Diversity & Inclusion strategy which guides our charity's activities. Executive scrutiny of delivery to ensure quality services are being delivered in line with KPIs. Investing in staff to ensure they have the right skills and capabilities to meet the changing needs of the organisation. Supporting wellbeing of staff through an intense period of both external and internal change. Embedding a digital culture in the organisation which integrates digital delivery throughout the delivery of the new strategy.
Maintaining a robust operational framework.	<ul style="list-style-type: none"> Maintaining investment in IT systems and processes. Documented systems of internal control and accountability are maintained. Ensuring the suitability of safeguarding training, policies and procedures. Ensuring Data Protection and UK GDPR compliance throughout our work. Implementing change to ensure the board, management, staff and volunteers of the trust reflect the diversity of the communities we serve.

HIV Research Trust

The key areas of risk for this subsidiary entity are around financial security and sustainability. This is managed through:

- Close relationships with the funders and sponsors to ensure ongoing income source
- Robust systems of financial control and planning

Structure, governance and management

Terrence Higgins Trust is a charitable company limited by guarantee, incorporated on 14 December 1983 (company registration number 1778149). Terrence Higgins Trust was registered as a charity in England and Wales on 26 January 1984 (registration number 288527) and with the Office of the Scottish Charity Regulator (OSCR) in January 2009 (registration number SC039986).

The Trustees of Terrence Higgins Trust are the charity's Trustees under charity law and the Directors of the charitable company. While the organisation is registered under the name The Terrence Higgins Trust, its working name is Terrence Higgins Trust (used throughout this Report).

Terrence Higgins Trust is governed by its Articles of Association. This document sets out the charity's objectives and the framework within which Terrence Higgins Trust must operate to achieve these. The Articles of Association are subject to approval by the Charity Commission and are regularly reviewed by Trustees to ensure they remain up to date.

A full review of Terrence Higgins Trust's governing documents took place in 2016 and as a result changes were approved at the Annual General Meeting (AGM) in December 2016. This included replacing the previous Memorandum and Articles of Association with one document. The Articles of Association were amended in July 2018 to increase the maximum number of Trustees from 12 to 15.

The charity has two active 100% owned subsidiaries;

(i) Terrence Higgins Enterprises Limited, the activities of which are accounted for in Note 27. This company's principal activity is that of raising funds for the charity and its company registration number is 2242767. The company carries on trading activities for the benefit of Terrence Higgins Trust and is contracted to deliver some care contracts, the performance of which is subcontracted to Terrence Higgins Trust. The company will continue to develop merchandising and fundraising events to raise funds for Terrence Higgins Trust.

(ii) HIV Research Trust which became a wholly owned subsidiary in 2021. The HIVRT primary purpose is to promote the study and research into the causes and treatment of HIV infection, and to provide funding for this. This is achieved by building capacity in HIV in low and lower-middle income countries by supporting study into the prevention and treatment of HIV infection to further knowledge. The HIVRT currently has seven trustees.

Since the Charity Governance Code was launched on 13th July 2017, the Board has utilised the Code as a tool to support the Board to reflect upon its governance structures and consider the ways in which the charity and its Trustees currently apply the Charity Governance





Code's seven principles and recommended practice. The Board of Trustees formally adopted the Code in September 2017.

The charity already meets a number of the Code's measures. These include clear and accountable Trustee term-limits within the Charity's Articles of Association which state no Trustee can serve more than three three-year terms, an explicit statement regarding the size of the charity's Board, which shall consist of a minimum of 6 and a maximum of 15 Trustees (the Board currently consists of 12 trustees). The Board has also instigated a review and evaluation of Trustee performance which includes an external review every 3 years.

Whilst the charity already applies a considerable number of the recommended practices relating to each of the code's seven principles through an action plan, the charity and its Trustees believe that constant review of its governance arrangements is required to further improve standards and increase its overall effectiveness as an organisation. A full governance review was carried out in 2021 led by an external expert and the Terrence Higgins Trust Company Secretary which led to trustees adopting an action plan to ensure they continue to meet the highest governance principles as laid down by the Governance Code.

Until Autumn 2023, Terrence Higgins Trust had an Advisory Board which provided independent advice to the charity, and supported the Chief Executive and the Trustees. The members provided expert and objective advice to the charity, challenging and scrutinising key issues in a supportive way. Following a review of governance processes it was felt that challenge and advice could be better received from a wider group of different stakeholders and

therefore a decision was decided to close this body. We would like to express our thanks for the invaluable role this board has played and to the members who gave their time and knowledge generously over the years, many of whom continue to support the charity.

Trustees

Our Board of Trustees (Directors) is responsible for setting the overall strategy and direction of the charity, and for ensuring Terrence Higgins Trust uses its resources effectively in pursuit of its strategy.

The charity's Articles of Association provides for 15 Trustees, the majority of whom must be elected by the charity's members. Our Trustees are unpaid, are either elected or appointed, and are drawn from a variety of backgrounds to ensure a balanced, skills-based Board. Our Articles provide for a mid-term vacancy on the Board to be filled by a co-opted Trustee, who holds office until the AGM following their appointment.

Trustees are:

- elected or appointed to the Board for three years at our Annual General Meeting (AGM)
- subject to re-election (or re-appointment)
- serve for a maximum nine-year term.

All Trustees undergo a formal induction to the charity, the content of which is reviewed annually and includes a mixture of formal training and visits to observe delivery of the charity's services and meetings with senior management.

The Board currently consists of 12 Trustees.

Trustees who served during the year and up to the point of signing this report are:

Jonathan McShane (Chair) ‡

Dr Bilal Ali ∞

Adam Crampsie ~

Ian Marshall ‡ - stepped down 22nd July 2023

Gordon Mundie ~

William Roberts (Deputy Chair) ~‡ - stepped down 13th December 2023

Randeep Sidhu ∞‡ - stepped down 13th December 2023

Ben Roberts ∞

Antonia Belcher ‡

Alexander Walsh ‡ - stepped down 13th December 2023

Dr Carla Barrett ‡

Asher Craig ∞

Abayomi Olusunle ∞

Dr Claire Westrop ~ - appointed on 22nd July 2023

Melanie Knight ‡ - appointed on 22nd July 2023

Dr Thomas Waite - appointed 8th July 2024

Key

‡ FARC member

~ Quality and Governance Committee member

∞ Equity, Equality, Diversity & Inclusion Task & Finish Group member

‡ Trustee Recruitment Committee member

Biographical information on the current Trustees can be found at:

www.tht.org.uk/our-work/about-our-charity/our-governance/our-trustees

Sub-committees

Trustees meet at least four times each year as a Board and attend two full-day strategy meetings. In addition to this, they are supported through the work of four committees/task & finish groups which operate to support the board:

- FARC, which is responsible for appointing the external auditors, reviewing Terrence Higgins Trust's accounts and financial controls, and reviewing the statements and actions on risk and internal controls.

- Equity, Equality, Diversity & Inclusion Task & Finish Group, which provides assurance to the Board on THT's approach to embedding Equity, Equality, Diversity and Inclusion.

- Quality, Governance & Wellbeing Committee, which oversees service quality, organisational governance including safeguarding and staff wellbeing issues.

- Trustee Recruitment Committee, which oversees the recruitment of new Trustees including: identifying which of the applicants meet the requirements of the Trustee specification; managing the application and interview process; and making recommendations to the Board of suitable candidates.

Membership of these committees and task and finish groups is drawn from:

- Trustees
- Senior Management
- Service Users
- Lay members.

Lay members are often specialists, who possess a particular expertise relevant to the work of the committee.



Trustees' responsibilities

The Trustees are responsible for preparing the:

- Strategic Report
- Trustees' Report
- Financial Statements in accordance with applicable law and regulations.

Company law requires the Trustees to prepare Financial Statements for each financial year in accordance with United Kingdom Generally Accepted Accounting Practice (United Kingdom Accounting Standards) and applicable law.

Under company law the Trustees must not approve the Financial Statements unless they are satisfied that they give a true and fair view of the state of affairs of the charity and the group, and of the surplus or deficit of the group, for that period.

In preparing these Financial Statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently
- make judgements and accounting estimates that are reasonable and prudent
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the Financial Statements
- prepare the Financial Statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for ensuring that adequate accounting records are maintained that are sufficient to show and explain the charity's and the group's transactions and disclose with reasonable accuracy at any time the financial position of the charity and the group and enable them to ensure that the Financial Statements comply with the Companies Act 2006.

They are also responsible for safeguarding the assets of the charity and the group and ensuring their proper application in accordance with charity law, and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

So far as each of the Trustees at the time of the Report are aware, there is no relevant information of which the auditors are unaware



and they have taken all the steps they ought to have taken to make themselves aware of any relevant audit information and to establish the auditors are aware of that information.

HaysMac LLP has indicated its willingness to be reappointed as statutory auditor. On 19 November 2024 the company's auditor changed its name from Haysmacintyre LLP to HaysMac LLP.

This Annual Report of the Trustees, under the Charities Act 2011 and the Companies Act 2006, was approved by the Board of Trustees on 20 November 2024, including approving in their capacity as company directors the Strategic Report contained therein, and is signed as authorised on its behalf by:

Jonathan McShane
Chair, Board of Trustees

Executive & Director's team

The Executive & Director's Team works closely with the Board of Trustees to help turn the charity's vision and strategy into a reality. They are responsible for the day-to-day management of the organisation. The Executive & Director's Team pay is approved by the Board of Trustees. In addition, we periodically carry out external pay benchmarking using market data to assess senior staff salaries.

The Executive Team that served during the year are:

Richard Angell – From 1 March 2023
Chief Executive

Glenda Bonde – until 30 April 2024
Director of Equity, Diversity & Inclusion

Mark Brookfield
Company Secretary

Dominic Edwardes
Executive Director of Fundraising & Communications

Caroline Macleod
Director of Corporate Resources

Kate Nambiar
Medical Director

Christine Neubeiser – until 31 May 2024
Director of Income Generation

Peter Norgate – until 30 June 2024
Director of People & Corporate Services

Adam Wilkinson – until 30 April 2024
Director of Sexual & Reproductive Health Services

Biographical information on the current Director's Team can be found at:

www.tht.org.uk/our-work/about-our-charity/our-governance/our-executive

Volunteers, employees and supporters

As an organisation founded by a group of committed friends who recruited volunteers to join the cause, a strong volunteer culture developed in the organisation that continues today.

Our incredible volunteers work in many roles across lots of our departments. Their roles include but are not limited to: peer support, counselling, outreach, sharing their lived experience, fundraising and event support, answering calls on THT Direct, and on reception as well as cheering on our challenge event competitors and using their skills and learning new ones to assist with finance and other office administration.

Our volunteers are at the heart of our services. Their dedication and commitment to our service users and the impact they have on the community we serve is seen every day.

From April to March 2024 we had an average of **105 volunteers** per month, which, with an

additional 12 Trustees, contributed **e hours** to Terrence Higgins Trust projects – equivalent to **over £175,000 donated work hours** and **8 full time** working staff.

909 hours were contributed by people through service user involvement activities during the course of the year, assisting in developing services for people living with HIV and campaigns and messaging.

As always, we are so grateful to our dedicated and passionate volunteers who contribute so much to the work of the charity.

Terrence Higgins Trust also relies on the work and commitment of its 202 paid staff, which includes 76 part-time staff. We continue our commitment to equal opportunities and to good staff relations. 12% of staff have self-identified as disabled.

Terrence Higgins Trust has an Equity and Diversity for Inclusion Policy, the stated aim of which is:

“ to provide equality and diversity and fair treatment for all permanent, fixed term, part-time and full-time employees, volunteers and service users. Terrence Higgins Trust is opposed to all forms of unfair discrimination. To achieve this, Terrence Higgins Trust works within the legal obligations and in accordance with the relevant codes and practices relating to diversity and equality. ”

It is important to us that staff at Terrence Higgins Trust are representative of the beneficiaries we serve. This year 11% of staff are living with HIV.

To engage and consult staff in a structured and effective manner, we have a Staff Forum with terms of reference and elected representatives.

Representatives are able to raise issues on behalf of their colleagues in the presence of the Chief Executive. In addition to this formal structure, we have an intranet, regular communications to all staff and a Microsoft Teams platform. This platform provides a space for staff across the organisation to share work developments, best practice, and ideas.

All of our communication channels exist to encourage and empower our staff to share their news, learn from one another and celebrate achievements.

Independent Auditor's Report to the Members and Trustees of Terrence Higgins Trust

Opinion

We have audited the financial statements of Terrence Higgins Trust for the year ended 31 March 2024 which comprise the Consolidated Statement of Financial Activities, the Consolidated and Charity Balance Sheets, the Consolidated Cash Flow Statement, and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and of the parent charitable company's affairs as at 31 March 2024 and of the group's and parent charitable company's net movement in funds, including the income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of our report.

We are independent of the group in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

In auditing the financial statements, we have concluded that the trustees' use of the going concern basis of accounting in the preparation of the financial statements is appropriate.

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the group's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

Our responsibilities and the responsibilities of the trustees with respect to going concern are described in the relevant sections of this report.

Other information

The trustees are responsible for the other information. The other information comprises the information included in the Trustees' Annual Report and the Foreword. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements

or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

In our opinion, based on the work undertaken in the course of the audit:

- the information given in the Trustees' Annual Report and Foreword (which includes the strategic report and the directors' report prepared for the purposes of company law) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the directors' report included within the Trustees' Annual Report and Foreword have been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report (which incorporates the strategic report and the directors' report) and Foreword.

We have nothing to report in respect of the following matters in relation to which the Companies Act 2006 and the Charity Accounts (Scotland) Regulations (as amended) require us to report to you if, in our opinion: adequate accounting records have not been kept by the parent charitable company; or

- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of Trustees for the financial statements

As explained more fully in the trustees' responsibilities statement set out on page 50, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the group's and the parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (UK) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above, to detect material misstatements in respect of irregularities, including fraud. The extent to which our procedures are capable of detecting irregularities, including fraud is detailed below:

Based on our understanding of the charitable company and the environment in which it operates, we identified that the principal risks of non-compliance with laws and regulations related to the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act

2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006, and we considered the extent to which non-compliance might have a material effect on the financial statements. We also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and regulation 8 of the Charities Accounts (Scotland) Regulations 2006, and other factors such as compliance with legislation in relation to sales tax, payroll tax and fundraising regulations.

We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls), and determined that the principal risks were related to revenue recognition, in particular the posting of improper journals to revenue or the accounting for significant judgement areas in revenue recognition and management override of controls, including the posting of inappropriate journals. Audit procedures performed by the engagement team included:

- Inspecting correspondence with regulators and tax authorities;
- Discussions with management including consideration of known or suspected instances of non-compliance with laws and regulation and fraud;
- Evaluating management's controls designed to prevent and detect irregularities;
- Reviewing the controls and procedures of the charity relevant to the preparation of the financial statements;
- Identifying and testing journals, in particular journal entries posted with unusual account combinations, postings by unusual users or with unusual descriptions; and
- Challenging assumptions and judgements made by management in their critical accounting estimates including reviewing the appropriateness of judgements made in relation to revenue recognition.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also

greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

A further description of our responsibilities for the audit of the financial statements is located on the Financial Reporting Council's website at:

www.frc.org.uk/auditorsresponsibilities. This description forms part of our auditor's report.

USE OF OUR REPORT

This report is made solely to the charitable company's members and trustees, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006, section 44(1)(c) of the Charities and Trustee Investment (Scotland) Act 2005 and regulation 10 of the Charities Accounts (Scotland) Regulations 2006. Our audit work has been undertaken so that we might state to the charitable company's members and trustees those matters we are required to state to them in an Auditor's report and for no other purpose.

To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charitable company and the charitable company's members and trustees as a body, for our audit work, for this report, or for the opinions we have formed.

Steve Harper
Senior Statutory Auditor

For and on behalf of HaysMac LLP, Statutory Auditor

Date: 20 November 2024

10 Queen Street Place London
EC4R 1AG

On 19 November 2024 the company's auditor changed its name from Haysmacintyre LLP to HaysMac LLP.



Report and Financial statements

31 March 2024

THE TERENCE HIGGINS TRUST
CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (incorporating an income and expenditure account)
For the year ended 31 March 2024

	Note	Unrestricted £'000	2024 Restricted £'000	Total £'000	Unrestricted £'000	2023 Restricted £'000	Total £'000
Income and endowments from:							
Donations and legacies	4	5,200	838	6,038	4,282	547	4,829
Other trading activities	5	346	5	351	496	-	496
Investments	6	186	43	229	193	32	225
Charitable activities	7	5,100	246	5,346	6,276	453	6,729
Other	8	85	-	85	49	-	49
Total		10,917	1,132	12,049	11,296	1,032	12,328
Expenditure on:							
Raising funds	9	2,604	52	2,656	2,521	170	2,691
Charitable activities	10	10,230	1,955	12,185	10,237	761	10,998
Total		12,834	2,007	14,841	12,758	931	13,689
Operational gain / (loss)		(1,917)	(875)	(2,792)	(1,462)	101	(1,361)
Net gains/(losses) on investments	17	233	70	303	(432)	(156)	(588)
Net income/(expenditure)		(1,684)	(805)	(2,489)	(1,894)	(55)	(1,949)
Other recognised gains/(losses)							
Defined benefit pension schemes (actuarial) gain	14	(43)	-	(43)	186	-	186
Transfer between restricted and unrestricted		29	(29)	-	-	-	-
Adjustment for unrecognised asset	14	-	-	-	(823)	-	(823)
Net movement in funds		(1,698)	(834)	(2,532)	(2,531)	(55)	(2,586)
Reconciliation of funds:							
Total funds brought forward	21	17,926	2,909	20,835	20,457	2,964	23,421
Total funds carried forward	21	16,228	2,075	18,303	17,926	2,909	20,835

- The restricted funds column includes an endowment fund as follows: Opening balance of £288,551, net movement on the investment for the year of £21,391 and a closing balance of £309,942
- Movements in funds are disclosed in Note 21 to the financial statements.
- The defined benefit scheme remains a surplus and therefore no adjustment for the unrecognised asset is required in accordance with FRS 102.
- The notes on pages 59 to 89 form part of these financial statements.
- No separate income and expenditure statement has been prepared for the endowment fund on the basis that the difference between net income / (expenditure) as disclosed above and the net profit (loss), as defined by the Companies Act 2006, is the net gain on the investments held by endowment funds and net income of £28,327.

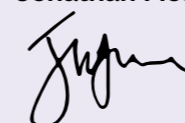
THE TERENCE HIGGINS TRUST
CONSOLIDATED AND CHARITY BALANCE SHEETS
As at 31 March 2024

	Note	Group		Charity	
		2024 £'000	2023 £'000	2024 £'000	2023 £'000
Fixed assets					
Intangible fixed assets	15	587	148	587	148
Tangible fixed assets	16	8,169	7,961	8,169	7,961
Investments	17	6,773	8,947	5,536	7,758
		15,529	17,056	14,292	15,867
Current assets					
Debtors	18	3,803	3,129	3,963	3,207
Cash held as short term deposits		631	2,207	588	2,082
Cash at bank and in hand		250	182	103	68
		4,684	5,518	4,654	5,357
Creditors: amounts due within 1 year	19	(1,910)	(1,739)	(1,899)	(1,729)
Net current assets		2,774	3,779	2,755	3,628
Total assets less current liabilities		18,303	20,835	17,047	19,495
Net assets excluding pension asset / liability		18,303	20,835	17,047	19,495
Pension asset / liability	14	-	-	-	-
Net assets including pension liability		18,303	20,835	17,047	19,495
Funds					
Permanent endowment funds	21	310	289	310	289
Restricted funds	21	1,765	2,620	494	1,370
Total		2,075	2,909	804	1,659
Unrestricted funds					
General funds	21	8,042	9,719	8,042	9,636
Designated Funds	21	8,200	8,200	8,200	8,200
Subsidiary entities' funds	21	(14)	7	-	-
Pension fund	21	-	-	-	-
Total unrestricted funds		16,228	17,926	16,242	17,836
Total funds		18,303	20,835	17,046	19,495

- The Charity's net deficit after actuarial gains for the year was £2.5m (2023: deficit of £2m)
- There is a deed of covenant in place which requires Terrence Higgins Enterprises Limited to pay its profits in full to The Terrence Higgins Trust.
- The notes on pages 59 to 89 form part of these accounts.
- Company no. 1778149

The financial statements were approved and authorised for issue by the trustees on 20 November 2024 and signed on their behalf by

Jonathan McShane



THE TERENCE HIGGINS TRUST
CONSOLIDATED CASH FLOW STATEMENT
For the year ended 31 March 2024

	Note	2024 £'000	2023 £'000
Cash flows from operating activities:			
Net cash used in operating activities	30	(3,290)	(3,443)
Cash flows from investing activities:			
Dividends, interest and rents from investments		229	1
Purchase of property, plant and equipment		(888)	(338)
Sale of investments		2,441	1,219
Net cash provided by (used in) investing activities		(1,508)	(2,561)
Change in cash and cash equivalents in the reporting period		(1,508)	(2,561)
Cash equivalents at the beginning of the reporting period		2,389	4,950
Cash and cash equivalents at the end of the reporting period	30	881	2,389

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

1. Charity Information

The charity is a private limited company (registered number 1778149), which is incorporated and domiciled in the UK and is a public benefit entity. As at the 31st March 2024, the address of the registered office is 437 & 439 Caledonian Road, London N7 9BG.

2. Accounting policies

The principle accounting policies adopted and critical areas of judgements are as follows:

a) Basis of preparation

The accounts (financial statements) have been prepared in accordance with the Charities SORP (FRS102) applicable to charities preparing their accounts in accordance with FRS102 the Financial Reporting Standard applicable in the UK and Republic of Ireland and the Companies Act 2006 and the Charities and Trustee Investment (Scotland) Act 2005 and the Charities Accounts (Scotland) Regulations 2006 and UK Generally Accepted Practice as it applies from 1 January 2019.

Terrence Higgins Trust meets the definition of a public benefit entity under FRS 102.

Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note.

The financial statements of Terrence Higgins Trust and its subsidiary entities are consolidated, on a line-by-line basis, to produce the Group financial statements. The consolidated entity (comprising the main charity, the enterprises subsidiary, and the HIV Research Trust) is referred to as 'the Group'. The charity has taken advantage of the exemptions in FRS 102 from the requirements to present a charity only Cash Flow Statement and certain disclosures about the charity's financial instruments.

b) Critical accounting judgements and key sources of estimation uncertainty

In the application of the charity's accounting policies, which are described in this note, Trustees are required to make judgements, estimates, assumptions about the carrying values of assets and liabilities that are not readily apparent from other sources. The estimates and underlying assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an on-going basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period or in the period of the revision and future periods if the revision affects the current and future periods.

The key sources of estimation uncertainty that have a significant effect on the amounts recognised in the financial statements are described in the accounting policies and are summarised below:

- Dilapidation provision – The charity has provided for its possible liability in relation to its leasehold property which has been estimated and included in accruals in note 19.
- Pension liabilities – The charity recognises its liability to its defined benefit pension scheme which involves a number of estimations as disclosed in note 14.

c) Preparation of the accounts on a going concern

The charity reported a reserve position of £18.3m for the year (2023: £20.8m) on a group basis. The trustees are of the view that reserves and cash balances of the charity are sufficient, that there are no material uncertainties, and that this the case for the foreseeable future (being a period of at least 12 months from the date of approving the accounts). On this basis the charity and group is a going concern. Please refer to the Trustees' report for more detail.

d) Functional/Presentation currency

The functional currency of Terrence Higgins Trust and its subsidiary is considered to be in pounds sterling (rounded to the nearest thousand) because that is the currency of the primary economic environment in which the charity/group operates. The consolidated financial statements are also presented in pounds sterling.

e) Income

Income is recognised in the period in which the Charity is entitled to their receipt, it is probable that they will be received and the amount receivable can be measured reliably. Income is deferred only when the charity has to fulfil conditions before becoming entitled to it or where the donor or funder has specified that the income is to be used in a future accounting period.

Legacies are included in the Statement of Financial Activities (SOFA) on the earlier of the date of receipt of finalised estate accounts, the date of payment or where there is sufficient evidence to provide the necessary certainty that the legacy will be received and the value is measurable with sufficient

f) Expenditure

Expenditure is recognised in the period in which it is incurred. Expenditure includes attributable VAT which cannot be recovered.

The SOFA headings comprise expenditure directly attributable to the activity. Where support costs (including finance, information technology, estates and human resources) cannot be directly attributed, they have been allocated to activities on a whole time equivalent basis.

Expenditure on raising funds comprise the direct costs of fundraising activities and a proportion of support costs.

HIV Research Trust makes grants available for candidates to undertake research on HIV. The conditions are provided to applicants as part of the application guidance. This cover: who can apply, what costs are covered, and what type of research is covered.

g) Gifts in kind

Other than significant donated gifts-in-kind, no amounts are included in respect of the contributions made by the many volunteers and volunteer organisations which provide various services and supplies free of charge. Where out of pocket travel and other expenses have been reimbursed to volunteers, these costs are included in the accounts.

Donated facilities and services are recognised as income if the charity would have otherwise purchased them and their value can be reliably measured. They are recognised at the value to the charity, which will often be the open market value. When the goods and services are consumed, an amount to the value of the income is recognised as expenditure. It is difficult to make a reliable estimate of the value of volunteer time and as such, this is not recognised in the accounts.

Lower value gifts that are donated for resale, usually in our Boutique, are recognised as income at the point at which they are sold.

Higher value gifts that are donated for resale, are recognised as income when they are received and held as stock on the balance sheet, where legal ownership has been transferred, until they are sold. They are recognised at fair value, being the expected sale proceeds less cost of sales.

h) Redundancy and termination costs

Redundancy and termination costs are recognised in the period in which they are incurred. Costs are considered to be incurred when staff have been formally notified of the decision to terminate their employment or accept their request for voluntary redundancy. Costs can include redundancy costs, contractual payment in lieu of notice (where applicable) and training costs, all in line with our Redundancy and Redeployment Policy and in exceptional circumstances, settlement costs.

i) Pension costs

Terrence Higgins Trust operates a defined benefit scheme for employees, which provides benefits to members on retirement and on death in service. The assets of the scheme are held and managed separately from those of the charity. Pension scheme assets are measured at fair value at each balance sheet date. Liabilities are measured on an actuarial basis. The net of these two figures is recognised as an asset or liability on the balance sheet. Any change in the asset or liability between the balance sheet dates is reflected in the Statement of Financial Activities as a recognised gain or loss for the period.

Current service costs relating to the defined benefit scheme are charged to the Statement of Financial Activities. Contributions to defined contribution schemes are charged to the Statement of Financial Activities in the year in which they are incurred.

Where the scheme is determined to be in a deficit position, this is recognised in full as a liability. Where the scheme is determined to be in a surplus position, a surplus is recognised as an asset only to the extent that this can be recovered in future years through reductions in employer contributions or

j) Tangible fixed assets

Assets costing more than £1,000, or bought together as part of an asset-buying programme, are capitalised

Tangible fixed assets are stated at their original cost (including any incidental expenses of acquisition such as surveyor's fees).

Depreciation, which reduces the value of tangible fixed assets over time, is normally calculated at the following annual rates in order to write off each asset over its estimated useful life:

Freehold buildings	2% on cost
Leasehold improvements	20% on cost (or over the life of the lease if shorter)
Fixtures and fittings	20% on cost
Computer equipment	25% on cost
Motor vehicles	25% on cost

Depreciation on the Caledonian Road, London office is charged at 1% on cost.

No depreciation is charged on freehold land.

k) Intangible fixed assets

Website development, databases and management information software costs have been capitalised within intangible assets as they can be identified with a specific project anticipated to produce future benefits. Once brought into use they will be amortised over the anticipated life of the benefits arising from the completed project as following:

Website development	25% on cost (or over the life of the project if shorter)
Management information	10% on cost
Databases and other software	25% on cost (or over the life of the project if shorter)

l) Investments

Shares are stated at market value at the balance sheet date. The SOFA includes realised gain and losses on investments sold in the year and unrealised gains and losses on the revaluation of investments.

Terrence Higgins Trust holds one investment property at a value of £1.3m (2023: £1.33m). The Trustees have approved the valuation which is based upon an independent Estate Agents market valuation.

m) Financial instruments

Terrence Higgins Trust has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at the present value of future cash flows (amortised cost). Financial assets held at amortised cost comprise cash at bank and in hand, short term cash deposits and the group's debtors excluding prepayments. Financial liabilities held at amortised cost comprise the group's short and long term creditors excluding deferred income and taxation payable. No discounting has been applied to these financial instruments on the basis that the periods over which amounts will be settled are such that any discounting would be immaterial.

Investments, including bonds and cash held as part of the investment portfolio, are held at fair value at the Balance Sheet date, with gains and losses being recognised within income and expenditure. Investments in subsidiary undertakings are held at cost less impairment.

n) Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered. Prepayments are valued at the amount prepaid net of any trade discounts due.

o) Cash at bank and in hand

Cash at bank and in hand includes cash and short term highly liquid investments with a short maturity of three months or less from the date of acquisition or opening of the deposit or similar account.

p) Liabilities

Liabilities are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Liabilities are recognised at the amount that the charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

q) Provisions

Provisions are recognised when the Charity has a present legal or constructive obligation arising as a result of a past event, it is probable that an outflow of economic benefits will be required to settle the obligation and a reliable estimate can be made. Provisions are measured at the present value of the expenditures expected to be required to settle the obligation using a rate that reflects current market assessments of the time value of money and the risks specific to the obligation. The increase in the provision due to the passage of time is recognised as an interest expense.

r) Leased assets

Rental costs relating to operating leases, where substantially all the benefits and risks of ownership remain with the lessor rather than with Terrence Higgins Trust, are charged to the Statement of Financial Activities as incurred.

s) Fund accounting

Unrestricted income funds represent those resources which may be used towards meeting any of the charitable objects of the charity at the discretion of the Trustees.

Designated funds comprise funds that are expendable, but which have been set aside by the Trustees for specific purposes.

Restricted funds are to be used for specific purposes as laid down by the donor. Expenditure which meets these criteria is charged to the fund, together with a fair allocation of support costs.

Capital funds consist of income permanently endowed by donors. Income from these funds is transferred to General Funds.

Investment income, gains and losses are allocated to the appropriate fund.

3. Critical accounting judgements and key sources of estimation uncertainty

In the application of the charity's accounting policies, which are described in Note 1, the Trustees are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

The Trustees do not consider there are any critical judgements or sources of estimation uncertainty requiring disclosure beyond the accounting policies listed above.

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

4. Donations and Legacies

As at 31st March 2024	Unrestricted £'000	Restricted £'000	2024 £'000
Corporate donations	462	99	561
Trust donations	82	573	655
National Lottery Communities Fund	-	62	62
Community fundraising	350	5	355
Individual donations	1,363	99	1,462
Legacies	2,943	-	2,943
Total donations and legacies	5,200	838	6,038
As at 31st March 2023	Unrestricted £'000	Restricted £'000	2023 £'000
Corporate donations	535	177	712
Trust donations	20	340	360
National Lottery Communities Fund	-	-	-
Community fundraising	728	1	729
Individual donations	1,274	9	1,283
Legacies	1,725	20	1,745
Total donations and legacies	4,282	547	4,829

5. Other trading activities

	Unrestricted £'000	Restricted £'000	2024 £'000	2023 £'000
Fundraising events	57	5	62	149
Shop sales	169	-	169	167
Rental income from operating leases	129	-	129	74
Room hire and catering	4	-	4	10
Online sales	2	-	2	-
Sponsorship, sales and cause related marketing	(15)	-	(15)	96
Total other trading activities	346	5	351	496

6. Investment income

	Unrestricted £'000	Restricted £'000	2024 £'000	2023 £'000
Investment income	161	43	204	217
Bank interest	25	-	25	8
Total investment income	186	43	229	225

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

7. Income from charitable activities

As at 31st March 2024	Unrestricted £'000	Restricted £'000	Total £'000
End new cases of HIV by 2030			
National health bodies	1,130	-	1,130
Health authorities	166	29	195
Local authorities and other statutory bodies	1,047	33	1,080
Subtotal	2,343	62	2,405
Be here until the last person living with HIV needs us			
Health authorities	92	-	92
Local authorities and other statutory bodies	924	91	1,015
Subtotal	1,016	91	1,107
Making sexual reproductive health the national priority it deserves to be			
National health bodies	4	-	4
Health authorities	202	28	230
Local authorities and other statutory bodies	1,535	65	1,600
Subtotal	1,741	93	1,834
Total income for charitable activities	5,100	246	5,346
As at 31st March 2023	Unrestricted £'000	Restricted £'000	Total £'000
End new cases of HIV by 2030			
National health bodies	1,011	30	1,041
Health authorities	457	23	480
Local authorities and other statutory bodies	1,084	175	1,259
Subtotal	2,552	228	2,780
Be here until the last person living with HIV needs us			
National health bodies	-	-	-
Health authorities	447	-	447
Local authorities and other statutory bodies	510	10	520
Subtotal	957	10	967
Making sexual reproductive health the national priority it deserves to be			
National health bodies	14	8	22
Health authorities	1,179	23	1,202
Local authorities and other statutory bodies	1,574	184	1,758
Subtotal	2,767	215	2,982
Total income	6,276	453	6,729

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

8. Other income

	Unrestricted £'000	Restricted £'000	2024 £'000	2023 £'000
Counselling and therapy fees	59	-	59	21
Training and conferences	26	-	26	27
Other	-	-	-	1
Total other income	85	-	85	49

9. Expenditure on raising funds

As at 31st March 2024	Cost of raising funds £'000	Fundraising & trading £'000	2024 £'000
Salaried staff	1,126	40	1,166
Non-salaried staff	45	-	45
Events	122	-	122
Advertising	119	3	122
Printing	8	1	9
Premises	10	41	51
Travel	16	-	16
IT	2	1	3
Merchandising	14	1	15
Clinical supplies	20	-	20
Volunteers	-	10	10
Other direct costs	317	1	318
Website	7	-	7
Insurance	-	1	1
Support costs (note 11)	751	-	751
Total	2,557	99	2,656

As at 31st March 2023 RESTATED

	Cost of raising funds £'000	Fundraising & trading £'000	2023 £'000
Salaried staff	1,110	60	1,170
Non-salaried staff	28	-	28
Events	284	1	285
Advertising	128	-	128
Printing	69	-	69
Premises	3	50	53
Travel	19	-	19
IT	18	5	23
Merchandising	10	-	10
Clinical supplies	3	-	3
Research	3	-	3
Subcontractors	2	-	2
Volunteers	-	8	8
Other direct costs	280	-	280
Support costs (note 11)	556	30	586
Total	2,513	154	2,667

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

10. Expenditure on charitable activities

	End new cases of HIV by 2030	Be here until the last person living with HIV needs us	Making sexual reproductive health the national priority it deserves to be	Total 2024
	£'000	£'000	£'000	£'000
Salaried staff costs	2,271	1,901	1,650	5,822
Non-salaried staff costs	31	13	-	44
Subcontractors and partners	26	104	439	569
Clinical supplies	114	52	167	333
Print and design costs	243	26	40	309
Premises costs	26	181	45	252
Advertising	408	65	139	612
Research & evaluation	82	11	5	98
Condoms & materials	59	15	30	104
IT costs	38	54	37	129
Staff travel and subsistence	15	50	26	91
Event costs	210	208	9	427
Hardship grants	-	124	3	127
Website	76	33	29	138
Volunteer costs	9	22	11	42
Insurance	6	18	11	35
Other direct costs	375	300	303	978
Inter-company costs	-	51	-	51
Support costs (note 11)	715	653	656	2,024
Total	4,704	3,881	3,600	12,185

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

	End new cases of HIV by 2030	Be here until the last person living with HIV needs us	Making sexual reproductive health the national priority it deserves to be	Total 2023
	£'000	£'000	£'000	£'000
Salaried staff costs	1,679	1,768	1,852	5,299
Non-salaried staff costs	-	12	4	16
Subcontractors and partners	216	85	197	498
Clinical supplies	153	84	328	565
Print and design costs	370	28	21	419
Premises costs	92	160	112	364
Advertising	405	137	81	623
Research & evaluation	126	16	5	147
Condoms & materials	42	13	43	98
IT costs	31	35	46	112
Staff travel and subsistence	25	28	25	78
Event costs	32	34	3	69
Hardship grants	-	49	-	49
Website	26	8	-	34
Volunteer costs	-	15	-	15
Insurance	6	7	20	33
Other direct costs	146	214	392	752
Inter-company costs	-	-	-	-
Support costs (note 11)	740	596	491	1,827
Total	4,089	3,289	3,620	10,998

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

11. Support costs

	End new cases of HIV by 2030	Be here until the last person living with HIV needs us	Making sexual reproductive health the national priority it deserves to be	Fundraising & trading	Total 2024
	£'000	£'000	£'000	£'000	£'000
Salaried staff	357	322	337	367	1,383
Non salaried staff	8	8	8	9	33
Professional and Consultancy Fees	59	68	62	70	259
IT	173	134	156	162	625
Premises costs	51	47	36	64	198
Advertising	2	2	-	-	4
Events	6	5	4	4	19
Insurance	8	30	15	23	76
Staff travel and subsistence	4	3	4	2	13
Print & design	7	6	1	2	16
Website	3	3	3	2	11
Merchandising	-	-	-	-	-
Investment charges	7	7	7	14	35
Training: Staff & conferences	9	9	9	8	35
Financial audit fees	5	5	5	11	26
Bank charges	5	5	5	10	25
Other direct costs	11	(1)	4	3	17
Total support costs	715	653	656	751	2,775
	End new cases of HIV by 20230	Be here until the last person living with HIV needs us	Making sexual reproductive health the national priority it deserves to be	Fundraising & trading	Total 2023
	£'000	£'000	£'000	£'000	£'000
Salaried staff	374	265	226	251	1,116
Non salaried staff	4	4	4	8	20
Professional and Consultancy Fees	75	71	61	68	275
IT	123	92	102	106	423
Premises costs	48	46	30	64	188
Advertising	9	6	1	1	17
Events	39	26	1	-	66
Insurance	6	26	13	20	65
Staff travel and subsistence	12	11	10	6	39
Print & design	8	6	3	3	20
Website	1	-	-	-	1
Merchandising	1	1	1	1	4
Investment charges	9	9	9	18	44
Training: Staff & conferences	8	8	8	7	30
Financial audit fees	4	4	4	8	19
Bank charges	5	5	5	10	24
Other direct costs	14	17	14	16	62
Total support costs	740	597	491	586	2,413

As at 31st March 2023 RESTATED

Support costs include the cost of the CEO functions, and the Finance, Human Resources, IT, and Estates departments. Support costs are allocated to activities based on the number of whole time equivalent employees working within each activity.

The basis of allocating costs to support costs has been revised. A number of costs were incorrectly classified as support when they could directly be attributed to the delivery of charitable activities.

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

12. Net income

This is stated after charging:		2024	2023
		£'000	£'000
Depreciation and amortisation		241	275
Rental costs relating to operating leases		199	294
Trustees' indemnity insurance		10	10
Auditors' remuneration: audit		36	34
Pension Trust audit fees	Pension trust	8	7
Actuarial fee for FRS 102 valuation	Broadstones	4	3
		<u>4</u>	<u>3</u>

None of the Trustees received any remuneration from the Charity (2023: £nil). Four trustees (2023: six) were reimbursed for travel expenses during the year. No catering costs for the committee and other meetings were incurred (2023: £nil). Travel, training, and accommodation was booked and paid for directly by the charity for Trustees with total costs amounting to £5,015 (2023: £967). The auditors' remuneration stated above are exclusive of irrecoverable VAT which is an additional cost to the charity.

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

13. Staff costs

Staff costs (paid staff, not including volunteers) were as follows:		2024	2023
		£'000	£'000
Salaries and wages		6,620	6,731
Social security costs		708	731
Pension contributions		552	401
Agency staff		121	63
Redundancy costs		491	46
		<u>8,492</u>	<u>7,972</u>
Total staff costs		<u>8,492</u>	<u>7,972</u>

Redundancy costs relate to staff in posts that have been made redundant either because of changes to funding and the services we provide have been stopped or cut back as a result, or because unfunded posts have been reduced through restructures that have been carried out to reduce the overheads of the Charity. At the 31st March 2024 £471,979 of redundancy payments were outstanding (2023: £23,408).

Staff costs are categorised as:		2024	2023
	Notes	£'000	£'000
Cost of raising funds	9	1,171	1,138
Fundraising trading	9	40	60
End new cases of HIV by 2030	10	2,302	1,297
Be here until the last person living with HIV needs us	10	1,915	1,488
Making sexual reproductive health the national priority it d	10	1,649	1,748
Support staff	11	1,415	2,241
		<u>8,492</u>	<u>7,972</u>
Total staff costs		<u>8,492</u>	<u>7,972</u>

The average head count of staff employed during the year was as follows:

	2024	2023
	No.	No.
Salaried staff	<u>210</u>	<u>215</u>

The average weekly number of whole time equivalent employees during the year was as follows:

	2024	2023
	No.	No.
Salaried staff	<u>181</u>	<u>188</u>
	<u>181</u>	<u>188</u>

The number of higher paid employees was:

	2024	2023
	No.	No.
£60,000 to £69,999	2	1
£70,000 to £79,999	1	2
£80,000 to £89,999	4	2
£100,000 to £109,999	-	1
£110,000 to £119,999	1	-

Of the higher paid employees, all received employer contributions totalling £37,964 (2023: £34,078) paid into a defined contribution pension scheme. The total benefits received by the Executive team during the year ending 31 March 2024 was £583,726 (2023: £419,392) with salaries ranging from £60,000 to £115,000 in the current year.

14. Staff pension

Terrence Higgins Trust operated a defined benefit pension scheme, Terrence Higgins Trust Pension Scheme ("the Scheme"), where benefits are based on each member's salary and pensionable service prior to leaving the scheme. The Scheme has been closed to new entrants for a number of years and existing members are no longer accruing defined benefits under the Scheme. Benefits receive statutory revaluation in deferment. Once in payment, pension increases are applied, the majority of which are linked to inflation (subject to floors and caps).

To replace the final salary scheme a Group Personal Pension Scheme was introduced. During the year ended 31st March 2024, Terrence Higgins Trust contributed £699,453 (2023: £711,345) and employees contributed £470,278 (2023: £525,659).

Funding

The Scheme's assets are held completely separately from the Trust in a separate trust fund. The fund is looked after by the Pension Trustees on behalf of the members. The assets are invested to meet the benefits promised under the Scheme by a combination of investment returns and future contributions. Under the normal course of events, actuarial valuations are undertaken every three years to confirm whether the assets are expected to be sufficient to provide the benefits. If there is a shortfall, a recovery plan is put in place under which the Charity is required to pay additional contributions over a period of time agreed with the Trustees.

The last triennial actuarial valuation was at 31 July 2021 which indicated the Scheme had a shortfall. The charity agreed to the following recovery plan:

- £16,642 per month from 1 January 2022 to 31 May 2030, increasing each subsequent 1 January by 3%.

The next full valuation is due as at 31 July 2024, which will be available in late 2025.

The accounting disclosures are based on different assumptions from the Scheme's funding assumptions. This is because:

- The funding and accounting valuations may be carried out at different dates and so are based on different market conditions;
- The funding assumptions are determined by the Trustees who must include margins for prudence. The accounting assumptions are determined by the Charity directors in accordance with accounting standards, which are different from funding regulations.

The FRS102 value placed on the pension benefit obligation has been determined by rolling forward from previous results, making adjustments to reflect benefits paid out of the Scheme, and for differences between the assumptions used at this year-end and the previous year-end.

As part of the funding discussions between the Charity and the Terrence Higgins Trust Pension Scheme, the Charity agreed to grant the Scheme Trustees security by way of a legal mortgage over two of its properties in respect of its liabilities under the scheme recovery plan.

14. Staff pension (continued)

Effective Date	At 31/03/24	At 31/03/23
Principal Actuarial Assumptions		
Discount rate	4.90%	4.75%
Pension increases (RPI up to 5%)	3.25%	3.30%
Revaluation in deferment (CPI up to 5 %)	2.45%	3.10%
Mortality		
- Base Table	S3PXA YOY	S3PXA YOY
- Allowance for future improvements	CMI 2022 1.00%	CMI 2020 1.00%
Scheme's assets	-0.62%	-0.58%

The expected return on assets is a weighted average of the assumed long-term returns for the various asset classes.

The major categories of assets as a proportion of total assets are as follows:

Equities	27%	28%
Bonds	10%	4%
Other (cash etc.)	45%	50%
LDIs	18%	17%

The actuarial gain on the Scheme's assets over the year to the review date was £994,000 (2023: Gain £186,000).

The assets do not include any investment in the Trust.

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14. Staff pension (continued)

	31/03/24 £'000	31/03/23 £'000
Balance sheet position		
Present value of defined benefit obligation	(13,835)	(13,494)
Fair value of plan assets	13,898	14,317
Excess / (Deficit)	63	823
Adjustment for unrecognised asset	(63)	(823)
Net Defined Benefit Asset / Liability	<u>-</u>	<u>-</u>
Net assets available for benefits	<u>13,898</u>	<u>14,317</u>

The surplus linked to the defined benefit scheme is not considered to be recoverable and therefore has not been recognised in the financial statements in accordance with FRS 102.

Profit and loss

Interest on net liability	43	9
	<u>43</u>	<u>9</u>

Other comprehensive income (OCI)

Actual less expected return on plan assets	(1,001)	(6,152)
Experience gains and losses on	(463)	(1,013)
Change in assumptions	470	7,351
Actuarial gain / (loss) recognised in OCI	<u>(994)</u>	<u>186</u>

Changes in fair value of plan assets:

	31/03/24 £'000	31/03/23 £'000
Opening fair value of plan assets	14,317	19,989
Employer contributions	191	688
Benefit payments	(287)	(757)
Expected return on plan assets	678	549
Actuarial losses	(1,001)	(6,152)
	<u>13,898</u>	<u>14,317</u>
Actual return on plan assets	<u>(323)</u>	<u>(5,603)</u>

Changes in present value of defined benefit obligation:

	31/03/24 £'000	31/03/23 £'000
Opening defined benefit obligation	13,494	20,049
Interest cost	635	540
Benefits paid	(287)	(757)
Actuarial gains	(7)	(6,338)
Closing defined benefit obligation	<u>13,835</u>	<u>13,494</u>

Remeasurements of the net defined benefit liability to be shown in SOFA

Actuarial gains on the liabilities	(7)	(6,338)
Return on assets (excluding interest income)	678	549
Surplus on scheme that is not recoverable	(63)	(823)
Total remeasurement of the net defined benefit liability to be shown in SOFA	<u>608</u>	<u>(6,612)</u>

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15. Intangible fixed assets - group including charity

As at 31st March 2024	Website £'000	Software & systems £'000	Total £'000
Cost			
At the start of the year	334	1,419	1,753
Additions in the year	54	413	467
At the end of the year	<u>388</u>	<u>1,832</u>	<u>2,220</u>
Amortisation			
At the start of the year	246	1,359	1,605
Charge for the year	20	8	28
At the end of the year	<u>266</u>	<u>1,367</u>	<u>1,633</u>
Net book value			
At the end of the year	<u>122</u>	<u>465</u>	<u>587</u>
At the start of the year	<u>88</u>	<u>60</u>	<u>148</u>

As at 31st March 2023

	Website £'000	Software & systems £'000	Total £'000
Cost			
At the start of the year	253	1,365	1,618
Additions in the year	81	59	140
Disposals / write-offs in the year	-	(5)	(5)
At the end of the year	<u>334</u>	<u>1,419</u>	<u>1,753</u>
Amortisation			
At the start of the year	196	1,323	1,519
Charge for the year	50	41	91
Disposals / write-offs in the year	-	(5)	(5)
At the end of the year	<u>246</u>	<u>1,359</u>	<u>1,605</u>
Net book value			
At the end of the year	<u>88</u>	<u>60</u>	<u>148</u>
At the start of the year	<u>57</u>	<u>42</u>	<u>99</u>

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16. Tangible fixed assets - group including charity

As at 31st March 2024	Leasehold property £'000	Leasehold improvements £'000	Fixtures & fittings £'000	Computer equipment £'000	Total £'000
Cost					
At the start of the year	5,820	2,178	33	529	8,560
Additions in year	307	114	-	-	421
At the end of the year	6,127	2,292	33	529	8,981
Depreciation and impairment provisions					
At the start of the year	165	129	19	286	599
Charge for the year	58	51	5	99	213
At the end of the year	223	180	24	385	812
Net book value					
At the end of the year	<u>5,904</u>	<u>2,112</u>	<u>9</u>	<u>144</u>	<u>8,169</u>
At the start of the year	<u>5,655</u>	<u>2,049</u>	<u>14</u>	<u>243</u>	<u>7,961</u>
As at 31st March 2023	Freehold property £'000	Leasehold improvements £'000	Fixtures & fittings £'000	Computer equipment £'000	Total £'000
Cost					
At the start of the year	5,820	2,117	33	404	8,374
Additions in year	-	61	-	137	198
Disposals / write-off in the year	-	-	-	(12)	(12)
At the end of the year	5,820	2,178	33	529	8,560
Depreciation and impairment provisions					
At the start of the year	107	79	14	219	419
Charge for the year	58	50	5	79	192
Disposals / write-off in the year	-	-	-	(12)	(12)
At the end of the year	165	129	19	286	599
Net book value					
At the end of the year	<u>5,655</u>	<u>2,049</u>	<u>14</u>	<u>243</u>	<u>7,961</u>
At the start of the year	<u>5,713</u>	<u>2,038</u>	<u>19</u>	<u>185</u>	<u>7,955</u>

From the beginning of March 2017 one of the Charity's freehold properties, located at 14-15 Lower Marsh London, was surplus to operational requirements. It was marketed for commercial letting and is being leased to a number of tenants. As a result, the property is classified within investments.

17. Fixed asset investments - group and charity

As at 31st March 2024	Investment Property Charity £'000	Investment Fund Charity £'000	Investment Funds HIVRT £'000	Endowment Fund Charity £'000	2024 £'000
Market value at the start of the year	1,330	6,139	1,189	289	8,947
Other additions	-	159	34	7	200
Withdrawals	-	(2,600)	(34)	(7)	(2,641)
Management fees	-	(35)	-	(1)	(36)
Unrealised gain/(loss)	(30)	263	48	22	303
Market value at the end of the year	<u>1,300</u>	<u>3,926</u>	<u>1,237</u>	<u>310</u>	<u>6,773</u>
Historic cost at the end of the year	<u>1,500</u>	<u>6,301</u>	<u>1,385</u>	<u>268</u>	<u>9,454</u>
Unrealised (loss)/gain based on historic cost	<u>(200)</u>	<u>(2,375)</u>	<u>(148)</u>	<u>42</u>	<u>(2,681)</u>

Fixed asset investments comprise an endowment fund and an unrestricted investments. The endowment fund at £0.3m and £3.9m of the unrestricted investments are managed by Rathbones and are invested as detailed in the split below. HIV Research Trust also has two investment funds; with CCLA £0.5m, and CCLA £0.7m. The investment property, at the value of £1.3m, is a decommissioned operating unit which is now being marketed commercially. For details of investments held by the Charity in subsidiary undertakings see note 26.

The major categories of assets as a proportion of total assets are as follows for THT's funds:

	2024	2023
Fixed Interest	12.6%	9.8%
UK Equities	22.3%	34.5%
Overseas Equities	52.2%	38.2%
Alternatives	11.7%	14.3%
Cash	1.2%	3.2%

As at 31st March 2023	Investment £'000	Investment Fund £'000	Investment Fund HIVRT £'000	Endowment Fund £'000	2023 £'000
Market value at the start of the year	1,300	7,660	1,307	315	10,582
Reclassification	-	-	-	-	-
Additions on acquisition of HIVRT	-	-	-	-	-
Additions	-	185	25	7	217
Withdrawals	-	(1,200)	(19)	-	(1,219)
Management fees	-	(44)	-	(1)	(45)
Unrealised gain/(loss)	30	(462)	(124)	(32)	(588)
Market value at the end of the year	<u>1,330</u>	<u>6,139</u>	<u>1,189</u>	<u>289</u>	<u>8,947</u>
Historic cost at the end of the year	<u>1,500</u>	<u>6,301</u>	<u>1,385</u>	<u>268</u>	<u>9,454</u>
Unrealised gain based on historical cost	<u>(200)</u>	<u>(162)</u>	<u>(196)</u>	<u>21</u>	<u>(537)</u>

18. Debtors

	Group		Charity	
	2024 £'000	2023 £'000	2024 £'000	2023 £'000
Grant and contract funding receivable and similar debtors	653	1,446	653	1,417
Other debtors	238	283	238	283
Social security, pension contributions and other taxes	18	63	18	63
Prepayments	96	242	96	242
Amounts due from subsidiary undertakings	-	-	109	116
Amount owed by subsidiary undertaking	-	-	50	-
Accrued income	2,798	1,095	2,799	1,086
Total debtors	<u>3,803</u>	<u>3,129</u>	<u>3,963</u>	<u>3,207</u>

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19. Creditors: amounts due within 1 year

	Group		Charity	
	2024 £'000	2023 £'000	2024 £'000	2023 £'000
Trade creditors	83	205	83	205
Social security, pension contributions and other taxes	316	321	316	321
Other creditors	135	31	135	31
Accruals	1,023	873	1,012	863
Deferred income (note 19)	353	309	353	309
Total creditors due within 1 year	1,910	1,739	1,899	1,729

20. Deferred income reconciliation

	At 1 April 2023 £'000	Released to income £'000	Deferred during the £'000	At 31 March 2024 £'000
Charitable activities	309	(189)	233	353
	<u>309</u>	<u>(189)</u>	<u>233</u>	<u>353</u>

Income is deferred when cash is received in advance of the charity being entitled to it, for example when funding is given a specific future date or for a specific activity that hasn't yet been performed.

	At 1 April 2022 £'000	Released to income £'000	Deferred during the £'000	At 31 March 2023 £'000
Charitable activities	829	(758)	238	309
	<u>829</u>	<u>(758)</u>	<u>238</u>	<u>309</u>

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21. Movements in funds

As at 31st March 2024

	Opening balance £'000	Income £'000	Expenditure £'000	Other movement in funds £'000	At the end of March 2024 £'000
Unrestricted funds:					
General fund	9,726	10,917	(12,601)	(14)	8,028
Designated Fund	8,200	-	-	-	8,200
Pension fund	-	-	(234)	234	-
Total unrestricted funds	17,926	10,917	(12,835)	220	16,228
Restricted funds					
Bedfordshire & Luton Community Foundation	11	-	(11)	-	-
Bristol University	-	2	(2)	-	-
British Association for Sexual Health and HIV	-	10	(10)	-	-
Dearie Family Charitable Trust	-	7	(7)	-	-
Estée Lauder	-	50	(50)	-	-
Gilead: African communities outreach	-	24	(8)	-	16
Gilead: Can't pass it on campaigns	13	-	(13)	-	-
Gilead: HIV & ageing	25	15	(40)	-	-
Gilead: Mpox	7	-	(7)	-	-
Gilead: Need to find	22	-	(11)	-	11
Gilead: Oral testing kits	6	-	(6)	-	-
Goldsmiths' Worshipful Co	-	30	(12)	-	18
HIV Research Trust	1,271	135	(163)	26	1,269
HIV self-testing: Restricted donations	-	6	(6)	-	-
Hospital Saturday Fund	-	10	-	-	10
John Browning Trust	62	-	(30)	-	32
Living Well International CIC	-	3	(3)	-	-
MacFarlane Trust	421	-	(163)	-	258
Marie Curie	-	1	(1)	-	-
Maximus Foundation	-	3	(3)	-	-
NHS Greater Glasgow & Clyde	-	1	(1)	-	-
NHS Scotland (Fife)	-	57	(57)	-	-
Norfolk County Council	-	20	(14)	-	6
Peer Support Scotland: Restricted donations	-	30	(30)	-	-
Pinpoint Ltd	10	-	10	-	20
Positive Action Wales	17	-	(17)	-	-
Positive Voices: Restricted donations	-	7	(7)	-	-
Postcode Innovation	82	-	(45)	-	37
Pride Cymru	2	-	(2)	-	-
Project Giving Back	-	405	(384)	-	21
Provide Community	-	27	(27)	-	-
Royal Free London NHS Foundation Trust	-	81	(78)	-	3
Scottish Government: Glasgow Community Testing	-	46	(17)	-	29
Scottish Government: HIV campaign	220	-	(220)	-	-
Scottish Government: Testing service	120	-	(98)	-	22
Sir James Reckitt	-	1	(1)	-	-
Soho Estates	-	32	(44)	-	(12)
Suffolk Community Foundation	17	-	(13)	-	4
The Joseph Strong Frazer Trust	-	2	(2)	-	-
The National Lottery Communities Fund: Beneficiary programme	258	(130)	(127)	-	1
The National Lottery Communities Fund: EEDI	-	130	(115)	-	15
The National Lottery Communities Fund: Peer support Scotland	37	10	(47)	-	-
The National Lottery Communities Fund: Hardship	-	15	(15)	-	-
The National Lottery Communities Fund: Trenau Cymru	-	10	(10)	-	-
THT Direct: Restricted donations	19	85	(99)	-	5
Restricted income funds	2,620	1,125	(2,006)	26	1,765
Permanent endowment	289	7	(1)	15	310
Total restricted funds	2,909	1,132	(2,007)	41	2,075
Total funds	20,835	12,049	(14,842)	261	18,303

21. Movements in funds

As at 31st March 2023

	Opening balance £'000	Income £'000	Expenditure £'000	Other movement in funds £'000	At the end of March 2023 £'000
Unrestricted funds:					
General fund	11,917	11,296	(12,758)	(729)	9,726
Designated Fund	8,600	-	-	(400)	8,200
Pension fund	(60)	-	-	60	-
Total unrestricted funds	20,457	11,296	(12,758)	(1,069)	17,926
Restricted funds					
Addleshaw Goddard: archive project	-	5	(5)	-	-
Bedford & Luton: LGBT wellbeing	11	-	-	-	11
East Sussex PrEP protects	6	-	(6)	-	-
Fife: LGBTI health & wellbeing	8	45	(53)	-	-
HIV Research Trust	1,392	25	(21)	(125)	1,271
Gilead: Can't pass it on campaigns	20	12	(19)	-	13
Gilead: HIV & ageing	-	25	-	-	25
Gilead: Mpox	-	25	(18)	-	7
Gilead: Need to find	-	52	(30)	-	22
Gilead: Oral testing kits	(22)	28	-	-	6
Intuit	10	6	(16)	-	-
John Browning Trust: HIV & ageing & complementary therapies	110	2	(50)	-	62
MAC Viva Glam: Positive voices phase 2	20	-	(20)	-	-
MacFarlane Trust	503	-	(82)	-	421
Merck Sharpe Dohme: Fighting HIV stigma march	-	5	(5)	-	-
NLCF: Beneficiary programme	411	-	(153)	-	258
NLCF: Peer support Scotland phase 2	117	-	(80)	-	37
Peer Support Scotland: Extra grant income	-	52	(52)	-	-
Oxford City Council	4	-	(4)	-	-
PHE: Pharmacies	1	-	(1)	-	-
PHE: Their story your choice	1	-	(1)	-	-
PHS: Mpox	-	15	(15)	-	-
Postcode Innovation	-	250	(168)	-	82
Pride Cymru	3	-	(1)	-	2
Scottish Government: Testing service	-	120	-	-	120
Scottish Government: HIV campaign	-	220	-	-	220
Suffolk Community: Women & girls	-	20	(3)	-	17
Teesside syphilis campaign	-	5	(5)	-	-
UKHSA: Monkeypox MSM	-	22	(22)	-	-
Westrock North Ayrshire women	-	1	(1)	-	-
Scotland hub support	5	5	-	-	10
Ukraine donations	3	-	(3)	-	-
Ambassadors for Good: Positive voices	-	5	(5)	-	-
Living Well: Trust grants	-	5	(5)	-	-
Hardship restricted donations	-	3	(3)	-	-
Councillor restricted donations	-	1	(1)	-	-
Restricted grant for THT Direct by Estee Lauder / MAC cosmetics	-	30	(30)	-	-
THT Direct: other restricted grants	-	21	(2)	-	19
Other restricted donations	17	-	-	-	17
Restricted legacy: Campaign Wales	30	-	(30)	-	-
Other restricted legacies	-	20	(20)	-	-
Restricted income funds	2,650	1,025	(930)	(125)	2,620
Permanent endowment	314	7	(1)	(31)	289
Total restricted funds	2,964	1,032	(931)	(156)	2,909
Total funds	23,421	12,328	(13,689)	(1,225)	20,835

21. Movement in funds (continued)

Unrestricted funds are funds that the Trustees are free to spend on any charitable activities.

Designated funds are funds covering assets that can not easily be liquidated, and costs put aside for the purchase of the new office in Glasgow. Purchase of the London office was completed in December 2019. Due to the impact of COVID-19, and subsequent changes in work practices, the building has still not been occupied fully.

The pension fund represents the value of the defined benefit scheme at 31st March 2024. This fund is held separately from the Charity and is not available for distribution on charitable activities.

Permanent endowment

A legacy was received in 1994/95 which the donor specified should be held as a permanent endowment. This was invested in Common Investment Funds but transferred in the 2016/2017 financial year to Rathbones. Any income from this endowment is included in the unrestricted funds but losses or gains on the investment, arising from changes in market value, are included in the endowment fund.

Restricted funds

Restricted funds relate to statutory grants and voluntary income received towards the charity's activities where their use is restricted by the conditions imposed by the grantors or donors. The majority of restricted income is spent in the same year that it is received. A description of our material restricted funds is given below:

Bedfordshire & Luton Community Foundation

Supporting the LGBT populations in Luton and Bedfordshire by running a community reach service engaging individuals, their families and professional involved in their care, we offered support via case management and training and LGBT and Diversity issues.

Bristol University: Restricted income

Donations to help support THT's work in Bristol.

British Association for Sexual Health and HIV

Research on attitudes to sexual health among policy makers.

Dearie Family Charitable Trust

Donations to help support THT's work in Scotland.

Estée Lauder

Funding to support our living well programme.

Gilead: African communities outreach

A programme to reduce HIV incidence, late HIV diagnosis, and address and eliminate HIV stigma and discrimination amongst heterosexual people of Black African ethnicity.

Gilead: Can't pass it on campaigns

Terrence Higgins Trust's successful campaign Can't Pass It On, explains that people on effective treatment cannot pass on the virus for MSM and minoritised communities.

Gilead: HIV and ageing

To develop a new service for older people living with HIV. Developing healthy relationships and managing co-morbidities. Increasing awareness of HIV in the social care sector.

Gilead: Mpox

Create resources to provide up-to-date information for populations at high risk from Mpox.

Gilead: Need to find

A project to find previously diagnosed people with HIV who have "dropped off the radar".

Gilead: Oral testing kits

Rolling out of the oral HIV testing programme.

Goldsmiths' Worshipful Co

A pilot project to support those affected by HIV in prisons.

HIV Research Trust

Providing support to those doing research into HIV

HIV self-testing: Restricted donations

Funding from Goldcrest and Gowling WLG to support our self-testing programme

Hospital Saturday Fund

Funding for a Wales Volunteer Coordinator to develop a grassroots South Wales volunteer network.

John Browning Trust

Support for service users who are growing older with HIV, and Funding for THT's therapies suite.

Living Well International CIC

Support for our work & skills workshops in Camden and Islington.

Macfarlane Trust

As part of a deed of gift on the closure of the Macfarlane Trust the assets of the organisation were donated to the Terrence Higgins Trust. Under the Deed of Gift the funds are for services supporting beneficiaries that the Macfarlane Trust was set up to work with.

Marie Curie

Support for THT's work in Brighton & Hove.

Maximus Foundation

Employment support for those living with HIV.

NHS Greater Glasgow & Clyde

Support to provide assistance at an event.

NHS Scotland (Fife)

Sexual health support for LGBTI people in Fife.

Norfolk County Council

Support for asylum seekers who have newly arrived in Norfolk to make informed responsible decisions, and access to high-quality SRH services, treatment, and interventions

Peer Support Scotland: Restricted donations

A service for people living with Hepatitis C and or HIV. Our expert team of Living Well Specialists support and offer advice on issues around both conditions, through one-to-one mentoring, group activities and learning workshops.

Pinpoint Ltd

Support for setting up the new Scotland hub facility.

Positive Action Wales

Funding from Positive Action Wales to support people living with HIV/Hepatitis C across Wales to self-manage their condition

Positive Voices: Restricted donations

Support from Ambassadors for Good for our Positive Voices programme. Raising awareness by those living with HIV.

Postcode Innovation

Funding to help with our counselling service, THT Direct, Positive Voices, and managing volunteers.

Pride Cymru

Support for the HIV testing programme in Wales.

Project Giving Back

Funding for Chelsea Flower Show 2024 to include project management, delivery and build of our garden.

Provide Community

A one year pilot to support homeless people to stop smoking.

Royal Free: Fast-track Cities

Supporting a programme of ambassadorship to tackle HIV stigma.

Scottish Government: Glasgow Community Testing

Support for our self-testing programme in Glasgow.

Scottish Government: HIV campaign

A campaign to raise awareness of HIV stigma in Scotland.

Scottish Government: Testing service

Funding for a service to perform HIV testing in Scotland.

Sir James Reckitt

Funding to support our self-testing programme

Soho Estates

Chemsex support for people in Soho + beyond.

Suffolk Community Foundation

Provide a service dealing with sexual violence against women and girls, and promoting healthy relationships.

The Joseph Strong Frazer Trust

Funding to support our living well programme.

The National Lottery Communities Fund: Beneficiary programme

This will deliver a three year programme that will improve the way the organisation works with our diverse beneficiaries so as to ensure that what we do and the services we provide better meet their needs and involve them more in designing, delivering and evaluating them. The programme is operating from three key geographical areas: London, Brighton and the East of England.

The National Lottery Communities Fund: EEDI

A programme that will improve the way the organisation works with our diverse beneficiaries focusing on Equality, Equity, Diversity and Inclusion

The National Lottery Communities Fund: Peer support Scotland

A service for people living with Hepatitis C and or HIV. Our expert team of Living Well Specialists support and offer advice on issues around both conditions, through one-to-one mentoring, group activities and learning workshops.

This work has also been supported by DVVA, H&SCA, the Cruden Foundation, Totara, The Leng Charitable Trust, The Gannochy Trust, and individual donations.

The National Lottery Community Fund: Hardship

Donations provided for the financial support to those suffering hardship while living with HIV.

The National Lottery Communities Fund: Trenau Cymru

Support to develop our Welsh website with Welsh translation.

THT Direct grants and donations

Support for the THT Direct service from Estee Lauder/MAC, The 29th of May 1961 Charitable Trust, The Doris Field Charitable Trust, The Gale Family Charitable Trust, The John Avins Trust, The John James Trust, The Leonard Laity Stoate Charitable Trust, The Lord Cozens-Hardy Trust, The Medlock Charity Trust, The Oakley Charitable Trust, The Paul Bassham Charitable Trust, The Pilkington Charities Fund, and The William A Cadbury Charitable Trust.

22. Analysis of group net assets between funds

As at 31st March 2024	Intangible and Tangible Fixed Assets	Investments	Net current assets	Long-term liabilities	Total funds 2024
	£'000	£'000	£'000	£'000	£'000
General Funds	8,756	5,226	2,260	-	16,242
Subsidiary company	-	-	(14)	-	(14)
Total unrestricted funds	8,756	5,226	2,246	-	16,228
Restricted funds	-	-	496	-	496
Subsidiary charity	-	1,237	32	-	1,269
Permanent endowment	-	310	-	-	310
Total restricted funds	-	1,547	528	-	2,075
Total funds	8,756	6,773	2,774	-	18,303

RESTATED

As at 31st March 2023

As at 31st March 2023	Intangible and Tangible Fixed Assets	Investments	Net current assets	Long-term liabilities	Total funds 2023
	£'000	£'000	£'000	£'000	£'000
General Funds	8,109	7,469	2,341	-	17,919
Subsidiary company	-	-	7	-	7
Total unrestricted funds	8,109	7,469	2,348	-	17,926
Restricted funds	-	-	1,370	-	1,370
Subsidiary charity	-	1,189	61	-	1,250
Permanent endowment	-	289	-	-	289
Total restricted funds	-	1,478	1,431	-	2,909
Total funds	8,109	8,947	3,779	-	20,835

23. Lease commitments

As a lessee, the charity had future minimum commitments at the year end under non-cancellable operating

	2024 £'000	2023 £'000
Not later than 1 year	104	86
Later than one year and not later than 5 years	103	193

As a lessor, the charity had future minimum rental income at the year end under non-cancellable operating

	2024 £'000	2023 £'000
Not later than 1 year	59	59
Later than one year and not later than 5 years	83	116

24. Legacies Receivable

At the year end the Charity had been notified of an estimated £1.0m (2023: £2.4m) of residual legacies and are expected to be received by the Charity over a number of accounting periods. These mainly comprise shares in properties and investments held in trusts and have not been recognised as income by the Charity as we have been unable to form a reliable estimate of the amounts the Charity is entitled to.

25. Taxation

No corporation tax has been provided in these accounts because, as a registered charity, Terrence Higgins Trust is entitled to the exemptions granted by sections 466 to 493 Corporation Tax Act 2010. Terrence Higgins Trust is a partially exempt business, which means it can only reclaim a small proportion of the Value Added Tax (VAT) it incurs on expenses. The amount of irrecoverable VAT suffered by Terrence Higgins Trust on its expenditure during the year was £336,179 (2023: £348,508).

26. Subsidiary entities

The Charity has investments costing £100 (2023: £100) in two companies (2023: 2). The shareholding comprises ordinary shares. The group also contains the charity the HIV Research Trust, which was acquired 1 August 2021. Details of the subsidiary entities at 31st March 2024, which were incorporated in England and Wales and are wholly owned or controlled directly by Terrence Higgins Trust, are set out in note 29.

Subsidiary companies	Activity
Terrence Higgins Enterprises Limited	Fundraising
Crusaid Limited	Dormant
HIV Research Trust	HIV Research

Summary accounts for Terrence Higgins Enterprises Limited are shown in note 27.

27. Terrence Higgins Enterprises Limited

	2024	2023
	£'000	£'000
Profit and loss account		
Turnover	(10)	120
Cost of sales	(4)	(29)
Administrative expenses	(7)	(6)
Loss on trading activities	<u>(21)</u>	<u>85</u>
Interest	<u>-</u>	<u>-</u>
Loss for the financial year	(21)	85
Profit donated through gift aid	<u>-</u>	<u>(85)</u>
Retained profit brought forward	<u>7</u>	<u>7</u>
Retained loss carried forward	<u>(14)</u>	<u>7</u>
Balance sheet		
Cash	43	124
Debtors	-	39
Amounts due to parent undertaking	(50)	(150)
Other creditors	<u>(7)</u>	<u>(6)</u>
Net assets	<u>(14)</u>	<u>7</u>
Net assets	<u>(14)</u>	<u>7</u>
Share Capital	-	-
Retained profits	<u>(14)</u>	<u>7</u>
Capital and Reserves	<u>(14)</u>	<u>7</u>

28. Related party transactions

There were no material related party transactions during the year other than the transactions with the subsidiary company, Terrence Higgins Enterprise Limited and donations from Trustees that are described below (2023: none)

In 2024 no management costs were transferred to Terrence Higgins Enterprise Limited (2023: £25,828).

All profits made by Terrence Higgins Enterprises Limited will be gifted to the charity, no profits were made in 2024 (2023: £85,000).

During the year Trustees have made donations to the Charity with a total value of £1,500 (2023: £1,000). No conditions were attached to these donations. There were no other related party transactions in the current or previous periods, for THT or HIVRT.

29. HIV Research Trust

On 1 August 2021, the HIV Research Trust became part of the Terrence Higgins Trust group.

The HIV Research Trust is a charity set up to use the proceeds of the biannual Glasgow HIV conference to provide funds for candidates involved in HIV Research, predominantly from developing countries, to research in world leading research establishments.

The acquisition took effect by transferring the assets, liabilities, and undertakings of the HIV Research Trust (£1,499,751) for nil consideration, with Terrence Higgins Trust assuming its liabilities and obligations.

In the period 1 April 2023 to 31 March 2024, income of £134,648 was received, and expenses of £162,922 incurred.

Statement of financial activities

	2024	2023
	£'000	£'000
Donations	100	6
Expenditure on Charitable activities	(107)	(15)
Administration expenses	<u>(56)</u>	<u>(35)</u>
Net expenditure	<u>(63)</u>	<u>(44)</u>
Investment income	35	25
Net gains (losses) on investments	49	(124)
	<u>21</u>	<u>(143)</u>
Balance sheet		
Fixed asset investments	1,238	1,189
Cash	147	114
Amounts due to parent undertaking	(110)	(50)
Creditors	<u>(5)</u>	<u>(3)</u>
Net assets	<u>1,270</u>	<u>1,250</u>
Restricted funds	1,270	1,250
Total funds	<u>1,270</u>	<u>1,250</u>

THE TERENCE HIGGINS TRUST
NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS
For the year ended 31 March 2024

30. Notes to the consolidated cash flow statement

a) Reconciliation of net expenditure to net cash flow from operating activities

	2024	2023
	£'000	£'000
Net income for the reporting period (as per the Statement of Financial Activities)	(2,489)	(1,949)
Adjustments for:		
Net (gain) / loss on investments	(303)	588
Pension adjustment	(43)	(697)
Investment returns	(229)	(217)
Investment income	-	-
Investment charges	36	45
Bank interest received		
Interest paid		
Depreciation and amortisation charge	241	283
Increase in debtors	(674)	(883)
Decrease in creditors	171	(613)
	<u> </u>	<u> </u>
Net cash used in operating activities	<u><u>(3,290)</u></u>	<u><u>(3,443)</u></u>

b) Analysis of cash and cash equivalents

	2024	2023
	£'000	£'000
Cash held at bank and in hand	250	182
Liquid resources - cash held on short term deposits	631	2,207
	<u>881</u>	<u>2,389</u>
	<u> </u>	<u> </u>
Total	<u><u>881</u></u>	<u><u>2,389</u></u>

THE TERENCE HIGGINS TRUST
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31. Terrence Higgins Trust Scotland

This is a summary of the activities of the Terrence Higgins Trust in Scotland.

As at 31st March 2024	Unrestricted £'000	Restricted £'000	2024 Total £'000
Income:			
Donations and Legacies	-	49	49
Charitable Activities			
Statutory income for charitable activities	338	104	442
Total	<u>338</u>	<u>153</u>	<u>491</u>
Expenditure on:			
Charitable expenditure			
Health Improvement	530	392	922
Long Term Condition Management	-	78	78
Total	<u>530</u>	<u>470</u>	<u>1,000</u>
Net expenditure	<u>(192)</u>	<u>(317)</u>	<u>(509)</u>
As at 31st March 2023	Unrestricted £'000	Restricted £'000	2023 Total £'000
Income:			
Donations and Legacies	-	52	52
Charitable Activities			
Statutory income for charitable activities	328	405	733
Total	<u>328</u>	<u>457</u>	<u>785</u>
Expenditure on:			
Charitable expenditure			
Health Improvement	510	73	583
Long Term Condition Management	-	131	131
Total	<u>510</u>	<u>204</u>	<u>714</u>
Net income (expenditure)	<u>(182)</u>	<u>253</u>	<u>71</u>

Glossary and terminology

AIDS:

'acquired immune deficiency syndrome' — (also known as 'late-stage' or 'advanced' HIV infection) is a term used to describe the point where your immune system is so badly damaged by HIV that it can no longer protect you from 'opportunistic infections'. HIV can lead to AIDS without early diagnosis and treatment but having HIV does not mean that you have or will develop AIDS.

BHIVA:

British HIV Association.

C-Card:

also known as 'Condom Card', a membership scheme to provide free condoms to under 25s.

Chlamydia:

a bacterial sexually transmitted infection (STI), often symptom free but left untreated can cause serious problems in men and women. Chlamydia can be easily treated with antibiotics.

GBMSM:

gay, bisexual and other men who have sex with men.

Gonorrhoea:

a bacterial STI which lives in warm, moist parts of the body, such as the throat, rectum, penis and vagina. If left untreated, gonorrhoea can cause infertility in men and women. Gonorrhoea is treated with a course of antibiotics.

HIV:

"human immunodeficiency virus" – a virus which weakens your immune system. Over time, without treatment, illnesses and infections it would normally fight off will be able to enter your body and take hold more easily. HIV medicines (known as 'antiretrovirals') keep HIV under control. If you are diagnosed early and start treatment, your immune system is less likely to get damaged. After being diagnosed with HIV most people are able to continue their lives without many alterations and live a normal lifespan.

HPE:

HIV Prevention England, the Public Health England-funded HIV prevention programme run by Terrence Higgins Trust across England.

HPV:

human papilloma virus is the name for a group of contagious viruses that affect the skin and membranes of the body, which can cause genital warts and cervical cancer.

LGBT:

lesbian, gay, bisexual and trans.

Macfarlane Community

those infected and affected by HIV as a result of the contaminated blood scandal. They were formally supported by the Macfarlane Trust.

MSM:

men who have sex with men.

MyCommunity Forum:

free place to meet other people living with HIV in the UK.

NHTW:

National HIV Testing Week, an annual campaign.

PARTNER study:

an international study which looked at 888 gay and straight couples (and 58,000 sex acts) where one partner was HIV positive and on effective treatment and one was HIV negative. Results found that where the HIV positive partner had an undetectable viral load, there were no cases of HIV transmission whether they had anal or vaginal sex without a condom.

PARTNER 2 study:

The PARTNER 2 study looked just at gay men and also reported zero transmissions after looking at almost 800 gay couples and 77,000 sex acts without condoms in serodifferent couples where the HIV positive partner is using HIV treatment.

PEP:

post-exposure prophylaxis. A course of medication that someone takes shortly after possible exposure to HIV (following assessment by a doctor), to reduce the possibility of contracting HIV.

PHE:

Public Health England, an executive agency, sponsored by the Department of Health that exists to protect and improve the nation's health and wellbeing, and reduce health inequalities.

PLWHIV:

people living with HIV.

Postal testing:

HIV testing by post, where a finger-prick blood sample is taken at home and sent to the laboratory. Results are given by text message or telephone call.

PrEP:

pre-exposure prophylaxis. A course of HIV medication taken by an HIV negative person (at risk of HIV), prior to potential HIV exposure, to prevent HIV transmission.

Self test:

HIV tests that can be taken at home (or anywhere), that give you your results back in around 15 minutes.

Self sample test:

HIV tests sent off to the lab, with a result notified at a later date.

RSE:

Relationships & Sex Education, previously referred to as SRE (sex and relationships education) or PSHE (personal, social, health and economic education).

STI:

sexually transmitted infections are infections you can pick up and pass on during sex. STIs can be caused by one of three things: bacteria, viruses or parasites. Some STIs can cause symptoms within days, others may not show any symptoms and can only be detected by sexual health screening.

THT Direct:

Terrence Higgins Trust's free helpline, providing advice and support on issues around HIV and sexual health. THT Direct can be contacted on 0808 802 1221 — it is free from landlines and mobiles. Calls will not show up on any phone bill.

Undetectable viral load:

an 'undetectable' viral load does not mean there is no HIV present — HIV is still there but in levels too low for the laboratory test to pick up. Different laboratories may have different cut off points when classifying an undetectable viral load, however most clinics in the UK classify undetectable as being below 20 copies/mL.

U=U:

'Undetectable equals untransmittable', the message to explain what was proven by the PARTNER study, and which is the backbone to the Can't Pass It On campaign.

Viral load:

the amount of HIV particles (copies) in a millilitre (mL) of blood – eg, 100 copies/mL.

World AIDS Day (WAD):

1 December — a day for people across the world to unite in support of the fight against HIV.

We would like to give special thanks to

Local Authorities

Brighton and Hove City Council
Bristol City Council
Cambridgeshire County Council & Peterborough City Council
Essex County Council
Hartlepool Borough Council
London Borough of Brent
London Borough of Enfield
London Borough of Hillingdon,
Middlesbrough Borough Council
Milton Keynes City Council
Norfolk County Council
Oxfordshire County Council
Redcar & Cleveland Borough Council
Southampton City Council
South Gloucestershire Council
Suffolk County Council
Stockton-on-Tees Borough Council

Plus

Cambridgeshire Community Services NHS Trust
London North West University Healthcare
Oxford University Hospital
Provide Community CIC
Solent NHS Trust
Unity Sexual Health Services, Bristol

Scottish Health Boards

Ayrshire and Arran
Fife
Lanarkshire
Tayside

Welsh Health Boards

Swansea Bay University

Patrons and legal administrators

Patrons include:

Lord Black of Brentwood
Simon Callow CBE
Lord Cashman CBE
Julian Clary
Martin Clunes OBE
Dame Judi Dench
Dame Tracey Emin
Lord Fowler
Sonia Friedman OBE
Stephen Fry
Paul Gambaccini
Lord Glendonbrook CBE
Charles Hart
Sir Elton John CH CBE
Lord Kirkwood of Kirkhope
Beverley Knight MBE
Canon Doctor Paul Oestreicher
Professor Anthony Pinching
Caroline Quentin
Danny Rampling
Gaby Roslin
Dr Miriam Stoppard OBE
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Time is running out

Now is the time you can help end an epidemic that has killed 38 million people.

It's possible to be living with HIV and not know it. We **urgently** need your help to find and test everyone living with HIV in the UK. People with HIV who are on treatment can't pass it on.

Donate now and together we can end new cases of HIV in the UK by 2030.

tht.org.uk



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