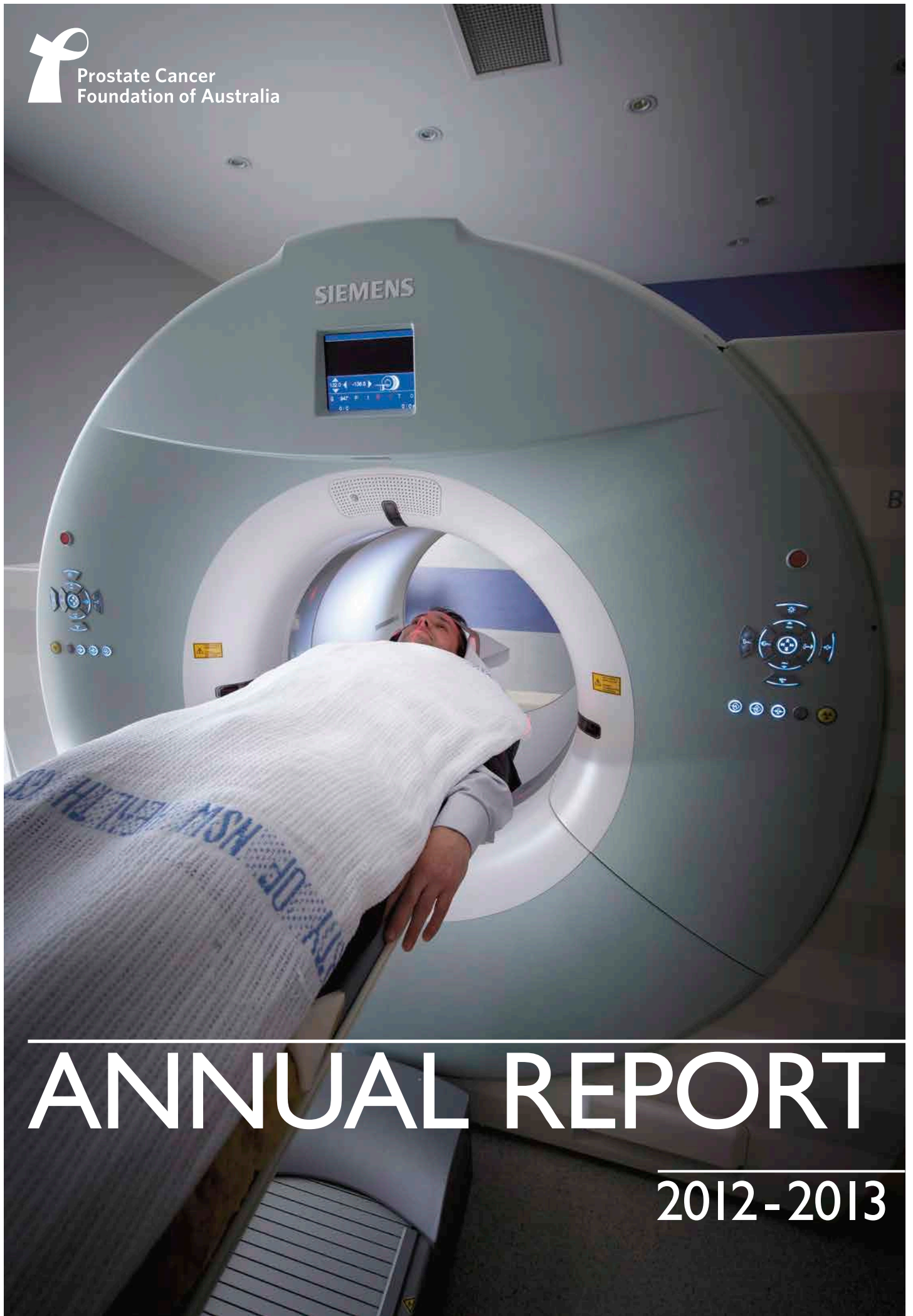




Prostate Cancer
Foundation of Australia



ANNUAL REPORT

2012-2013

COVER PHOTO:

CT scans and MRI can show in detail the progression of prostate cancer, and have contributed greatly to advances in prostate cancer research.

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EXECUTIVE
SUMMARY

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OUR VISION, MISSION & VALUES

Prostate Cancer Foundation of Australia (PCFA) is a broad-based community organisation and the peak national body for prostate cancer in Australia. We are dedicated to reducing the impact of prostate cancer on Australian men, their partners, families and the wider community.

We do this by:

- *Promoting and funding world leading, innovative research into prostate cancer*
- *Implementing awareness campaigns and education programs for the Australian Community, health professionals and Government*
- *Supporting men and their families affected by prostate cancer through evidence-based information and resources, support groups and Prostate Cancer Specialist Nurses*

PCFA receives Government funding for specific projects and relies on the generosity of individuals, the community and partnerships, such as those with the Movember Foundation and Commonwealth Bank, to carry out our essential work.

PCFA's five values are:

- *Integrity*
- *Optimism*
- *Compassion*
- *Respect*
- *Commitment*

Accountability

PCFA operates under the charitable fundraising legislation, as prescribed by each individual State in Australia and associated regulations, including Corporations Law. PCFA has been granted endorsement as a tax-deductible gift recipient under Subdivision 30-BA of the *Income Tax Act 1997* by the Australian Commissioner of taxation.

HIGHLIGHTS



\$7M FUNDING FROM FEDERAL GOVERNMENT



SUPPORTING 13 ADDITIONAL PROSTATE CANCER SPECIALIST NURSES, INCLUDING NURSES IN COMMUNITY SETTINGS

GROWTH IN THE SUPPORT GROUP NETWORK

150 SUPPORT GROUPS LOCATED IN EVERY STATE AND TERRITORY



ESTABLISHMENT OF

TWO MOVEMBER REVOLUTIONARY TEAM AWARDS

THROUGH GENEROUS FUNDING FROM THE MOVEMBER FOUNDATION

OVER 200 DELEGATES ATTENDED THE FIRST NATIONAL SUPPORT GROUP LEADER TRAINING CONFERENCE

ABIRATERONE (ZYTIGA) LISTED ON PHARMACEUTICAL BENEFITS SCHEME FROM 1 AUGUST



LAUNCH OF PCFA'S NEW 5 YEAR RESEARCH STRATEGY



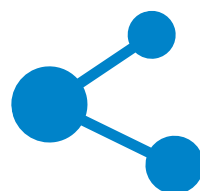
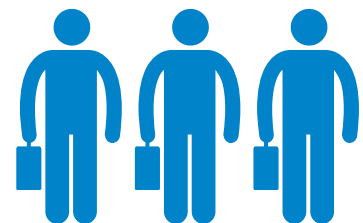
SUPPORT GROUPS ESTABLISHED IN

ADELAIDE
BRISBANE
MELBOURNE
PERTH
SYDNEY

FOR GAY & BISEXUAL MEN

5 YEARS OF THE PCFA RESEARCH PROGRAM – OVER \$35M AND 136 RESEARCH PROJECTS IN PROSTATE CANCER FUNDED

AMBASSADOR PROGRAM RELAUNCHED



\$4.2 MILLION ALLOCATED TO 20 NEW RESEARCH PROJECTS

CHAIRMAN'S REPORT



It is a tremendous privilege to be the national chairman of Prostate Cancer Foundation of Australia at a time of such change and innovation.

Since I was diagnosed with prostate cancer in 1996, awareness of prostate cancer and support for patients have improved beyond recognition. Researchers are now making real advances that are seeing improved survival rates and better long term outcomes. More men are aware of the need to have a conversation with their doctor about testing. And a network of support groups and specialised health professionals around the country is helping more and more men to navigate their cancer journey.

As the peak body for prostate cancer in Australia, PCFA is ensuring that these gains are maintained into the future. We are successfully advocating at Federal and State level to increase funding and support for men with prostate cancer. We are channelling research funding and obtaining the evidence we needed to make positive changes that will impact the lives of men and their families. We are working at community level to provide support for men, their partners and families and raise awareness of prostate cancer around the country.

But we are more than a peak body. We are also a broad-based community organisation served by a vast team of people around Australia who contribute to our support, awareness raising and research activities. I thank each and every one of them, no matter how large or small their role, for the valuable contribution they have made in the last year. It has been a wonderful team effort.

The 2012-13 financial year has been challenging for the not-for-profit sector in general. I am very pleased to report that we have obtained a

“As well as being the peak body for prostate cancer in Australia, we are a broad-based community organisation. Our roots are firmly within the community we serve – no matter what their role, a vast team around Australia are making a valuable contribution to our work.”

good set of financials and are well set to embark on the exciting projects ahead. This is in no small part due to the healthy state of our governance structures and the individual and collective efforts of our dedicated national directors.

I would like to sincerely thank Associate Professor Philip Stricker, Desmond Grogan and David Gregory, who departed the Board this year, and extend a warm welcome to Distinguished Professor Judith Clements, who joined the Board in August and Peter Gebert who joined the board in October.

I would also like to acknowledge the invaluable contribution of our state/territory boards, whose local knowledge and influence mean PCFA's national strength can truly be translated into real outcomes for people at a local community level.

One of the most significant contributions PCFA is making is to bring experts together from around the country to agree on a set of evidence-based national guidelines around PSA testing. Men continue to be faced with conflicting information, and we have worked hard to bring together all stakeholders in a world-first collaboration to bring clarity and consistency to the message we are giving them. When the guidelines are published late next year, clinicians will for the first time be able to give a consistent message and men will have clear facts on which to base their decisions.

A significant part of our work is raising community awareness about prostate cancer. Our ambassadors take our message to communities around the country, both raising our profile and imparting important information about early detection and prevention, treatment options and caring for someone with prostate cancer. This year, the ambassador program has

been overhauled, with new material and training given to presenters and 60 new ambassadors employed.

PCFA has the broadest membership base of any member of the Union for International Cancer Control (UICC), and this year we have been working hard to nurture partnerships and collaborations. We have had a strong representation at national conferences, enabling us to forge important links with our medical professional colleagues, researchers and others who work on the front line of prostate cancer care. We are also continuing to develop relations with like organisations internationally, including The Prostate Net and UsToo in the United States, and Prostate Cancer Foundation of New Zealand.

We are expanding our support group network and aim to grow the number from 150 to 200 by June, 2014. We have developed new resources for support group leaders and held a very successful training conference in Melbourne in May. We are also establishing Australia's first prostate cancer support groups for gay and bisexual men, which will provide information and support targeted at the unique needs of this demographic. Groups in Brisbane, Sydney, Melbourne, Adelaide and Perth are in various stages of establishment with Darwin and Hobart in the pipeline.

This year we awarded three prestigious Max Gardner Awards to acknowledge the work of support group network leaders in spreading the awareness message, promoting research and supporting men and their families affected by prostate cancer. Warm congratulations to Terry Wheeler, former Chairman NSW/ACT Chapter Council, David Gregory, former Chairman of the National Support Group Committee and Les Payne of Townsville Prostate Cancer Support Group.

It would be remiss of me not to mention the professionalism that Associate Professor Anthony Lowe brings to the CEO role. His impact on our evidence-based strategies, new resources, media profile and government relations in particular have been very significant. Likewise, the support I have received from our Deputy Chairman Jim Hughes AM has been second to none. His tireless efforts have been truly outstanding in every respect, and are very much appreciated.

None of our work would be possible without the incredible generosity of our sponsors and supporters. I thank you all for your help during this last year and I look forward to working together to continue to provide the best outcomes possible for men with prostate cancer, together with their partners and families.

It has been a great team effort and, with such a highly committed and dedicated group of people across Australia, augurs well for another very successful year.



David Sandoe OAM
National Chairman



“I am pleased to report that 2012-13 was another year of positive development in all aspects of PCFA’s work.”

Research

Prostate cancer research in Australia is set to reach new heights with PCFA’s new research program strategy which was launched on 7 July at our Annual Research Update in Melbourne.

Thanks to the generosity of the Movember Foundation, over the past five years PCFA has invested over \$35 million into prostate cancer research projects right across the country. These projects cover the full spectrum from basic science through to survivorship issues such as psychological interventions and exercise programs.

The key aim of our new strategy is to build on the successes of the past and harness the strengths of new researchers. In developing our new five year plan, we have taken into account the feedback and views of scientists, clinical specialists, support group members and ambassador speakers, men’s health organisations and other interested parties.

The new plan will deliver a clear map of future priorities and focuses on the following keys areas:

- Growing and strengthening the funding base for PCFA’s established research program
- Increasing national and international collaboration between prostate cancer research teams
- Diversifying our research program by supporting innovative projects and accelerating current research into clinical trials
- Supporting and promoting sustainability for the Australian prostate cancer research workforce.

As part of this new strategy, we were delighted to announce two multi-million dollar Movember Revolutionary Team Awards in partnership with The Movember Foundation. These awards of \$5.25 million each over three years will fund two collaborative research teams that have the scientific and clinical expertise to have a near-term, revolutionary and transformative impact on the clinical management of prostate cancer. The first team will focus on advanced prostate cancer and the second on localised disease. This significant initiative is part of Movember's global research strategy to build powerful, collaborative teams that accelerate improved clinical tests and treatments for prostate cancer.

Awareness

In August 2013 the results of PCFA's 11th annual community attitudes survey were published in a report entitled *Prostate Cancer: The Next Generation*. The research was conducted in March and April 2013. Previously, our community attitudes survey focused on men aged 40 to 74, largely because less than 3% of prostate cancer diagnoses occur in men younger than 50. This year we focused on the next generation – men aged 18 to 50.

We found that younger men clearly see prostate cancer as an important male health issue alongside obesity and heart disease. They also clearly believe that community awareness of prostate cancer is increasing, with 56% of participants saying it is "rising a lot" or "rising a little", although many are unable to identify the factors which have led to this view.

However, the increase in community awareness has not led to a corresponding increase in personal awareness. The level of self-reported

knowledge of prostate cancer is significantly lower than in the group of men aged 40 to 74 who participated in PCFA's 2012 Community Attitudes Survey. Forty-one per cent (41%) of participants said they know "a lot" or "a little" about prostate cancer compared to 63% of men aged 40 to 74 in the 2012 survey. Furthermore, only 12% of participants say they feel more informed about prostate cancer over the last 12 months.

Clearly, more work must be done to educate men under age 50 about prostate cancer. They may not yet be at serious risk of developing the disease, but it is important that men develop a level of awareness and understanding before they reach their mid-forties.

This survey also marked the first time we have asked participants about their sexual orientation. We were surprised that more than 13% of respondents identified as being gay or bisexual, or did not identify as being heterosexual. The absence of information about sexual orientation in much of prostate cancer research means that the experiences of gay and bisexual men with prostate cancer are poorly understood. It is therefore important, and exciting, that we were able to provide a meaningful insight into the experiences of this group of men for whom prostate cancer is a significant health issue.

Gay and bisexual men who participated in the survey reported that they experience more significant health issues than the heterosexually identified participants. Consistent with existing research findings, the gay and bisexual participants also reported a higher incidence of depression and anxiety. This is of concern given these mental health issues are likely to be experienced by men with prostate cancer in general.

In terms of support, the support network utilised by gay and bisexual participants is different to that of heterosexual men, for they are more likely to draw support from their friends. This highlights the importance of non-family members as significant members of gay and bisexual men's support network, and challenges the notion that a family member or partner is the person's main support.

Support

With funding from the Federal Government through Cancer Australia, PCFA is in the final stages of developing a new suite of resources, including resources for men with advanced prostate cancer, younger men, gay and bisexual men, and partners and carers. We are also translating key resources into five languages – Arabic, Chinese, Greek, Italian and Vietnamese – and developing a resource for Aboriginal and Torres Strait Islander men. These resources are being developed through the *Supporting men with prostate cancer through evidence-based resources and support project*, a Cancer Australia initiative funded by the Australian Government.

In September 2013 we launched the first of these new resources, the revised Localised Prostate Cancer Pack, which was developed with generous funding from Gandel Philanthropy. We are grateful to the National Support Group Committee and our colleague health professionals for their expert advice and input in the development of the pack. It includes the most up to date information on the treatment and management of localised prostate cancer. We are also very pleased and proud that all the new resources feature photography of the PCFA community – support group members, ambassadors, prostate

cancer specialist nurses, PCFA-funded researchers, clinical specialists and other health professionals we work closely with. Thank you to everyone who generously agreed to be part of the photo shoot.

The revised Localised Prostate Cancer Pack is now available on the PCFA website (www.pcfa.org.au) and also in USB format. Copies of the packs and USBs can be obtained by calling the National Office on 1800 22 00 99 or by using the order form on the PCFA website. The next set of the resources, the Advanced Prostate Cancer Pack, will be available shortly.

Following the announcement that cancer funding was a priority for the 2013-2014 Federal Budget, we were delighted that on 14 July then Federal Minister for Health Tanya Plibersek announced that \$7 million would be allocated to the Prostate Cancer Specialist Nursing Program. The additional funding will be sufficient to place an additional 13 nurses in locations around the country with an emphasis on regional Australia. This will make a total of 25 nurses across Australia.

With the generous support of The Movember Foundation, PCFA launched the specialist service in May 2012 to address the needs of people living in metropolitan and regional Australia who have been

affected by prostate cancer. The Movember Foundation generously contributed \$3.6 million to secure the program and recruit its first nurses. The program has currently placed 12 nurses in major metropolitan and regional hospitals in Queensland, New South Wales, ACT, Victoria, South Australia, Tasmania, Western Australia and the Northern Territory.

Thank you to our supporters

PCFA's work would not be possible without our many wonderfully generous supporters and volunteers who contribute their time and money to the cause. In particular, I would like to acknowledge the very generous support of our major benefactor, The Movember Foundation.

I would also like to thank Commonwealth Bank for their support as major sponsor of our September fundraising and awareness campaign, The Big Aussie Barbie. Commonwealth Bank staff at branches around Australia generously contributed their time to raise awareness of prostate cancer and funds for PCFA. Commonwealth Bank is PCFA's longest standing partner and it is a partnership of which PCFA is very proud.

PCFA also received very generous support from Pirtek through the Pirtek Fishing Challenge and other

fundraising initiatives. This year was the biggest ever, with 7,500 anglers from all over Australia - mums, dads, kids and grandparents - chasing species from golden perch to barramundi in a one-day fishing challenge unlike any other competition.

I would like to extend my sincere gratitude to PCFA's National Chairman, David Sandoe OAM and National Deputy Chairman, Jim Hughes AM for the time, effort and expertise they contribute in continuing to strengthen and develop PCFA. Their tireless commitment has helped to drive significant achievements and momentum for the organisation.

Finally, I would like to give my heartfelt thanks to the thousands of support group members and ambassador speakers around Australia who generously contribute their time supporting men, their partners and their families affected by prostate cancer and raising awareness of the disease. Together we can be justifiably proud of PCFA's work in research, awareness and support.



Associate Professor Anthony Lowe
Chief Executive Officer



National office PCFA team

PRO
GRA
MMS

Research Program 2012-2013

As one of Australia's leading sources of prostate cancer research funding, PCFA aims to support research that will contribute significantly to the global fight against prostate cancer.

We support the transition of young researchers into independent prostate cancer investigators of the future, to encourage scientists of any discipline to apply their ideas to prostate cancer, to foster collaboration amongst Australian prostate cancer researchers and to increase innovation in prostate cancer research.

In the 2012 funding round, PCFA received a total of 84 applications. These ranged from new concepts

for biomarker discoveries, new therapies, small clinical interventions and survivorship. Almost one third of applications received focused on survivorship research, 18 were submitted by early career researchers in the Young Investigator category, and 52 were New Concepts.

PCFA's structured Research Program allocated \$3.7 million to 18 research projects across Australia, representing a success rate of 21%. This would

not have been possible without the generosity of Movember.

2012 also marked the second year of PCFA's partnership with the Cure Cancer Australia Foundation (CCAF). Two of the four successful Young Investigators in this funding round were supported by CCAF in their first year of the award.



PCFA's Research Advisory Committee recommended funding 18 out of the 84 applications received in 2012

Evaluation

PCFA has funded research since 2004, but in 2007 its structured, formalised Research Program was established. In total, this program has allocated approximately \$5 million annually to fund 136 research projects into prostate cancer, making it one of the leading funding sources of prostate cancer research in Australia. Of these, 132 were funded or co-funded by Movember.



At the program's fifth anniversary, PCFA's Board of Directors and Research Advisory Committee brought together experts in prostate cancer research, consumers and other stakeholders to determine the impact of this major investment and to review its funding strategy and consider how best PCFA can respond to changing research priorities.

The evaluation confirmed that PCFA research funding has had a major impact in the community. It has supported rigorous research proposals that will provide direct, tangible benefits to men with prostate cancer as quickly as possible, and enabled the purchase of equipment necessary to conduct prostate cancer research.

During the course of the Research Program, 170 peer reviewed articles have been published, mostly in major impact journals, with new research findings presented in more than 200 national and international forums. Four patents have been lodged in the last three years with the help of PCFA funding and investigational products supported by two of these patents have entered clinical trials.

A central aim of the Research Program has been to encourage young investigators to undertake research into prostate cancer, support investigators on their journey to becoming independent researchers, and stimulate senior scientists to bring innovative proposals to PCFA.

More than 90% of principal investigators funded during 2007-11 have been promoted and 80% of young investigators who have completed funding are now independent scientists.

The program has provided a logical, consistent and transparent framework and schedule for the submission of grant applications, review and selection of applications for funding. Most of the research funded has been catalytic, providing seed funding to increase capacity and lead to further funding opportunities.

Research Strategy

THE GOALS OF THE NEW RESEARCH STRATEGY ARE TO:



IMPROVE DIAGNOSIS, STAGING, CHARACTERISATION AND TREATMENT OF PROSTATE CANCER



SUPPORT RESEARCH WHICH EMPHASISES COLLABORATION AND TRANSLATION OF RESEARCH RESULTS



CONTINUE TO INCREASE THE POOL OF INDEPENDENT PROSTATE CANCER SCIENTISTS



INCREASE INNOVATION

PCFA's evaluation of its Research Program has led to the development of a new five-year Research Strategy. This new strategy reflects changing research needs and prioritises research involving better collaboration and higher rates of translation to accelerate the pace of discovery and improve diagnosis, treatment and management of prostate cancer.

Our new Research Strategy provides a clear, long term funding strategy. Its central mission is to fund discoveries which will improve the length and quality of life of men with prostate cancer, especially prostate cancer which cannot be cured by surgery or radiation therapy.

PCFA's funding priorities are projects which will provide quick improvements to patients' quality of life; develop non-invasive tests to detect prostate cancer and determine whether a cancer is curable; discover new biomarkers to predict the future course of prostate cancer and its likely response to treatment; and to discover new molecular targets for chemotherapy of metastatic prostate cancer.

To reach the Research Program's mission, goals and objectives, research funding will now be offered under the following categories:

Team Awards: Total funding of \$5 million over three years to foster collaboration and translation. The Team Award will support a competitive, multi-state, multidisciplinary translational research program.

Clinical Trials Awards: Up to \$200,000 per year over three years for investigator-driven small to medium sized clinical trials focused on new molecular targets for chemotherapy, new non-invasive tests or new biomarkers.

Young Investigator Awards: Salary support (up to \$150,000 per year for four years) for the brightest young basic science and clinical science researchers.

Enabling Grants: Grants to assist Australian researchers to continue high quality research.

Think Tanks: Financial support to enable prostate cancer researchers, health professionals, policy makers and consumers to come together to generate new ideas and directions for prostate cancer research.



THE RESEARCHER

PROFESSOR GAIL RISBRIDGER

Prostate Cancer Research
Program
Monash University

By funding research into bright ideas, PCFA aims to help researchers make the discoveries that will one day change the lives of men with prostate cancer.

For researcher Gail Risbridger, PCFA funding led to world-first work that sheds new light on the roles of different cells within prostate cancer tumours – a discovery that will one day lead to better diagnosis and prognosis for patients.

The composition of prostate tumours is highly complex. Not only are prostate cancers different from man to man, but within each tumour there are several different points from which the disease develops (known as foci). To complicate matters further, there are many different types of cell within each foci, some of which drive its growth and resistance to treatment.

Understanding how this all works is central to categorising tumours so that doctors can predict how they will grow and what treatment will work. Gail and her team have developed a way of taking tumour specimens from men with localised prostate cancer, keeping them alive in mice so they can study them as the disease progresses, and then watching what happens during androgen deprivation therapy (hormone therapy).



They have found that a type of cell which is resistant to hormone therapy is present in tumours long before castrate resistance develops. The presence of these cells could signify that a man will eventually go on to develop advanced prostate cancer, so targeting them early may prevent him from ever developing castrate resistant disease.

By developing tests to measure these cells and how they multiply, it will one day be possible to interpret biopsies much more accurately and predict how each

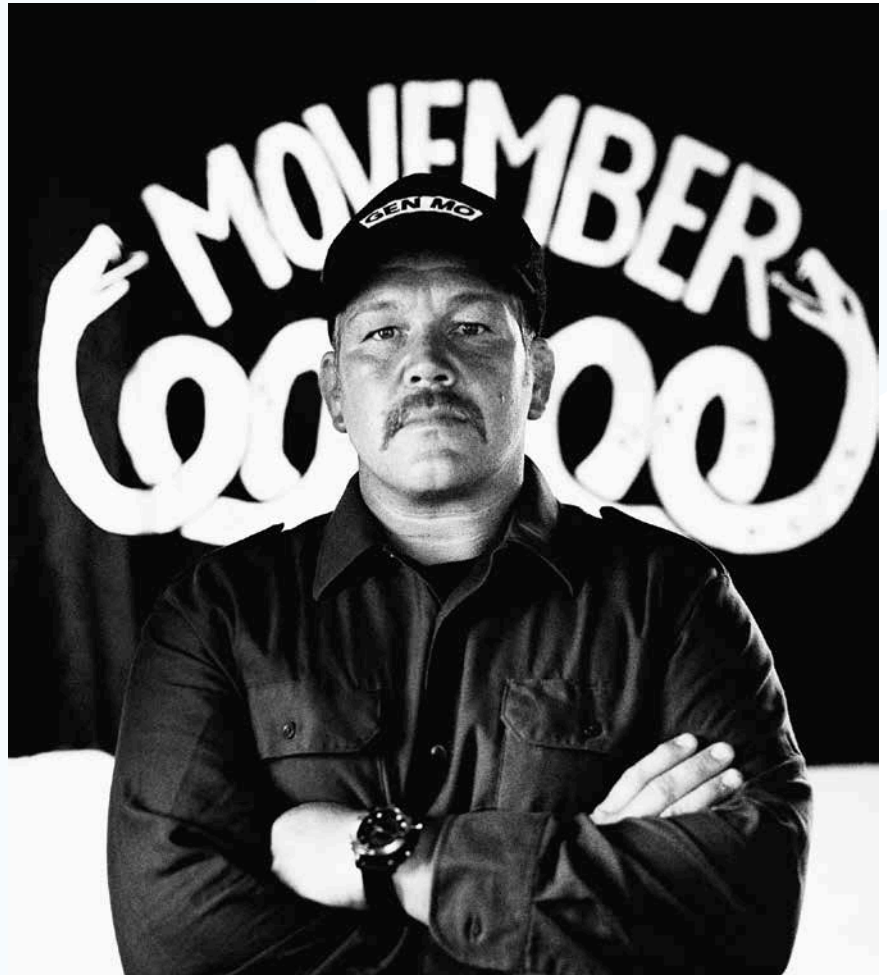
man's unique tumour will respond to treatment.

"Understanding the basic biology of prostate cancer is fundamentally important to being able to improve cancer diagnosis and prognosis, to being able to treat and monitor each patient," says Gail, who has researched prostate cancer for 15 years.

"It's great that PCFA will fund these important questions, enabling researchers to establish a concept without fear they might be proved wrong."

Movember Revolutionary Team Awards

Both PCFA and its long term partner, Movember, have moved towards supporting large, collaborative grants. We have now come together to offer two large awards, the Movember Revolutionary Team Awards (MRTAs).



Funded by Movember, the MRTAs will provide \$5.25 million for projects over three years that bring together some of the country's leading scientists to take a collaborative approach to research pressing questions in the clinical management of prostate cancer.

There are two categories of MRTA: one for advanced prostate cancer and the other for localised disease. Each aims to harness existing strengths; seize future opportunities; foster a collaborative approach to research; and enable the Australian prostate cancer research community to

contribute to a revolutionary impact on the clinical management of prostate cancer.

These awards aim to build on existing strengths within Australia and to link with and build on research in Europe and North America. Recognising that the whole is greater than the

sum of its parts, this collaborative approach aims to catalyse existing national strengths in prostate cancer in Australia to a position of greater international stature.

Some of Our Newly-Funded Projects 2012

PCFA funds research that will make a real difference to the lives of men with prostate cancer. Here are some of the projects funded through PCFA's Research Program in the 2012 funding round:



STUDYING THE HIDDEN POPULATION: SEXUAL WELLBEING AND QUALITY OF LIFE AFTER PROSTATE CANCER FOR GAY AND BISEXUAL MEN AND THEIR PARTNERS

November New Concept Grantee Professor Jane Ussher
University of Western Sydney

Some of the most negative effects of prostate cancer on men's quality of life are changes to sexual functioning, relationships, and sense of self. Previous studies on sexuality and intimacy in men with prostate cancer have focused on heterosexual men, but for the first time this study will look at the gay and bisexual population. It is estimated that 600 to 1,000 gay men are diagnosed with prostate cancer every year, but little is known about how potentially important differences in sexuality, identity and intimate relationships impact on gay and bisexual men's experience of prostate cancer. The results of this work will inform health education and health promotion to gay and bisexual men and lead to better support for this population.



A NEW TYPE OF RADIOTHERAPY OFFERS CHANCE OF A CURE FOR METASTATIC PATIENTS

November New Concept Grantee Dr Farshad Foroudi
University of Melbourne

At present there is no cure for patients who have up to three tumours that have spread from the prostate to bone or lymph nodes. This research involves a new, non-invasive, high-precision radiotherapy technique called "stereotactic ablative body radiosurgery" (SABR) which may offer a cure for these patients. This treatment is delivered as a single, high dose, precision treatment which is painless and can be done while the patient is fully awake - a radical departure from conventional palliative radiotherapy. SABR has previously been used in other cancers as well as for prostate cancer confined to the prostate, but this trial will be one of the first in patients whose prostate cancer has spread.



HELPING PATIENTS DECIDE WHETHER TO PARTICIPATE IN A CLINICAL TRIAL

Movember Young Investigator Dr Puma Sundaresan
University of Sydney

Clinical trials are essential in determining the effectiveness of new treatments – but it can often be difficult to recruit patients to take part in them. This means potentially lifesaving treatments can be delayed. In order for people to participate in a trial, they need to understand why it is being run, the pros and cons of joining the trial, and how these weigh against their own circumstances and values. This study aims to assess the use of decision aids in a prostate cancer clinical trial to help men understand more about clinical trials, help them to make an informed decision, and reduce their conflict and anxiety when they're deciding whether or not to take part.



AN EXCITING NEW WAY OF IMAGING PROSTATE CANCER

Movember New Concept Grantee Associate Professor Andrew Katsifis
Royal Prince Alfred Hospital

The new imaging technique Positron Emission Tomography (PET) is revolutionising understanding and management of prostate cancer. This project aims to improve the ability to image the growth, proliferation, metastases and immune response of tumours. It will develop 'radiotracers' – radioactive isotopes used as tracers that can be used to gain a more accurate picture of tumours. In particular, this project concentrates on radiotracers which target a specific protein called the 'Translocator Protein', or TSPO, high levels of which are found in cancerous prostate tissue. The outcomes of the project have the potential to significantly enhance care of prostate cancer patients through better understanding of the disease, by complimenting existing imaging techniques, and through better assessing current and new treatments.



WHY DON'T MORE MEN WITH CASTRATE RESISTANT PROSTATE CANCER RESPOND TO CHEMOTHERAPY?

Movember New Concept Grantee Dr Alexander Swarbrick
Garvan Institute of Medical Research

Drugs like docetaxel and cabazitaxel are still the best we have for chemotherapy in men with castrate-resistant prostate cancer (CRPC), but still fewer than half of men benefit from these drugs. This project aims to work out a better way of managing CRPC by investigating the role of a newly-discovered class of genes called 'microRNAs', which are believed to play a critical role in controlling prostate cancer response to chemotherapy. A multi-disciplinary, multi-institutional team will use a first-of-its-kind technology to find microRNAs that control the response of CPRC to chemotherapy. Ultimately, these microRNAs may become a promising new target for new therapies.

Financial Implications of Prostate Cancer

The costs of treatment for prostate cancer in Australia are not well understood. There has never been a comprehensive study into the total outlay patients face, or of who pays – the patient, the public health system or health insurers.

We do know that prostate cancer costs include initial treatment, secondary treatment, managing side effects, time taken off work, travel to and from hospital and doctors' appointments, plus additional costs such as exercise programs, incontinence pads and increased insurance premiums. With most men being diagnosed after the age of 50, many of this financial burden falls on retired men.

PCFA is also concerned that anecdotal evidence suggests men are not well informed about ways of sourcing financial assistance, what their health insurance will cover, and how to negotiate their finances if they are still in the workforce.

PCFA is working with a group of health economists from Griffith University, led by Dr Louisa Gordon, to calculate the costs of prostate cancer. To collect the necessary data, men are being asked to participate in an online survey.

The project's findings will inform PCFA to be able to develop better information and resources to help men handle these costs, and to advocate for a better deal for men with prostate cancer.



Annual Research Update Meetings 2013 Making Research Accessible to Our Community

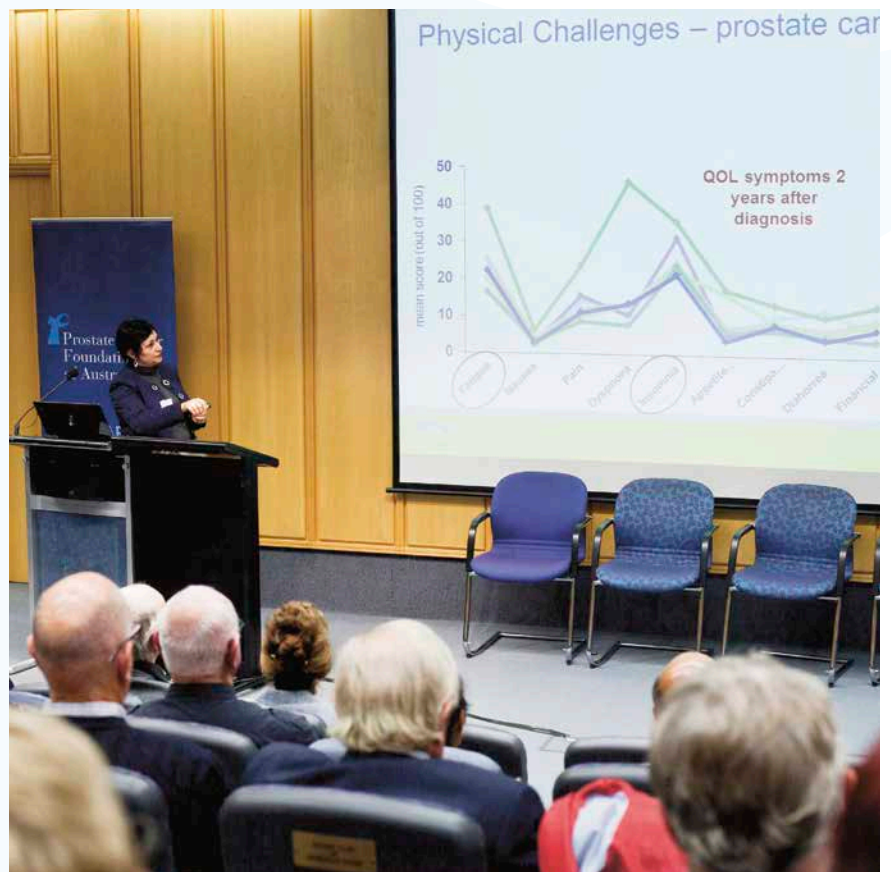
Research has a direct impact on the future of men living with prostate cancer. In June, PCFA teamed up with Ovarian Cancer Australia to update the community on outcomes of prostate cancer research funded through PCFA's Research Program.

Held in Melbourne and Sydney, this year's Annual Research Update focused on survivorship. The one-day events were attended by men living with prostate cancer and their families, allied health professionals, researchers, community donors and corporate sponsors and the media. The vast majority of the 170 people who attended each meeting rated it as very good.

Some of Australia's leading researchers including Professor Afaf Girgis, Professor Suzanne Chambers, Professor Paul De Souza, Professor Daniel Galvao, Professor Trish Livingstone, Professor Rob Newton and Professor Susan Clark presented their latest data and thoughts on important issues related to prostate cancer such as prevention, life after prostate cancer diagnosis and quality of life.

A panel of experts comprising psycho-oncologists, researchers, nurses and oncologists answered specific questions posed by the audience about survivorship and what it means to live with cancer.

The highlight of the meeting was the consumer panel. Several men with prostate cancer and women living with ovarian cancer were interviewed. Their message was that men and women with cancer choose life and a



life of quality post cancer diagnosis. The audience heard about the difficult cancer journey and its challenges, ways of coping and living with the disease and thoughts on addressing unmet needs of cancer survivors. Many inspiring and courageous stories emerged.

In 2014 we anticipate holding an Annual Research Update in Brisbane and one in Melbourne. Both events will be advertised via the web, social media and email.

AWARENESS

Prostate cancer remains a significant killer of men in Australia yet understanding about the disease is lacking in many sectors of the broader population.

PCFA is working proactively to inform the entire community about this important health issue. We aim to target men of all ages with specific information about prostate cancer to increase general awareness and enable men to be better informed when making decisions about how to manage their own health.



Targeted Resources

PCFA has identified a need to target prostate cancer information toward different audience groups. As part of the *Supporting men with prostate cancer through evidence-based resources and support* project, a Cancer Australia initiative funded by the Australian Government, PCFA has produced a series of information booklets to cater to different sectors of the community.

Each series contains four booklets covering Diagnosis, Treatment, Side Effects of Treatments, and Wellbeing. Each booklet can be read as a standalone resource or as part of the set. The resources will be available through PCFA's Support Group network, hospitals, from Prostate Cancer Specialist Nurses and general cancer centres as well as GPs from early 2014.

While the information they contain is not intended to replace men's discussions with their healthcare professionals, the resources are designed to better inform men about what to expect and what to ask their doctor. We aim to equip men with the information they need to be able to base their decisions on their own preferences and lifestyles if possible.

The booklets' contents were reviewed by a multidisciplinary advisory group consisting of consumers and health professionals. The first resources became available in September 2013, with the others to be rolled out during the coming year.



Targeted Resources (Continued)

Localised prostate cancer: With the generous support of Gandel Philanthropy we have revised and refreshed our existing resources about localised prostate cancer to incorporate more current information about different treatment options and supportive care.

Advanced prostate cancer: These resources are targeted at men diagnosed with advanced disease to inform them about the newest treatment options and help them to cope with the emotional impact of their condition.

Younger men: PCFA has identified a particular lack of awareness about prostate cancer in men under 50, a cohort which often reports feeling isolated after diagnosis. These resources answer questions about issues pertinent to this group, including fertility, supporting a family during treatment, and sexuality.

Gay and bisexual men: These resources address prostate cancer issues specific to gay and bisexual men including differences around intimate relationships, social networks and support mechanisms, and perceptions of discrimination in the health system.

Partners and carers: Prostate cancer particularly affects partners and carers because of the impact treatments can have on sexuality and relationships. Through these resources PCFA urges that partners and carers are involved in treatment decisions and receive support throughout the cancer journey.

Aboriginal and Torres Strait Islander men: Men from these communities are more likely to die of prostate cancer than other men. PCFA will produce culturally-sensitive educational flip charts for health workers to use in Indigenous communities.

Men from non-English speaking backgrounds: PCFA is translating key resources about prostate cancer awareness, support groups and information for partners and carers into the most commonly spoken non-English languages in Australia.

Other resources: PCFA is also producing general resources about:

- psychological care
- urinary function
- bowel function
- a model of care to help consumers with cancer services navigation
- sexual function
- hormone treatment
- surgical treatment
- brachytherapy.

Ambassador Program

The Ambassador Program is a community education program aiming to raise awareness of prostate cancer and provide resources from which participants can further their knowledge. One hundred and five ambassadors are currently trained to deliver presentations to the public about prevention and early detection, treatment options and challenges.

This year the Ambassador Program has been revised with the presentation contents completely rewritten and brought up to date. Existing and new ambassadors have been invited to participate in a national training program to familiarise themselves with the new material and enable them to deliver presentations in different contexts.

PCFA ambassadors delivered presentations at approximately 90 speaking events, reaching thousands of people. These talks occurred in a wide range of locations including rugby clubs, city councils, churches and men's sheds. Many workplaces also hosted Ambassadors to educate their workforce, including military bases, construction and machinery

companies, mine sites and Qantas, a corporate partner of PCFA.

Ambassadors reside in all States and Territories, in both rural and urban areas. Many have had first-hand experience of prostate cancer, are the partner or carer of someone who has, are health professionals, or are simply passionate about men's health.



MARK FORBES

Carpenter and PCFA Ambassador
Toowoomba, Queensland

Mark Forbes, 42, endured an upset stomach for 18 months before he went to see his GP, but when he finally made the trip it saved his life.

His doctor ordered a PSA test along with the other regular blood

THE AMBASSADOR

tests he needed to diagnose Mark's complaint. The score came back a 6, and within two months it had risen to 13.*

"That was in September 2011 and in the November I was diagnosed with a biopsy as having localised prostate cancer," Mark says. His children were 11 and 17, and his wife 40. "It was a bit of a learning curve."

Having recovered from a radical prostatectomy, Mark realised how unusual it is for younger men to receive a diagnosis of prostate cancer – only 3% of cases occur in men under 50. "It put me at a bit of an advantage to talk to younger guys about prostate cancer," he says.

As one of more than 100 PCFA Ambassadors who give talks

throughout Australia to raise awareness, Mark is now spreading the message to younger men that prostate cancer is not just an older man's disease.

In the last year he's addressed more than 800 people, tailoring his dynamic presentations to each audience and their type of work. His story never fails to grab their attention.

"I'm probably the last person to be lecturing men about their health – I was also reluctant to see my doctor," Mark says. "But if I hadn't gone, where would I be now?"

* Mark's PSA score was unrelated to his stomach complaint.

National Clinical Guidelines

These clinical guidelines will be an Australian world first and will remove the confusion over PSA testing, thereby ensuring men are able to make informed decisions about PSA testing in consultation with their doctor.

There remains significant confusion within the community around PSA testing, largely due to a lack of consensus and policy both within Australia and internationally. PCFA consulted with key stakeholders and concluded it would be possible to bring together a broad group of experts to develop national clinical guidelines on PSA testing and consequent care – the first time such as collaboration has occurred in the world.

Cancer Council Australia is partnering with PCFA to lead development of the evidence-based guidelines using their guidelines development team and Wiki-based approach. Once developed, the guidelines will be submitted to the National Health and Medical Research Council (NHMRC) for approval.

The clinical guidelines are being developed with input from an Expert Advisory Panel consisting of the relevant medical colleges, all specialities involved in the diagnosis and management of prostate cancer, and consumer representatives.

Work commenced on the guidelines in November 2012 and we anticipate the documents will be available for public consultation toward mid-2014 and published and disseminated following the consultation and review process.

These clinical guidelines will be an Australian world first and will remove the confusion over PSA testing, thereby ensuring men are able to make informed decisions about PSA testing in consultation with their doctor.

Roadshow in the Bush

Education programs about prostate cancer have traditionally been delivered through metropolitan service providers, disadvantaging men in regional and rural areas. To address this deficit, PCFA has developed a Rural Education Roadshow program attending each State and Territory in Australia, funded by the Department of Health.

The aim of these Roadshows is to deliver consistent, robust educational messages to people in their local communities to enable them to make informed decisions about prostate cancer. This year PCFA has delivered Roadshows in Port Pirie, Nhulunbuy (Gove), Katherine (13/14 financial year), with the program continuing to be rolled out across all states and territories.

Two education sessions are delivered at each site, one for community members and one for GPs and other healthcare professionals. These sessions have been designed by

PCFA based on expert advice and are delivered by a Specialist Cancer Nurse and experts in urology, radiation oncology or medical oncology.

Men who attend the Roadshows are empowered to be better equipped to manage prostate cancer where they live and to understand the treatment pathways available to them.

The program also aims to increase professional expertise in regional areas so that patients with an existing prostate cancer diagnosis are better supported through their cancer

journey. As well as the delivery of structured information, the forum enables the exchange of information, ideas and practical advice to empower local service providers and ultimately reduce the need for men from rural communities to travel long distances to access tertiary services.

The project will develop a potentially sustainable model for providing outreach education to healthcare providers and consumers in regional Australia. The project is being evaluated to ensure key performance indicators have been met.



LACHLAN CIRCUIT
Prostate Cancer Specialist Nurse
Royal Darwin Hospital

Donning a hard hat, high vis vest and sturdy shoes have become part of a day's work for Lachlan, who has been delivering PCFA's Prostate Cancer Rural Education Road Shows throughout the Top End.

THE ROAD SHOW EDUCATOR

He recently travelled with Urologist Trent Farebrother, Radiation Oncologist Gerard Adams and Medical Oncologist Narayan Karanth to Gove, in the north eastern corner of Arnhem Land, to the remote Pacific Aluminium bauxite mine and refinery to bring information about prostate cancer to a group of miners.

"There were men there from their mid-twenties to their sixties, fathers and sons, all with a basic idea that they had prostates and there was a chance of cancer, but all with a lot of questions," he says.

"There are so many misconceptions about the treatment for prostate cancer and its side effects, so it was really valuable for us to answer

some of these questions and help clarify things."

After the Road Show, several of the miners who attended called for more information about their situation and have since sought medical advice.

Based at the Royal Darwin Hospital, Lachlan jumped at the opportunity to become a Prostate Cancer Specialist Nurse following his own father's journey with prostate cancer. His main role is to support men with prostate cancer in the Northern Territory, coordinating support, continuing care when specialists are unavailable, and educating the community.

Advocacy: Zytiga listed on the PBS

One of PCFA's key commitments is to ensure men diagnosed with prostate cancer have the best available treatment options available to them throughout their prostate cancer journey. This year PCFA successfully lobbied to have the new drug abiraterone acetate (Zytiga) listed on the Pharmaceutical Benefits Scheme (PBS) for men with advanced prostate cancer.

There are an estimated 22,000 men with advanced disease in Australia and all of them will eventually become resistant to androgen deprivation therapy. Men with this hormone therapy resistant disease who have failed chemotherapy have a shortened life expectancy and a poorer quality of life.

Zytiga is the first of a new class of drugs which target the androgen-receptor signalling pathway to slow cancer growth. These new therapies can substantially improve survival

and quality of life and may one day be used prior to chemotherapy to fundamentally improve outcomes of advanced prostate cancer.

For many men with advanced prostate cancer, Zytiga is the only remaining option. But before it was listed on the PBS the drug cost \$3,000 per month, putting it out of the reach of many prostate cancer patients.

PCFA and drug manufacturer Janssen Cilag established an advocacy campaign, Tomorrow Counts, which rallied the community of men with

advanced prostate cancer to share their stories and lobby for Federal Government funding for Zytiga.

In February PCFA Chief Executive Anthony Lowe joined with Mr John Stubbs, Executive Officer of canSpeak, to write to the then Minister for Health, Tanya Plibersek, to request that the listing of Zytiga be fast-tracked.

PCFA was delighted when, on 1 August 2013, Zytiga was listed on the PBS, enabling Australian men with advanced prostate cancer to benefit from this game changing new therapy.



TONY SONNEVELD OAM
Patient

Since his diagnosis 10 years ago, Tony Sonneveld has refused to let prostate cancer get him down: he walked the Kokoda Track a month after his external beam radiation treatment, he's renovated an entire

THE ADVOCATE

factory space, tends a local park and enjoys tennis, snowboarding and water skiing.

The 67 year-old has also been a long-time advocate for PCFA, telling his story to journalists, lobbying politicians and lending his time as PCFA's NSW Chairman to ensure a better situation for other men with prostate cancer.

This year he has spent hundreds of hours supporting PCFA's campaign to have the drug Zytiga listed on the Pharmaceutical Benefits Scheme. He's appeared in several newspapers, organised a letter writing campaign, and lobbied his local MP.

That the campaign was ultimately successful, with Zytiga being listed from August 1, is particularly relevant for Tony as his own health has started to change.

With early signs that his hormone therapy has stopped working, access to the drug means a better chance of survival. It is offering hope to men with hormone therapy resistant prostate cancer worldwide.

"I still wake up every day and think 'I've got cancer' - but then I fill my day as long and hard as I can so I don't dwell on it," he says.

Community Attitudes Survey

The majority of respondents did not know the symptoms of prostate cancer, especially those in younger age groups.



As less than three per cent of prostate cancer cases occur in men under the age of 50, little work has been conducted in this age group to determine the level of awareness about prostate cancer. To redress this, PCFA's 2013 Community Attitudes Survey, *Prostate Cancer: The Next Generation*, provided insight into the attitudes, experiences and perceptions about prostate cancer among men aged 18 to 50.

A national survey of 1,243 younger men confirmed that, like older men, they saw prostate cancer as the most significant health issue affecting men. This was particularly true among men aged 18 and 19, 38% of whom named prostate cancer as the most significant disease for men.

The majority of respondents did not know the symptoms of prostate cancer, especially those in younger age groups. Only one third had a reasonable knowledge about prostate cancer testing – much lower than in older men – while 73% did not think the information available to them clearly set out the tests they should have or what the tests entailed.

Surprisingly, despite their lack of knowledge about testing, men reported being tested from a very young age. Six per cent of 18 to 24 year olds had been tested, while by their forties a quarter had been tested. Most of the men said they were tested at the instigation of their GP, illustrating that Australia has an unorganised de facto screening program for prostate cancer and would benefit from evidence-based clinical guidelines around PSA testing.

For the first time, the survey asked respondents to nominate whether or not they were heterosexual. Thirteen

per cent identified themselves as gay or bisexual or did not identify themselves as heterosexual, enabling PCFA to elicit valuable information about attitudes to prostate cancer in this community.

Significantly, gay and bisexual men were more likely than heterosexual men to report significant health issues, including depression and anxiety. They were also less likely than heterosexual men to have someone to whom they could turn for emotional support. Since treating mental health issues is an important part of prostate cancer care, this finding suggests that extra support needs to be targeted toward this population of men.

Gay and bisexual men under 40 were more likely to have been tested for prostate cancer and, despite perceived or real discrimination in the healthcare system, they were more aware than heterosexual men of the importance of health checks and monitoring. Gay and bisexual men were also susceptible to over-testing for prostate cancer and, like heterosexual men, appeared to lack adequate knowledge about symptoms, testing and treatment options. This highlights the need for information resources targeted at this community.



A central part of PCFA's activities is to support men and their families affected by prostate cancer through the development and delivery of evidence-based information and through our extensive network of Support Groups and Prostate Cancer Specialist Nurses.

This year has seen significant growth in the services PCFA provides, with our educators, nurses and supportive mates reaching more men throughout Australia.

Support Groups

PCFA's network of Support Groups has grown in the last year to 150 groups across Australia, sharing information, providing encouragement and raising awareness amongst men diagnosed with prostate cancer and their families.

Support Groups provide invaluable reassurance to men with prostate cancer from others who have personal experience of the challenges they are facing. Men who attend Support Groups are able to talk through the pros and cons of treatment options with other men, compare their physical and mental wellbeing and outcomes, and benchmark their own progress along the cancer journey.

With Cancer Australia funding through the *Supporting men with prostate cancer through evidence-based resources and support* project, PCFA is working to increase the number of Support Groups nationally to 200 by June 2014.

For the first time, the grant has enabled PCFA to offer a national training conference for Support Group leaders. An evidence-based manual has been developed to provide useful and practical information that reflects current practice and that leaders may easily apply.

A series of modules tailored to Support Group leaders' needs covers different types of support groups, the importance of a group purpose statement, welcoming new members, different leadership styles, managing challenging behaviours, and avoiding burnout.

The new training material has been delivered by Support Group and Outreach Coordinators in each of PCFA's five Chapters, who are trained to support Support Group leaders on the ground and through formal training programs.

National Support Group Training Conference

The inaugural National Support Group Leader Training Conference, held in Melbourne in May 2013, brought together more than 200 Support Group leaders and PCFA members from across Australia.

Delegates were able to network, attend facilitator-led workshops to introduce the new Support Group leader training material, and listen to some of Australia's most respected experts on men's health and prostate cancer.

Information was imparted by a mix of external and internal presenters at plenary and expo sessions, workshops and by a number of exhibitors.

Max Gardner Awards

When Max Gardner AM, a former Chairman of PCFA, died of prostate cancer in 2004 at the age of 71, he believed earlier diagnosis could have saved his life. He had become an advocate for early diagnosis and worked tirelessly to raise the level of community awareness and research into prostate cancer.

Max's work and dedication are remembered to this day through the Max Gardner Award, which is presented annually to PCFA volunteers who have made outstanding efforts to spread awareness, promote research and support men and their families affected by prostate cancer.

Now in its fifth year, the Max Gardner Award has been received by 28 people for their services to PCFA. This year, the recipients were Terry Wheeler, David Gregory and Les Payne.

Max Gardner Award Recipients

John Allen, NSW

Don Baumber, QLD

Gary Bowes, SA

Spence Broughton, QLD

Con Casey, NSW

Bob Collard MBE, NSW

Dr John Conroy OAM, NSW

Peter Dornan AM, QLD

John Dowsett, TAS

Colin Farmer, WA

John Goodall, NSW

David Gregory, TAS

Alan Hall, SA

Trevor Hunt, SA

Daryl Hyland, QLD

Les Mather, VIC

Jayne Matthews, NSW

Bill McHugh, QLD

Michael O'Neill, NSW

Les Payne, QLD

Robert Phillips, VIC

Jim Reid, VIC

Jeff Roberts, SA

Ron Schmarr, NSW

Max Shub, VIC

Robert Slade, NSW

John Stead, QLD

Terry Wheeler, NSW



JEFF ROBERTS
Max Gardner Award recipient
2009

JEFF'S YEARS OF SERVICE TO PCFA

Fourteen years after his radical prostatectomy, Jeff Roberts is still heavily involved in promoting prostate cancer awareness in South Australia.

A long term member of the Prostate Cancer Action Group along with two other support groups, Jeff was awarded the Max Gardner Award in 2009.

"As a general rule men don't tend to pursue their health situation as much as they should," he says.

"But the thing about prostate cancer is if you have a low to moderate grade you would be unlikely to have

any symptoms so it's very important to be tested regularly. The more people are aware of this and inform themselves, the better placed they are to take the right options and therefore end up with either a cure or able to maintain a good quality of life."

Jeff says the thing he enjoys most about his voluntary work is the feedback from men with prostate cancer. "They appreciate being able to talk, they like to get information, reassurance and support from someone who has experienced prostate cancer himself."

New Support for Gay and Bisexual Men

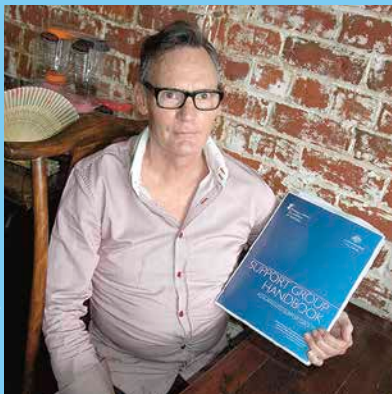
As part of PCFA's Gay and Bisexual Men's Prostate Cancer Initiative, a collaboration between PCFA, Malecare, Cancer Council Victoria, La Trobe University and others, researchers at La Trobe University audited resources available to this community and discovered that gay and bisexual men were almost entirely invisible in existing material.

There was no targeted information addressing issues such as support mechanisms, the effects of treatments on sexuality, or other issues of concern to this community. For fear of discrimination many gay and bisexual men did not reveal their

sexual orientation to their doctor, meaning they never discussed issues that were relevant to them.

In addition to the development of information resources specifically targeted at gay and bisexual men, PCFA is establishing Support Groups

nationally for this community. These groups are up and running in Sydney, Melbourne, Brisbane, Adelaide and Perth and PCFA is in the process of establishing groups in Hobart and Darwin.



Joe Cassidy, OUTinPerth

PETER BASTOW

Perth Support Group for gay and bisexual men

As a 54 year-old gay man living in Perth, Peter Bastow's 2013 diagnosis with localised prostate cancer was particularly challenging. After his Urologist confirmed Peter's cancer by telephone, he spent two weeks in a haze and

THE SUPPORT GROUP LEADER

with no support. Then he started researching possible treatment options and called a Support Group, which advised him not to mention to anyone else in the group that he was gay.

"I can understand that husbands and wives may find homosexuality a bit confronting when they're on their own journey and looking for support – but there was nowhere else for gay men like me to go for advice," he says.

Gay and bisexual men may have different questions and concerns about prostate cancer, including the impact of treatments and side effects on their sex life, a possible lack of close relationships to provide support, and perceived or real discrimination in the health system.

PCFA is in the process of establishing Support Groups for gay and bisexual men in every state and territory in Australia. It is also developing a set of information resources targeted at this community and its specific issues.

Peter has now become the leader of Perth's first Support Group for gay and bisexual men. It is welcoming transgender and transsexual men as well as anyone else who may not wish to attend a mainstream Support Group.

Men who attend are able to gain information, share experiences and meet others who can provide support.

"Prostate cancer is a male disease," says Peter. "Men are men, no matter what their sexuality is."

Prostate Cancer Specialist Nurses

The Prostate Cancer Specialist Nursing Service was officially launched in May 2012 with generous initial funding from Movember. In July 2013, then Minister for Health Tanya Plibersek provided additional federal funding of \$7 million through the Department of Health to further expand the program, enabling PCFA to place an additional 13 nurses around the country and bring the total number to 25.

Prostate Cancer Specialist Nurses work as part of a multidisciplinary team to provide a point of contact for men and offer continuity of care from diagnosis onwards. They see patients at any point during their cancer journey and help patients and their families to navigate the complex system of health services, make decisions about treatment options, and manage side effects of treatment.

Prostate Cancer Specialist Nurses are primarily hospital-based positions, with most referrals coming through the hospital system, but some offer community-based intervention if this is required in their area. Up to 50% of the new Federally funded nursing positions will be in community settings. The nurses' roles continue to evolve as nurses have responded to local need within a structured framework.

The current Prostate Cancer Specialist Nurses had a total of 5,732 patient-related contacts during the service's first year. Of these, 1,751 were new patient contacts and 3,981 were review contacts of patients who were already known to the nursing service. There were 2,349 rural patients and 3,383 metropolitan patients for this period. More than a third of patient contacts have been conducted by phone.

The nurses are involved in providing specialised and tailored information and education, psychological support and clinical care. Most of their work involves offering psycho-social assessment and support of patients and their carers, provision of information, care coordination, advice on continence or sexual function, and communication with the treating team.

The nursing program provides professional development and support for nurses from the start of their induction through training and beyond via monthly teleconferences and site visits.

Practice Framework for Nurses

Prostate Cancer Specialist Nurses are relatively new to Australia and there is no commonly accepted accreditation. PCFA was concerned this could lead to variations in practice and consequently in March 2013 released Practice Framework and Competency Standards for Prostate Cancer Specialist Nurses.

The guidelines provide structure and clarity to the profession, competency standards for nurses to work towards, and a robust framework to guide the practice of Prostate Cancer Specialist Nursing.

The guidelines were developed following a series of consultations with key stakeholders in healthcare delivery, strategic service development and nursing professional bodies representing all States and Territories in Australia, as well as an extensive literature review.

The guidelines have been adapted as course reading material for the Prostate Care Nursing short course at La Trobe University. This is the only specialised course of study in Australia that prepares Registered Nurses to care for men living with prostate cancer and their families.

Professional Development

PCFA also funds training for nurses to develop their skills in prostate cancer nursing and enable them to develop professional contacts.

This year PCFA funded nurses to attend three national cancer conferences, the Cancer Nurses Society of Australia (CNSA) Annual Winter Congress in Brisbane in July, the Australian and New Zealand Urogenital and Prostate (ANZUP) Cancer Trials Group Annual Scientific Meeting on the Gold Coast in July, and the Prostate Cancer World Congress in Melbourne in August.

PCFA has also funded travel scholarships for nurses enabling them to spend time developing their understanding about prostate cancer care, building professional networks, and then returning to their local area to apply their knowledge in a local context.

PROSTATE CANCER SPECIAL NURSE

SHARON SLACK

Prostate Cancer Specialist Nurse
Tamworth Rural Referral Hospital

A diagnosis of prostate cancer is unlike a diagnosis of any other cancer because there are so many different treatment options, each with the potential for significant side effects. Patients' cancer journeys can sometimes last for many years and they need a range of health professionals to support them during this time.

Sharon became one of Australia's first Prostate Cancer Specialist Nurses in June 2012 and since then has seen demand for her services grow to encompass the New England Area Health Clusters and the townships of Quirindi, Murrurundi and Werris Creek just south of Tamworth.

Based at Tamworth Hospital, where Sharon identifies many of her patients from admissions for prostatectomy or as they attend medical oncology or radiotherapy clinics, she realised there was a desperate need for information and support for men in more remote areas.

"There were a lot of men who were finding out they had prostate cancer and then feeling as though they are just being sent off into the world to work it out for themselves," she says.

"In rural areas you often have visiting general practitioners who are only there for six months, so



people have commented they don't feel they are really getting to know them. It's a long drive for them to come for a half hour consultation at the hospital and not everyone wants to talk on the telephone or via video conferencing."

Sharon established an outreach clinic and now visits men with prostate cancer in a large geographic area spanning from Mungindi to Walcha. To let men know she's there for them, she has sent out nearly 100 flyers to GPs, liaises with Medicare Locals, and visits small rural and regional

clinics to deliver presentations.

In the last year she has guided many men through treatment decisions, helping them to understand their choices and tailoring care to their individual needs.

"I've helped to put things in order for them, provided information which has giving them the permission to know their own body, and what treatment options will best suit them, their families and their lifestyles."

COMMUNITY
PARTNERSHIPS

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NER-



September is International Prostate Cancer Awareness month, and the month Australia unites to host barbies to raise funds and awareness for PCFA.



500 barbies across the country



More than \$900,000 raised



Commonwealth Bank staff raised \$57,000



bigaussiebarbie.com.au



[/pcf1](https://www.facebook.com/pcf1)

Big Aussie Barbie



Having watched his father's journey since his prostate cancer diagnosis five years ago, former Australian cricketer Matthew Hayden has become the face of PCFA's major fundraising event, the Big Aussie Barbie.

Now in its fifth year, the Big Aussie Barbie encourages Australians everywhere to host a barbecue to support the work done by PCFA and to encourage all Australians - not just men in the high risk age group - to discuss prostate cancer and be aware of the risks.

The social atmosphere of a barbecue is the ideal place for men to discuss men's issues, including their health - and Matthew wants to encourage everyone to consider PSA testing, in consultation with their doctor.

In 2013, he spearheaded the campaign with a new television

commercial, website, online and direct marketing elements. The campaign was officially launched in Sydney at Customs House on Tuesday 20th August ahead of International Prostate Cancer Awareness Month in September and was followed up with launch events in Brisbane, Melbourne, Perth and Adelaide.

The Big Aussie Barbie is proudly supported by national sponsor the Commonwealth Bank, whose staff volunteered at launch events and raised \$57,000 at a staff cook-off in September, which saw the Retail Banking, Business and Private



Banking, Institutional Banking & Markets, Risk Management & Financial Services and Wealth Management teams compete against each other for the best barbecue.

This year PCFA also welcomed McCormick as the new supporting

sponsor of the Big Aussie Barbie. McCormick very generously provided delicious barbecue marinades and spice rubs to each of the launch events and barbie host welcome packs in addition to hosting their own staff barbecue at their head office in Melbourne.

“Men aren’t very good about talking about men’s health issues and a lot of us think we’re bulletproof. To make progress in the fight against prostate cancer we first need to get it out in the open and start talking about it.”

**Former Australian Cricketer,
Matthew Hayden**

Our thanks to the following organisations for their generous contribution to the 2013 campaign:

Major Sponsor:



Commonwealth Bank

Campaign Supporters:

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Adelaide Airport

Qantas

Perth Airport

Grill'd

Cyclotek

Fasco Air Systems

Wolf Blass

“These men have raised awareness of prostate cancer to the many hundreds of people they spoke to along their journey and through the media attention the ride attracted.

As a result of the funds raised the men will have a lasting national and international legacy by funding the National Clinical Guidelines on PSA Testing.”

**PCFA CEO,
Associate Professor Anthony Lowe**

The Male Bag Ride 2013



A group of 26 men raised significant funds for PCFA by spending 11 days riding from Perth to Melbourne on former postie motorbikes.

The ‘Male Bag Ride’ was devised by Julian Dewan and Tony Clayton, who led the 4,500km journey on board Honda 110cc bikes. “We started The Male Bag Ride as we saw the Postie Bike journey from Perth to Melbourne as the perfect platform to raise much needed funds for PCFA and awareness for prostate cancer,” says Julian.

Having initially hoped to raise \$200,000, the group more than doubled their target and helped spread the work of PCFA by attracting huge media attention across Australia, which included a fantastic feature on Channel Ten’s The Project.

The men raised funds through online donations and sponsorship including principal sponsors Australia Post, Boral, Bendigo Bank, the Murray Meander, Honda, Adelaide Airport, Qantas, Perth Airport, Grill’d, Cyclotek, Fasco Air Systems and Wolf Blass.

Fundraising events along the route included a Sport Night in Adelaide attended by numerous guest speakers, including basketball legend Jan Stirling

and Olympic cyclist Patrick Jonker.

The men were joined along the way by patron, AFL legend David Parkin OAM. “Together, we can break down the barriers of embarrassment that men have when discussing male cancer so that diseases such as prostate cancer are caught much earlier,” he says.

The journey ended at Melbourne’s iconic MCG. The men took a rest to watch a game and made an honorary lap of the stadium during half time, when the cheque was presented to PCFA to huge cheers from the crowd.

The money raised went towards funding PCFA’s work in developing national evidence-based clinical guidelines on PSA testing and early management of test-detected prostate cancer, which aim to maximise the lives saved through testing, whilst minimising the negative side effects.

The Male Bag Ride will be taking place again in 2014 in Tasmania from 15-23 March 2014.



 thelongride.org

Sponsors:

- Gasoline Alley
- Harley-Davidson
- Alucom
- Berkeley IT
- Boeing
- Coolaz
- Defence Housing Australia

The Long Ride 2013



The Long Ride is an annual national charity event to raise awareness of prostate cancer and men's health. Nearly 2,000 motorbike riders have taken part since the event began in 2007 and have raised more than \$500,000 for PCFA.

The event is designed to encourage people to do something totally different in their life: "It is about life on the road, meeting new people, and exploring yourself as you do something you love to do - ride your motorcycle," say Chris and Gail Dunne, the founders of the ride.

Bike riders leave from every capital city and follow country roads to finish at a different point every year. In 2013, 400 riders took part and spread awareness of prostate cancer

throughout regional areas in Australia and raised just over \$250,000.

All the riders came together at the end of the ride in Cairns, with some riders sporting blue nails, hair and beards at a big end of ride celebration.

PCFA is continually grateful to Chris and Gail for organising and bringing together a truly inspirational group of motorbike riders all with the one aim of raising awareness of prostate cancer.



murraymeander.com.au

Sponsors:

Betta Home Living

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Perricoota Vines Retreat

The Murray Meander



The Murray Meander is a truly unique event which sees teams travelling the length of the Murray River in a fleet of tinnies in three one-week stages over three years.

Organised by the Horizon Committee, with Gareth Stobus as Chairman and Dick Philips as event coordinator, the event is held over three legs with the current Meander starting in 2012. The final leg of the challenge will be completed in 2014.

In 2013, the event drew 29 teams from Adelaide, Sydney, Melbourne, the Hunter region of NSW as well as regional Victoria to complete the second part of the journey. In 2014 the event hopes to attract 40 teams

to complete the last section from Mildura to Goolwa, covering a total of 887km.

All teams who have taken part in the event are asked to raise funds for prostate and breast cancer support services. PCFA extends much gratitude to the committee for their support and organisation of this event, which attracts huge interest and raises not only funds but awareness about prostate cancer.

BIGGEST EVER BLOKES LUNCH

Biggest Ever Blokes Lunch



[prostate.org.au/
articleLive/pages/Biggest-
Ever-Blokes-Lunches.html](http://prostate.org.au/articleLive/pages/Biggest-Ever-Blokes-Lunches.html)



Biggest Ever Blokes Lunch brings together large numbers of community participants in regional areas across Australia to enjoy barbecues and raise funds for PCFA.

The Biggest Ever Blokes Lunch was founded by McPherson Media Group managing director and former prostate cancer patient Chris McPherson in 2009, when he gathered a group of men who had all been affected by prostate cancer. With their passion and enthusiasm they created the first Biggest Ever Blokes Lunch in Shepparton, Victoria.

Chris has recruited Biggest Ever Blokes Lunch committees across regional Victoria, all of which will hold events every year to raise funds for prostate cancer research and awareness. More than \$1 million has been raised to date.

We are continually grateful to Chris for coming up with this great concept and spreading his passion for this event to help increase awareness and funds for PCFA.

COMMUNITY FUNDRAISING HIGHLIGHTS



Community Fundraising Highlights

QLD

2012

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER



Shags on a rock and roll

Shag Islet Cruising Yacht Club (SICYC) is a rapidly growing social network of cruising yachties and individuals who have a passion for the sea. The concept is to create a network of cruising yachties all with the same title of Vice Commodore and each representing a different location.

Each year club members gather for a rendezvous on Shag Islet in the Gloucester Passage in the Whitsundays. There to the sounds of Jimmy Buffet's music Parrot Head and Pirate Parties are held to raise money for charity.

This year the Rendezvous attracted 270 cruising yachts with nearly 1,000 people attending the main event. So far over \$40,000 has been donated to PCFA from this year's event.

Ride the Range

USQ Ride the Range challenges all types of bicyclists with medium to high levels of skill to ride either 50, 88 or 100km to raise money for PCFA and local and international charity projects.

Run by the Rotary Club of Toowoomba and sponsored by the University of Southern Queensland (USQ), the event has raised more than \$30,000 for PCFA since it was launched in 2011.

The challenging ride starts and finishes at Picnic Point in Toowoomba before meandering through the Lockyer Valley and Gatton District and before the cruel climb back to the start.



2013

JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE

Challenge event organising committee member Mrs Jo Capp said organisers had received positive feedback from the 270 riders. "The riders find it very hard but a really good challenge," she said.



Southside Club's Big Prostate Breakfast

Southside Sport and Community Club is combating prostate cancer by raising funds and breaking down taboos. The November Big Prostate Breakfast, in its fourth year, raised \$25,000 for PCFA, bringing the total to over \$100,000.

To deliver the Big Prostate Breakfast, all staff work on a volunteer basis, including entertainers. Raffle prizes are donated by businesses and even the food is kindly donated by suppliers.

4WD club hitch wagon to PCFA

The Ipswich Four Wheel Drive Club has taken the lead in their community by fundraising for PCFA. The Club first formed a subcommittee and \$2,000 was put aside to get the event under way. Within three months of canvassing Ipswich businesses the Club had \$15,500 worth of quality products and a 6x4 trailer to put them all in.

Companies such as Battery World, Economy Trailers, Snap on Tools, Coolana Contracting on PRO-ex each gave more than \$1,000 worth of products. The Boonah business community was also very generous with its donations.

The goods were raffled off over a year with the competition yielding \$22,000 to PCFA.



COMMUNITY FUNDRAISING HIGHLIGHTS



Community Fundraising Highlights

NSW & ACT

2012

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER



Thies Blue Truck

The Thies Mount Owen Mine painted one of its heavy duty dump trucks blue and distributed blue high vis vests for all staff to wear within the mining company. The campaign, which ran for a month in June 2012, raised just shy of \$20,000 and much needed awareness of prostate cancer across this predominantly male industry.

Noel and Jeanette Cox

Noel and Jeanette have been heavily involved with PCFA, running and supporting the Illawarra Prostate Cancer Support Groups and the Batemans Bay Prostate Cancer Support Groups (PCSG). When one

of Noel's dear friends and support group member passed away from prostate cancer, Noel and Jeanette decided to fundraise for PCFA. Their first event was a Gala Dinner called 'Reach for the Stars', which raised an incredible \$32,311. This was followed by a prostate cancer information session which raised \$6,300. Noel and Jeanette are a well-respected and inspirational couple who have gone above and beyond at every opportunity to support PCFA.

Mango Auction

PCFA has been the beneficiary charity of the auction of the season's first mangos since 2009. This year, Tony Abbott made an appearance and auctioned off the mangoes to

the highest bidder for an incredible \$30,000. Tony Abbott and Joe Hockey stopped by the PCFA tent and placed their thumb prints of support on PCFA's huge artwork dedicated to men who have died from prostate cancer. To date PCFA has received more than \$95,000 from this fantastic partnership with Sydney Markets Foundation.

The Victory Ball

The Victory Ball was held at The Victoria Army Barracks at Paddington in September 2012. Two hundred and thirty guests, including Air Chief Marshal Angus Houston, attended the three course dinner and dance and together raised over \$30,000. The organising committee consisted of Peter Iannazzo, Sally Osborne, Di McKenzie, Alexandra Mayhew, Charlie Barnett, Wendy Farrow, Cassandra Birch and Anne Thomas.



2013

JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE



That's a Dam Good Beard

Brandon Perrin, Ryan Madden & Jayden Cotte started the fundraising initiative called the 'Dam Good Beard'. Together they decided to grow beards and not shave until the completion of the Cotter Dam project on which they were all working during 2012. This ended up with them growing beards for six months and raising \$44,000 along with creating an immense amount of awareness through their mining companies.

Scott Jeffery

Scott Jeffery is a 34-year-old Northern Beaches boy who in 2011/12 spent 440 lonely days covering 23,000km on his bicycle from his father's birth place in Kent in the United Kingdom to his birthplace at Mona Vale Hospital in Sydney. Scott raised a truly inspiring \$7,000 and spread awareness of prostate cancer throughout his journey.

Chris Carter

Being the face of younger men diagnosed with prostate cancer, Chris Carter has held two events to create much needed awareness and funds for PCFA in his local community. Collectively the events have raised \$18,000. He is now a PCFA ambassador with his own personal journey with prostate cancer featuring in our Big Aussie Barbie 2013 campaign.

ICAP Charity Day

PCFA was lucky enough to be one of 14 Australian charities to benefit from the 20th ICAP Charity Day on 5th December 2012. We were the recipient of \$50,000 from the day's trade which saw the greatest return to date through the donation of revenues and commissions. Thanks to the efforts of ICAP customers, staff and suppliers, an amazing £11

million / US\$ 17.7 million was raised internationally. PCFA was thrilled to join the event at the ICAP Sydney office with PCFA celebrity supporters Angry Anderson and Les Hill.

Pirtek Fishing Challenge

PCFA received very generous support from Pirtek through the Pirtek Fishing Challenge. This year was the biggest ever, with 7,500 anglers from all over Australia - mums, dads, kids and grandparents - chasing species from golden perch to barramundi in a one-day fishing challenge unlike any other competition. The event raised \$150,000 for PCFA.



COMMUNITY FUNDRAISING HIGHLIGHTS



Community Fundraising Highlights

VIC & TAS

2012

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER



Run For Dad

The inaugural Run for Dad was held on Father's Day in Bendigo and proved to be an enormous success yet again in 2013. It featured almost 300 registered runners and raised more than \$4,000. Bendigo's Biggest Loser father and son, Gerald and Todd Nester, were the faces for this year's event. Special thanks to Mark Nally and his committee at St John of God Hospital for creating such a wonderful father and son event.

'Hope For Tomorrow' Annual Dinner Dance

Robert Troiani and the Hope for Tomorrow committee created an annual fundraising dinner event in Melbourne to promote prostate cancer awareness. The nights have always been sell-out events and to date have raised more than \$100,000 for PCFA in the 7 years it has been running.



2013

JANUARY

FEBRUARY

MARCH

APRIL

MAY

JUNE



Simon's Prostate Cancer Ball

Stuart Ralph created Simon's Prostate Cancer Ball in memory of his father. The event, held in Hobart, is now in its fourth year and has raised more than \$43,000 for PCFA to date. It is always a huge success and provides a fun evening showcasing comedic entertainment and other local talents.

Rotary Club of Altona City Bike Ride

Members of the Rotary Club of Altona City rode their bicycles from Sydney to Melbourne in one week in April to raise awareness about prostate cancer. PCFA admires their efforts and training to undertake such a challenge. Together they raised close to \$6,000.



Whisky Live

PCFA has been lucky to benefit from Whisky Live since 2012, with over \$13,000 raised. Whisky Live, a Whisky tasting event showcasing prime aged local and imported whiskies, travels throughout Australia each year, with exhibitors donating a bottle of their whisky to the Big Whisky raffle.



COMMUNITY FUNDRAISING HIGHLIGHTS



Community Fundraising Highlights

WA, SA & NT

2012

JULY

AUGUST

SEPTEMBER

OCTOBER

NOVEMBER

DECEMBER

Chevron City to Surf (WA)

PCFA gathered a team of supporters to walk the City to Surf route together, all dressed in PCFA singlets and caps, raising the profile of PCFA. WA Support Groups and our WA prostate cancer specialist nurse also joined the team, which raised \$3,800.

September Big Aussie Barbie Launch (WA)

Mike Hussey attended as WA ambassador for the Big Aussie Campaign in Perth. The event was a wonderful success and presented a great opportunity to strengthen relationships with Corporate Partners and other community supporters, as well as raising \$8,950.

Roughrider Rudling Golf Day (WA)

In honour of Peter Rudling, a former client of both Giles Partners and Interwest who lost his life to prostate cancer, this annual event raises awareness and funds for prostate cancer. This year it raised \$10,175.



Office fit-out (WA)

Warmly received funds of \$61,250 from a Lotterywest Grant allowed completion of the new WA office fit-out. The new office fit-out provided the WA team with a boardroom, a meeting room and three work stations in an open plan arrangement. We thank Lotterywest for their generous support.

Round the Rock (WA)

A team of three set off on two motorbikes with a support vehicle, travelling over 30,000km around Australia covering all States and Territories, raising awareness of prostate cancer along the way. Along with a pre-trip raffle and event, the team raised \$9,500.

2013

JANUARY

Doc Henning (WA)

Doc gains great support from his local communities and has been a much valued community fundraiser for PCFA for several years. People and businesses in the Rockingham, Mandurah and surrounding areas have very generously supported his fundraising efforts on an ongoing basis. This past year Doc has raised over \$8,800, taking his total fundraising for PCFA over \$30,000.



FEBRUARY

MARCH

The Good Guys (SA)

The national electrical retail chain The Good Guys confirmed PCFA as one of its charities of choice. Its Local Giving Program has raised over \$5million in recent times, donated to more than 150 local community organisations around Australia. PCFA is thrilled to be associated with The Good Guys in SA. An added bonus to the relationship was the news that PCFA would continue to be supported into 2014.

Joint Promotions (SA)

Big cheques were received in the first half of the year from joint promotions and events including \$10,000 from Robern Menz GIANT FruChocs campaign with Triple M, Channel 9, GEM and GO TV, including numerous SA identities and celebrities such as Wayne Phillips, Mark Woodforde, Roger Rasheed, Dario Vidosic, Mitch Creek and Brett Maher. Nearly \$17,000 was received from the Saverglass Wickets for Wine cricket event with superstar Stuart MacGill, while \$2,400 came from the Association of Financial Advisors. The Coopers WIN TV Golf Day in Mt Gambier yielded around \$15,000, with funds benefiting the local community.

APRIL

MAY

Celebration Homes Beard Off (WA)

Male staff at Celebration Homes were given one month to grow a beard and raise funds for prostate cancer. Awards were given to the best beards at the end of the month. Staff did a fantastic job raising \$6,500 for PCFA.

Tony Brebners Camino for Cancer (WA)

It was an incredible effort by Tony, a prostate cancer survivor; Tony walked the Camino de Santiago, an 800km pilgrimage from St Jean Pied du Port in France to Santiago de Compostela in northern Spain, raising funds for PCFA, and raised \$9,560.



JUNE

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BOARDS AND COMMITTEES

National Board

National Chairman:
David Sandoe OAM

National Deputy Chairman:
Jim Hughes AM

Roz Baker

Steve Callister

Distinguished Professor
Judith Clements

Peter Gebert

David Gregory – *to November 2012*

Des Grogan – *to September 2012*

Chris Hall

Dr David Malouf

Emeritus Professor Villis Marshall AC

Professor John Mills

John Palmer

Tony Sonneveld OAM

Associate Professor Phillip Stricker
– *to November 2012*

Finance & Operations Committee

Chairman: Chris Hall

Jim Hughes AM

David Sandoe OAM

Graeme Johnson

John Palmer

Associate Professor Anthony Lowe

Helen Falconer

Awareness & Education

Chairman: Dr David Malouf

Julie Sykes

Associate Professor Anthony Lowe

Dr Tim Wong

David Sandoe OAM

Research

Chairman: Professor John Mills

Dr Bruce Kynaston Consumer
Representative

Associate Professor Richard Pearson

Professor Suzanne Chambers

Professor Robert (Frank) Gardiner AM

Associate Professor Howard Gurney

Associate Professor Susan Henshall

Associate Professor Lisa Horvath

Professor Peter Leedman

Professor Afaf Girgis

Professor Pamela Russell AM

National Support Group Committee

Chairman: David Sandoe OAM

Terry Harbour – *to October 2012*

Ian Wagner – *from November 2012*

Terry Koltasz

Dr Bruce Kynaston

Associate Professor Anthony Lowe

Bill Richmond

Terry Wheeler – *to June 2013*

Dr Ray Dart – *from June 2013*

State Boards

New South Wales & Australian Capital Territory State Board

Chairman: Tony Sonneveld OAM

Neil Adams - *to February 2013*

Charlie Barnett

Jack Fraenkel

Peter Haylen

Dr Michael Izard

The Hon. Jim Lloyd - *to May 2013*

Mike McClellan

David Nomchong

Graeme Postlethwaite
- *to August 2013*

Dr Ray Dart - *from August 2013*

Marty Rhone - *to August 2012*

Lyn Thurnham

Victoria & Tasmania State Board

Chairman: Peter Gebert

Graeme Johnson

Darren Alexander

Mike Brady AM

Jonathon Oppy

David Schmidt

Geoff Underwood

Bill Richmond

Steve Whelan - *to June 2013*

Chris McPherson - *from July 2013*

Professor Gail Risbridger
- *from July 2013*

Dr Nathan Lawrentschuk
- *from July 2013*

Peter Antonius - *from July 2013*

Western Australia State Board

Chairman: Roz Baker

Deputy Chair: Bill Munro

Terry Koltasz

Jeffery Leach

Adrian Lester

Dr Ken Michael AC

Dr Siobhan Ng

Dr Tom Shannon

Morgan Soloman

Queensland State Board

Chairman: Distinguished Professor
Judith Clements

Warren Cameron

Dr Bruce Kynaston

Ian Smith

Mark Irwin - *from June 2013*

Jim Hughes AM - *to December 2012*

South Australia & Northern Territory State Board

Chairman: Emeritus Professor
Villis Marshall AC

Margie Andrewartha

David Baker

Michael Barrett

The Hon Nick Bolkus

Michael Brock

Helen Dundon

Peter Hurley

Justin Jamieson

Jeff Roberts

Dr Peter Sutherland

Will Taylor

Steven Trigg

Dr Dick Wilson

David White

STAFF

CEO's Office

Associate Professor Anthony Lowe	Chief Executive Officer
Kelly Foster	Executive Assistant
Ross Anderson	National Office Coordinator

Research

Associate Professor Miranda Xhilaga	Director, Research Programs
Anne Maerz	Research Programs Coordinator

Health Programs and Education

Julie Sykes	Director, Health and Education Programs
Vanessa Purkiss	Health and Education Programs Administrator
Dr Tim Wong	Senior Project Officer, Health and Education
Tim Earnshaw	Project Officer, Health and Education
Katie Dundas	Project Support Administrator, Health and Education
Jessica Roberts	Project Officer, Rural Education Roadshow
Suzanne Flynn	Coordinator of Nursing

Support Network

Charlotte Houghton	Project Support Administrator, Support Groups
Carla Demos	Administrator, Support Group Operations
Evan Kallipolitis	Support Group & Outreach Program Coordinator, NSW/ACT
Emilia Hay	Support Group & Outreach Program Coordinator, WA
Amanda Pomery	Support Group & Outreach Program Coordinator, VIC/TAS
Ian Richards	Support Groups & Outreach Program Coordinator, SA/NT
Lorraine Hagaman	Support Groups & Outreach Program Coordinator, QLD

Marketing & Fundraising

Adrian Mitchell	Supporter Services Manager
Merran Davies	Supporter Care & Database Assistant
Janett Hanisch	Individual Giving Manager
Kathryn Jones	Community Fundraising & Campaigns Manager
Suzanne Benson	Big Aussie Barbie Campaign Manager
Cassandra Birch	National Fundraising Coordinator
Graeme Higgs	State Manager, Queensland
Paula Truesdale	Office and Events Coordinator, QLD
Tracey Cullen	Office & Events Coordinator, VIC/TAS
Cate Harman	State Manager, WA
Belinda Katz	Office and Events Coordinator, WA
Salima Garcia	Office & Events Coordinator, WA
Karyn Foster	State Manager SA/NT
Ramin Tehrani	Online Manager (<i>from August 2013</i>)
Kris Alisch	Corporate and Individual Philanthropy Manager

Finance & Operations

Helen Falconer	Financial Controller
Lynn Li	Accountant
Stephanie Sin	Finance Officer

Human Resources

Priya Subrahmanyam	Manager, Human Resources
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ANICE

FINANCIAL HIGHLIGHTS

The audited consolidated financial statements for the year ended 30 June 2013 are included in this report. These financial highlights are intended to provide an overview of the financial statements and to highlight matters of interest. They are not intended to replace or modify the content of the separate audited consolidated financial statements.

FUNDRAISING INCOME
IN 2012/13
REACHED
\$12.3M

PCFA has fundraising income from:

Movember

Events – including *The Big Aussie Barbie* and community fundraising events

Individual Giving – including direct mail, major gifts, monthly pledges and bequests

Government and Other Grants

Trusts and Foundations

Corporate Partnerships

Merchandise Sales

The distribution between these categories in 2012/13 was:

	Income (\$000)	Percentage of Fundraising Income (%)
Movember	5,000.0	40.7
Events	3,115.7	25.3
Government and Other Grants	1,652.2	13.4
Individual Giving	1,435.6	11.7
Trusts and Foundations	635.1	5.2
Corporate Partnerships	447.8	3.6
Merchandise Sales	15.9	0.1
Total	12,302.3	100.0

The principal activities of PCFA during the 2012/13 financial year were focused on reducing the impact of prostate cancer on Australian men, their partners, families and the wider community.

PCFA continued to benefit from generous support provided by The Movember Foundation. The funds provided by Movember continued to support PCFA's research program. Movember has also provided support for PCFA's Prostate Cancer Specialist Nursing Program.

Income from community fundraising activities continued to be an important source of funds. Community involvement in and support of fundraising activities events saw event income grow to \$3.1 million in 2012/13.

The Federal Government continued to provide funding to strengthen and grow PCFA's Affiliated Support Group Network, develop evidence-based information and educational resources, and to devise and implement easily accessible web based resources through internet based social network tools. Additional funding from the Federal Government via the Department of Health and Ageing enabled the "Prostate Cancer Rural Education Road Show" project to commence during the 2012/13 financial year.

The level of income received from Trusts and Foundations and from Corporate Partnerships also grew during the 2012/13 financial year.

Investments

PCFA raises in full the amount required to fund research grants before committing to funding grants. The funds raised are then invested over the duration of the grant period and released in periodic intervals.

PCFA's investment policy is to hold short term funding requirements on deposit at the Commonwealth Bank where they are available for immediate withdrawal without penalty. The balance of funds is invested in Commonwealth Bank term deposits. In addition, PCFA has a small managed investment portfolio with Macquarie Bank which is in the process of being sold.

At 30 June 2013 the cash investments amounted to \$14.1 million and the managed investment portfolio amounted to \$198,798. During the year PCFA benefited from investment income of \$534,264.

Fundraising costs \$1.389 million, or 11% of fundraising income

PCFA endeavours to control costs, and benefit from donated goods and services whenever possible. Direct fundraising costs were \$1.389 million or 11% of fundraising income.

Future commitments to research grant funding and Prostate Cancer Specialist Nursing Program of \$9.6 million

At 30 June 2013 future commitments to research grant funding and the Prostate Cancer Specialist Nursing Program amounted to \$7.6 million and \$2.0 million respectively.

DIRECTORS' REPORT

Your directors present their report together with the consolidated financial statements of the Group, which comprises Prostate Cancer Foundation of Australia Limited and its controlled entity Prostate Cancer Foundation of Australia ("PCFA") for the year ended 30 June 2013.

Directors

The names of each person who has been a director during the year and to the date of this report are:

Mr David Sandoe OAM - Chairman	
Ms Rosalind Baker	
Mr Steve Callister	
Distinguished Professor Judith Clements	Appointed 12/8/2012
Mr Peter Gebert	Appointed 24/10/2012
Mr David Gregory	Retired 8/11/2012
Mr Des Grogan	Retired 30/9/2012
Mr Chris Hall	
Mr Jim Hughes AM	
Dr David Malouf	
Emeritus Professor Villis Marshall AC	
Professor John Mills	
Mr John Palmer	
Mr Tony Sonneveld OAM	
Associate Professor Phillip Stricker	Retired 6/11/2012

Directors have been in office since the start of the year to the date of this report unless otherwise stated.

Company Secretary

Dr Anthony Lowe held the position of Company Secretary at the end of the financial year.

Principal Activities

The principal activities of PCFA during the 2012/13 financial year were focused on reducing the impact of prostate cancer on Australian men, their partners, families and the wider community. We did this by:

- Promoting and funding world leading, innovative research into Prostate Cancer
- Implementing awareness campaigns and education programs for the Australian community, health professionals and Government; and
- Supporting men and their families affected by prostate cancer through evidence-based information and resources, support groups and Prostate Cancer Specialist Nurses.

PCFA continued the Specialist Nursing Program with funds provided from Movember and also continued the project "Supporting men with Prostate Cancer through evidence-based resources and support" with funds provided from the Australian Government. The project "Prostate Cancer Rural Education Road Show" was commenced with funds from the Chronic Disease Prevention and Service Improvement Fund developed by the Commonwealth of Australia as represented by the Department of Health and Ageing.

Members Guarantee

In accordance with the company's constitution, each member is liable to contribute \$10 in the event the company is wound up. The total amount members would contribute is \$1,050.

Operating Result

The operating surplus / (deficit) of PCFA for the year ended 30 June 2013 amounted to \$1,265,531 (2012: \$(980,983)).

Dividends

PCFA is limited by guarantee and is not permitted to pay dividends.

Review of Operations

PCFA's operations for the year resulted in a surplus of \$1,265,531 (2012 deficit of \$980,983) after the approval of research grants and specialist nursing program totalling \$4.19 million (2011/12 \$8.21 million). PCFA deliberately allocated funds to the Specialist Nursing Program and has undertaken the activities funded by the Australian Government in order to expand the activities that are consistent with PCFA's mission of reducing the impact of prostate cancer on the Australian community.

A detailed review of operations can be found in the annual report which accompanies this financial report.

Significant Changes in State of Affairs

No significant changes to PCFA's state of affairs occurred during the financial year.

After Balance Date Events

No further matters or circumstances have arisen since the end of the financial year which significantly affected or may affect the operations of PCFA, the results of those operations, or state of affairs of PCFA in future financial years.

Future Developments

PCFA expects to maintain the present status and level of operations and hence there are no likely significant developments in PCFA's operations.

Environmental Issues

PCFA's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a State or Territory.

Objectives

PCFA's objectives are:

- Be the peak independent body driving research into prostate cancer
- Improve early detection rates
- Be known as the best source for support and information regarding prostate cancer
- Be a sustainable organisation capable of delivering the mandate now and in the future

To achieve these aims PCFA has continued to fund high quality research through its national grants program, as noted above; promoted and supported the establishment of additional support groups which, nationally, now number in excess of 140; and raised awareness of prostate cancer through the production of several new publications and our regular newsletter, all of which are accessible via the PCFA website.

Options

No options over issued shares or interests in PCFA were granted during or since the end of the financial year and there were no options outstanding at the date of this report.

Information on Directors

Mr David Sandoe OAM

- Dip. BIA, MBA, ANZIIF (Fellow), CIP, MCMI, FAIM, FAICD

David is the National Chairman of PCFA, Acting Chairman of PCFA's National Support Groups Committee, Chairman of Foundation Diane, Chairman of ACT Insurance Authority Advisory Board and Co-leader with his wife Pam of the Sydney Adventist Hospital - Prostate Cancer Support Group Network. He is also a member of Defence Service Homes Insurance Authority Advisory Board.

He has held various Chairmanships, board and committee roles with Cancer Voices NSW, Cancer Voices Australia, PCFA's Support and Advocacy Committee - Public Awareness and Education Committee and the NSW Board, the Institute of Magnetic Resonance Research, Cancer Council of NSW and the Cancer Institute's NSW Oncology Group - Urology.

He retired from his roles as General Manager and a Principal of Finity Consulting Pty Limited, an Australasian specialist general and health insurance actuarial and management consulting practice on the 31/12/12. David has also held a number of insurance industry senior executive roles in Australia, New Zealand, UK and Ireland and is a former President of the Australian & New Zealand Institute of Insurance and Finance and a former National President of the Swiss Australian Chamber of Commerce. He is an honorary life member of both organisations.

Ms Rosalind Baker

- Advanced Cert of Business (Real Estate), Counselling Diploma

Rosalind built a successful real estate and export company in Zimbabwe for 20 years. Since arriving in Australia

17 years ago, she has been property developer and business broker, now with Ellis Corporate assisting migrants to find businesses and investments. A member of Perth Rotary Club she is involved with community projects that train or mentor students and entrepreneurs. Rosalind represented Rotary on the WA Board of PCFA following her husband's affliction with prostate cancer, and was subsequently invited to become the chair in 2012. Member of REIWA, BBAWA and CCI.

Mr Steve Callister

- B.Bus., MBA, FCPA, FAICD, FAIM

Steve is Managing Director and Partner of an import wholesale company, dealing with all major retailers in Australia and New Zealand. Former roles include Convenor of St Vincent's Prostate Cancer Support Group, Chairman of the NSW SAC, delegate to the National SAC and Chairman of the NSW Board. Steve became Chairman of PCFA's Marketing and Fundraising Committee of the National Board in May 2009.

Distinguished Professor Judith Clements

- BASc., MASc., PhD (Endocrinology)

Judith leads the Cancer Program at the Institute of Health and Biomedical Innovation, Queensland University of Technology (QUT), based at the Translational Research Institute on the Princess Alexandra Hospital Biomedical Precinct. She is also the Scientific Director at the Australian Prostate Cancer Research Centre - Queensland (APCRC-Q), a dedicated prostate cancer research centre that is a collaboration between QUT and the Princess Alexandra Hospital. Judith is the Chair of the virtual

national prostate cancer tissue bank – the Australian Prostate Cancer Bio Resource, which is an important resource that underpins prostate cancer research nationally – and is co-leader of the Queensland node of the international genetics study for prostate cancer, PRACTICAL. She is a two-time winner of the Alban Gee Prize from the Urological Society of Australasia, and has also been the recipient of the QUT Vice Chancellor's Award for Research Excellence. She was recently awarded the Queensland Women in Technology Biotech Outstanding Achievement Award for 2012.

Mr Peter Gebert

Peter has been employed in various Executive and Managerial roles with Cbus from 1996 to 2012. Previously he worked within superannuation institutions and served ten years in the Army Reserve reaching the ranking of Captain. He has been involved with PCFA for over seven years and is currently Chair of the Vic/Tas Board. He has been a Victorian Chapter Council member for six years and was the Chair of the National Support and Advocacy Committee. Peter is also a convener of a Prostate Cancer Support Group in Melbourne.

Mr David Gregory

David worked as National Sales Manager, Golden Poultry Farming Industries, Ingham's Enterprises, Goodman Fielder and others prior to setting up as a Food Broker to the Foodservice Industry. David worked as a volunteer for the Cancer Council Tasmania, and has had the role of Convenor of the Hobart Support Group and was elected to the VIC/TAS Chapter Council (Deputy Chairman) and as SAC Representative

for Tasmania. He was further elected to the Chair of the National Support & Advocacy Committee in 2010 and the Chair of the newly formed National Support Groups Committee in January 2012.

Retired from the board 8/11/2012.

Mr Desmond Grogan

– Dip.C.E., M.Eng. Sc., Fellow VPELA

Desmond retired from the Consulting Engineering practice he founded after a career as a Civil & Traffic Engineer. At retirement the practice had grown to a multi-disciplinary group of 120 people with offices in Brisbane and Melbourne, where it was the largest traffic engineering group in Victoria.

Desmond joined the Victorian PCFA board in late 2005 and was trained as an ambassador in the pilot study initiated by the PCFA.

Retired from the board 30/9/2012.

Mr Chris Hall

– B.Comm. (Hons), CA

Chris joined the Board of PCFA in May 2007 as Finance Director. He is a partner and member of the National Executive Committee of KPMG, having previously been a board member. He was also a member of the Australian Auditing and Assurance Standards Board, until January 2011.

Mr Jim Hughes AM

– GAICD, Snr Assoc. ANZIIF

Jim has held senior positions in the insurance industry throughout Australia over many years and is actively involved in community activities. He is a Senior Associate of the Australian and New Zealand Institute of Insurance and Finance and a Graduate of the Australian Institute of Company

Directors. He also lectures on corporate risk management and business strategy formulation on behalf of the Australian Institute of Company Directors. Jim is a Director of Youi Insurance. He is a Director of the Apex Foundation of Australia and a Life Governor of the Apex Clubs of Australia. Jim is currently the Deputy National Chairman of PCFA.

Dr David Malouf

– MBBS, FRACS (Urol)

David graduated from the University of Sydney in 1990. He completed his Urology training in Sydney prior to undertaking a Fellowship year at the Hammersmith Hospital in London, specialising in surgical oncology and renal transplantation.

His special interests include uro-oncology, brachytherapy for prostate cancer, erectile dysfunction and the management of urinary tract calculi.

David is a Past President of the Urological Society of Australia and New Zealand and a past Chair of the Australian and New Zealand Association of Urological Surgeons. He is the Chair of the Awareness and Education Committee of the Prostate Cancer Foundation of Australia. He serves on the Board of the Australasian Brachytherapy Group and is a Director of the British Journal of Urology International. In addition to being a member of the Urological Society of Australia and New Zealand, David is a member of the European Association of Urology, the American Urological Association, and an Honorary Member of the British Association of Urological Surgeons.

He is a clinical teacher at the University of New South Wales Medical School and is a VMO at St George Hospital, Hurstville Private Hospital and The Mater Private Hospital.

Information on Directors (continued)

Emeritus Professor Willis Marshall AC

- MBBS, MD (Adel), FRAC

Villis is Chair of the Australian Commission on Safety and Quality in Health Care, Commissioner for the Health Services Gifts Board, Clinical Professor of Surgery Adelaide University. He was previously General Manager of the Royal Adelaide Hospital, Sub Prior of the Order of St John, and Chairman of the Australian Cancer Network for the development of guidelines for the management of advanced prostate cancer. Villis is Past President of the Urological Society of Australia and New Zealand and Chair of Kidney Health Australia. He was also Director of Surgical and Specialty services at the Royal Adelaide Hospital and Director Freemason's Centre for Men's Health.

Professor John Mills

- SB (Chicago), MD (Harvard), FACP, FIDSA, FRACP, ARCPA

John is a specialist physician, internationally-recognized scientist and biotech businessman. He currently holds positions as the Professor of Medicine, Epidemiology & Microbiology, Monash University; Professor of Microbiology, RMIT; Consulting Physician, Alfred Hospital and several positions on biotechnology venture capital and company boards. From 1992 to 2002 he was Director of the Burnet Institute for Medical Research and Public Health. Prior to immigrating to Australia he was Professor of Medicine, Microbiology, Laboratory Medicine and Clinical Pharmacy at the University of California, San Francisco. He is the Director of Research and Development at Tissupath Specialist Pathology; in that position he has

co-authored five research papers on prostate cancer since 2010.

Mr John Palmer

- B.A, B.Sc. App (Building) Class 1 Hons, FAIM, FAIB, MIAA, Chartered Builder, JP.

John is a Past President of the Rotary Club of Lane Cove and a Rotarian of 35 years. In 1997 he was the second Chairman of PCFA. He is a retired Associate Lecturer University of Technology Sydney. John is a Chartered Builder and the owner and sole director of Building Durability Pty Ltd, T A Taylor (Aust) Pty Ltd and Research & Applied Technologies Pty Ltd. In 1991 John established a joint venture with and was a Board Member of the TIANAO Building Repair Materials Institute in Tianjin China until 2002.

Mr Tony Sonneveld OAM

- Dip. Met. RMIT

As a qualified metallurgist, Tony has held several managerial / directorship positions in construction related businesses around Australia, New Zealand and South East Asia over the past 40 years. He has honorary memberships in Australian Institute for Non Destructive Testing, International Committee for NDT, Officer Training Unit, Scheyville Army Association, and Victoria Barracks Officers' Mess.

In August 2007, Tony joined the NSW Board of PCFA as a Consumer Advocate and Ambassador Speaker to actively promote prostate cancer awareness, education and fund raising and became NSW Chairman in May 2009. He is a member of ANZUP Consumer Advisory Panel and participates in the Cancer Council

NSW Annual Strategic Research Partnership Grants Consumer Review of Applications.

Associate Professor Phillip Stricker

- MBBS (New South Wales) (Honours), FRACS

Phillip is an international expert on the management of prostate cancer, one of Australasia's most experienced.

His current interests are in maximizing clinical outcomes, new forms of therapy, and imaging and perfecting surgical techniques to maximize potency in prostate cancer. In addition, he has been an integral part of education to GPs and the public in the areas of prostate cancer with his book written with Professor Kerryn. Phelps, now in its third edition.

Phillip is Clinical Director of The National Prostate Cancer Research Centre NSW, Chairman of the Department of Urology at St Vincent's campus in Sydney, and the Director of the St Vincent's Prostate Cancer Centre, of which he is also chairman of the Fellowship Training Program and was an inaugural director of the National Board of the Prostate Cancer Foundation of Australia.

Retired from the board 6/11/2012.

Meetings of Directors

During the year, 4 meetings of directors were held. Attendances by each director were as follows:

Directors Meetings attended	Eligible to attend	Number
Mr David Sandoe OAM	4	4
Ms Rosalind Baker	4	4
Mr Steve Callister	4	4
Distinguished Professor Judith Clements	4	4
Mr Peter Gebert	3	3
Mr David Gregory	2	2
Mr Des Grogan	1	1
Mr Chris Hall	4	4
Mr Jim Hughes AM	4	4
Dr David Malouf	4	3
Emeritus Professor Villis Marshall AC	4	2
Professor John Mills	4	3
Mr John Palmer	4	4
Mr Tony Sonneveld OAM	4	4
Associate Professor Phillip Stricker	2	0

DIRECTORS' REPORT

Indemnifying Officers or Auditor

During the financial year, PCFA paid a premium of \$4,400 (2012: \$4,400) to insure the directors and secretaries of the company and its controlled entities.

The liabilities insured are legal costs that may be incurred in defending civil or criminal proceedings that may be brought against the officers in their capacity as officers of entities in the group, and any other payments arising from liabilities incurred by the officers in connection with such proceedings. This does not include such liabilities that arise from conduct involving a wilful breach of duty by the officers or the improper use by the officers of their position or of information to gain advantage for themselves or someone else or to cause detriment to the company. It is not possible to apportion the premium between amounts relating to the insurance against legal costs and those relating to other liabilities.

Proceedings on Behalf of PCFA

No person has applied for leave of Court to bring proceedings on behalf of PCFA or intervene in any proceedings to which PCFA is a party for the purpose of taking responsibility on behalf of PCFA for all or any part of those proceedings. PCFA was not party to any such proceedings during the year.

Auditor's Independence Declaration

The lead auditor's independence declaration for the year ended 30 June 2013 as required under section 307c of the Corporations Act 2001 has been received and can be found on page 71.

Auditor

PWC continues in office in accordance with section 327 of the Corporations Act 2001.

Signed in accordance with a resolution of the Board of Directors.



Chris Hall

Director

Dated this 22nd day of October 2013

Sydney, NSW

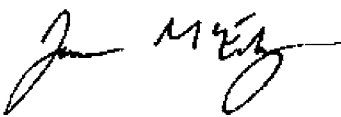
AUDITOR'S INDEPENDENCE DECLARATION

Auditor's Independence Declaration

As lead auditor for the audit of Prostate Cancer Foundation of Australia Limited for the year ended 30 June 2013, I declare that to the best of my knowledge and belief, there have been:

- a) no contraventions of the auditor independence requirements of the *Corporations Act 2001* in relation to the audit; and
- b) no contraventions of any applicable code of professional conduct in relation to the audit.

This declaration is in respect of Prostate Cancer Foundation of Australia Limited and the other entities it controlled during the period.



James McElvogue

Partner
PricewaterhouseCoopers

Dated this 22nd day of October 2013
Sydney, NSW

Liability limited by a scheme, approved under Professional Standards Legislation.

CONSOLIDATED STATEMENT OF COMPREHENSIVE INCOME

FOR THE YEAR ENDED 30 JUNE 2013	Note	2013	2012
		\$	\$
Revenue	4	12,885,652	13,211,425
Administration employee benefit expenses		(1,691,670)	(1,489,869)
Direct fundraising expenses		(1,389,007)	(915,127)
Direct support group expenses		(699,459)	(707,023)
Research grants & Specialist Nursing Program		(4,189,120)	(8,211,278)
Direct awareness activity expenses		(698,503)	(969,269)
Project and other administration expenses		(2,860,459)	(1,875,695)
Loss on sale of financial assets		(91,903)	(24,147)
Surplus/ (Deficit) before income tax		1,265,531	(980,983)
Income tax expense	2 (o)	-	-
Surplus/ (Deficit) after income tax		1,265,531	(980,983)
<i>Other Comprehensive Income</i>			
Items that will be reclassified subsequently to profit and loss when specific conditions are met:			
Loss on revaluation of available for sale financial assets		(9,438)	(55,656)
Total comprehensive income/(loss) for the year		1,256,093	(1,036,639)

The accompanying notes form part of these consolidated financial statements.

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

AS AT 30 JUNE 2013	Note	2013	2012
		\$	\$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	6	14,174,500	15,095,467
Trade and other receivables	7	3,808,938	3,962,978
Other current assets	8	327,594	452,294
Inventory	9	73,683	103,871
TOTAL CURRENT ASSETS		18,384,715	19,614,610
NON-CURRENT ASSETS			
Financial assets	10	204,454	930,089
Plant and equipment	11	246,204	212,183
Leasehold Improvements	11	112,928	8,756
TOTAL NON-CURRENT ASSETS		563,586	1,151,028
TOTAL ASSETS		18,948,301	20,765,638
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	12	716,715	769,090
Research grants payable	13	4,925,415	5,840,289
Specialist Nursing Program payable	13	1,233,884	1,137,493
Provisions	14	90,959	55,477
TOTAL CURRENT LIABILITIES		6,966,973	7,802,349
NON-CURRENT LIABILITIES			
Trade and other payables	12	91,780	25,851
Research grants payable	13	2,689,883	3,618,737
Specialist Nursing Program payable	13	799,881	2,237,792
Provisions	14	36,557	65,678
TOTAL NON-CURRENT LIABILITIES		3,618,101	5,948,058
TOTAL LIABILITIES		10,585,074	13,750,407
NET ASSETS		8,363,227	7,015,231
EQUITY			
Reserves	15	(51,888)	(134,353)
Retained earnings		8,415,115	7,149,584
TOTAL EQUITY		8,363,227	7,015,231

The accompanying notes form part of these consolidated financial statements.

CONSOLIDATED STATEMENT OF CHANGES IN EQUITY

FOR THE YEAR ENDED 30 JUNE 2013	Note	Retained Earnings	Asset Revaluation	Total
		\$	\$	\$
Balance at 30 June 2011		8,130,567	(90,688)	8,039,879
Total comprehensive income		(980,983)	(55,656)	(1,036,639)
Reserve written back on realisation of financial assets		-	11,991	11,991
Balance at 30 June 2012		7,149,584	(134,353)	7,015,231
Total comprehensive income		1,265,531	(9,438)	1,256,093
Reserve written back on realisation of financial assets		-	91,903	91,903
Balance at 30 June 2013		8,415,115	(51,888)	8,363,227

The accompanying notes form part of these consolidated financial statements.

CONSOLIDATED STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 30 JUNE 2013	Note	2013	2012
		\$	\$
CASH FLOWS FROM OPERATING ACTIVITIES			
Receipts and contributions from the public and government		12,997,326	10,678,920
Payments to suppliers and employees		(7,639,241)	(5,774,712)
Research grants and Specialist Nursing Program paid		(7,374,368)	(7,007,829)
Interest and distributions received		584,610	1,096,825
Net cash (used in) operating activities	20	(1,431,673)	(1,006,796)
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from investments		740,084	307,294
Payments for investments		(23,887)	(14,739)
Payments for plant and equipment		(205,491)	(54,667)
Proceeds from disposal of plant and equipment		-	24,440
Net cash generated in investing activities		510,706	262,328
Net increase in cash held		(920,967)	(744,468)
Cash at the beginning of the financial year		15,095,467	15,839,935
Cash at the end of the financial year	6	14,174,500	15,095,467

The accompanying notes form part of these consolidated financial statements.

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

Note 1: Corporate Information

The financial report of Prostate Cancer Foundation of Australia for the year ended 30 June 2013 was authorised for issue in accordance with a resolution of the directors on 16 October 2013.

Prostate Cancer Foundation of Australia Limited (the Company) is a company domiciled in Australia, the sole activity of which is to act as the corporate trustee of Prostate Cancer Foundation of Australia (the Trust). The consolidated financial statements

as at and for the year ended 30 June 2013 comprise the Company and the Trust, collectively referred to as PCFA. PCFA is a not for profit entity.

The nature of the operations and principal activities of PCFA are described in the Directors' Report.

Note 2: Statement of Significant Accounting Policies

Basis of Preparation

The financial report is a general purpose financial report that has been prepared in accordance with Australian Accounting Standards-Reduced Disclosure Requirements (including Australian Accounting Interpretations), the Corporations Act 2001, the Charitable Fundraising Act 1991 and its associated regulations.

Australian Accounting Standards set out accounting policies that the AASB has concluded would result in a financial report containing relevant and reliable information about transactions, events and conditions.

Material accounting policies adopted in the preparation of this financial report are presented below and have been consistently applied unless otherwise stated.

The financial report has been prepared on an accrual basis and is based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets and financial assets. All amounts are stated in Australian Dollars and in presenting the financial report are rounded to the nearest dollar.

(a) Revenue

Fundraising proceeds, bequests and donations are accounted for when received and when PCFA is legally entitled to the income.

Movember income is accounted for on an accrual basis as part of its arrangements with an external agent.

Interest revenue is recognised on a proportional basis taking into account the interest rates applicable to the financial assets.

All revenue is stated net of the amount of goods and services tax (GST) payable to the Australian Taxation Office.

Revenue from the sale of goods is recognised when control passes to the buyer.

(b) Government Contributions

PCFA receives non-reciprocal contributions from federal and state governments. These contributions are received on the condition that specified services are delivered or conditions fulfilled. These contributions are recognised at the

fair value upon receipt at which time an asset is taken up in the Statement of Financial Position and the revenue recognised in the Statement of Comprehensive Income.

(c) Donations in Kind

Items donated for use are included at the fair value to PCFA where this value can be quantified and a third party is bearing the cost.

No amounts are included in the financial statements for services donated by volunteers.

(d) Expenditure

Expenditure is accounted on an accrual basis and has been classified under headings that aggregate all costs relating to that category. The categories in the consolidated statement of comprehensive income reflect PCFA activities.

Note 2: Statement of Significant Accounting Policies (continued)

(e) Plant & Equipment

Plant and equipment are measured on the cost basis, less depreciation and impairment losses.

The carrying amount of plant and equipment is reviewed annually by directors to ensure it is not in excess of the recoverable amount from these assets. The recoverable amount is assessed on the basis of the expected net cash flows that will be received from the asset's employment and subsequent disposal. The expected net cash flows have been discounted to their present value in determining their recoverable amounts.

Plant and equipment that have been contributed at no cost, or for nominal cost, are valued at the fair value of the asset at the date it is acquired.

Depreciation

The depreciable amount of all fixed assets is depreciated on a diminishing value basis over the asset's useful life to PCFA commencing from the time the asset is held ready for use.

Leasehold improvements are depreciated over the unexpired period of the lease.

The useful life applied for each class of depreciable assets is:

Class of Fixed Asset	Useful Lives
Computer equipment	1-5years
Office furniture and equipment	10-20years
Leasehold improvement	3-5years

The assets' residual values and useful lives are reviewed, and adjusted if appropriate, at each balance sheet date. Gains and losses on disposals

are determined by comparing proceeds with the carrying amount. These gains or losses are included in the Statement of Comprehensive Income

(f) Leases

Leases of fixed assets, where substantially all the risks and benefits incidental to the ownership of the asset, but not the legal ownership, are transferred to PCFA are classified as finance leases.

Finance leases, which transfer to PCFA substantially all the risks and benefits incident to ownership of the leased item, are capitalised, recording an asset and a liability equal to the present value of the minimum lease payments, including any guaranteed residual values.

Leased assets are depreciated on a straight line basis over their estimated useful lives where it is likely that PCFA will obtain ownership of the asset. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for the period.

Lease payments for operating leases, where substantially all the risks and benefits remain with the lessor, are charged as expenses on a straight-line basis over the lease term.

Lease incentives under operating leases are recognised as a liability and amortised on a straight-line basis over the life of the lease term

(g) Inventories

Inventories of goods purchased for resale are valued at the lower of cost or net realisable value.

(h) Financial Instruments

Initial recognition and measurement

Financial assets and financial liabilities are recognised when PCFA becomes a party to the contractual provisions of the instrument. For financial assets, this is equivalent to the date that PCFA commits itself to either purchase or sell the asset (i.e. trade accounting is adopted). Financial instruments are initially measured at fair value plus transactions costs except where the instrument is classified "at fair value through profit or loss" in which case transaction costs are expensed to profit or loss immediately.

Classification and subsequent measurement

Financial instruments are subsequently measured at either fair value, amortised cost using the effective interest rate method or cost. Fair value represents the amount for which an asset could be exchanged or a liability settled, between knowledgeable, willing parties. Where available, quoted prices in an active market are used to determine fair value. In other circumstances, valuation techniques are adopted.

Amortised cost is calculated as:

- the amount at which the financial asset or financial liability is measured at initial recognition;
- less principal repayments;
- plus or minus the cumulative amortisation of the difference, if any, between the amount initially recognised and the maturity amount calculated using the effective interest method; and
- less any reduction for impairment.

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

The effective interest rate method is used to allocate interest income or interest expense over the relevant period and is equivalent to the rate that exactly discounts estimated future cash payments or receipts (including fees, transaction costs and other premiums or discounts) through the expected life (or, when this cannot be reliably predicted, the contractual term) of the financial instrument to the net carrying amount of the financial asset or financial liability. Revisions to expected future net cash flows will necessitate an adjustment to the carrying value with a consequential recognition of an income or expense in profit or loss.

(i) Financial assets at fair value through profit or loss

Financial assets are classified at 'fair value through profit or loss' when they are held for trading for the purpose of short-term profit taking, or where they are derivatives not held for hedging purposes, or when they are designated as such to avoid an accounting mismatch or to enable performance evaluation where a group of financial assets is managed by key management personnel on a fair value basis in accordance with a documented risk management or investment strategy. Such assets are subsequently measured at fair value with changes in carrying value being included in profit or loss.

(ii) Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active

market and are subsequently measured at amortised cost.

(iii) Held-to-maturity investments

Held-to-maturity investments are non-derivative financial assets that have fixed maturities and fixed or determinable payments, and it is PCFA's intention to hold these investments to maturity. They are subsequently measured at amortised cost.

(iv) Available-for-sale financial assets

Available-for-sale financial assets are non-derivative financial assets that are either not capable of being classified into other categories of financial assets due to their nature, or they are designated as such by management. They comprise investments in the equity of other entities where there is neither a fixed maturity nor fixed or determinable payments.

Available-for-sale financial assets are classified as non-current assets.

(v) Financial liabilities

Non-derivative financial liabilities (excluding financial guarantees) are subsequently measured at amortised cost.

Fair Value

Fair value is determined based on current bid prices for all quoted investments. Valuation techniques are applied to determine the fair value of all unlisted securities, including recent arm's length transactions, reference to similar instruments and option pricing models.

Impairment

At each reporting date, PCFA assesses whether there is objective evidence that a financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in the value of the instrument is considered to determine whether impairment has arisen. Impairment losses are recognised in the Statement of Comprehensive Income.

Derecognition

Financial assets are derecognised where the contractual rights to receipt of cash flows expires or the asset is transferred to another party whereby PCFA no longer has any significant continuing involvement in the risks and benefits associated with the asset. Financial liabilities are derecognised where the related obligations are either discharged, cancelled or expired. The difference between the carrying value of the financial liability, which is extinguished or transferred to another party and the fair value of consideration paid including the transfer of non-cash assets or liabilities assumed is recognised in profit or loss.

(i) Impairment of Assets

At each reporting date, PCFA reviews the carrying values of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value in use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its

recoverable amount is expensed to the Statement of Comprehensive Income.

Where the future economic benefits of the asset are not primarily dependent upon on the assets ability to generate net cash inflows and when PCFA would, if deprived of the asset, replace its remaining future economic benefits, value in use is depreciated cost of an asset.

Where it is not possible to estimate the recoverable amount of an assets class, PCFA estimates the recoverable amount of the cash-generating unit to which the class of assets belong.

Where an impairment loss on a revalued asset is identified, this is debited against the revaluation reserve in respect of the same class of asset to the extent that the impairment loss does not exceed the amount in the revaluation reserve for that same class of asset.

(j) Research Grants and Specialist Nursing Program

Research grants are expensed through the Statement of Comprehensive Income and recognised as a liability when PCFA has a present obligation (legal or constructive) as a result of a past event, it is probable that an outflow of resources embodying economic benefits will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation.

Specialist Nursing Program payments are expensed through the Statement of Comprehensive Income and recognised as a liability when PCFA has a present obligation (legal or constructive) as a result of a past event, it is probable that an outflow

of resources embodying economic benefits will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation.

It is considered that upon PCFA National Board approval of the research grants or placement application and notification of success to the applicant organisation, PCFA is constructively obliged to fund the contract whereby an economic benefit will be required to settle the obligation and a reliable estimate can be made of the amount of the obligation.

(k) Employee Benefits

Employee benefits comprise wages and salaries, annual, sick and long service leave, and contributions to employee superannuation funds.

Provision is made for PCFA's liability for employee benefits arising from services rendered by employees to balance sheet date. Employee benefits, expected to be settled within one year, together with benefits arising from wages, salaries and annual leave which may be settled after one year, have been measured at the amounts expected to be paid when the liability is settled. Other employee benefits, payable later than one year, have been measured at the net present value.

Contributions are made by PCFA to employee superannuation funds and are charged as expenses when incurred. PCFA has no further obligation to pay further contributions to these funds if the funds do not hold sufficient assets to pay all employees benefits relating to employee service in current and prior periods. Liabilities

for sick leave are recognised when the leave is taken and are measured at the rates paid.

(l) Cash and Cash Equivalents

Cash and cash equivalents in the consolidated statement of financial position include cash at bank, cash on hand, short-term deposits held with banks with an original maturity of six months or less that are readily convertible to known amounts of cash and which are subject to insignificant risk of changes in value, other short-term highly liquid investments and bank overdrafts.

For the purposes of the statement of cash flow, cash and cash equivalents consist of cash and cash equivalents as defined above, net of any outstanding bank overdrafts.

(m) Accounts Receivable and other debtors

Accounts receivable which are expected to be collected within 12 months are classified as current assets. All other receivables are classified as non-current assets. Accounts receivable are initially recognised at fair value.

Collectibility of accounts receivable is reviewed on an ongoing basis. Amounts that are known to be uncollectible are written off when identified.

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

Note 2: Statement of Significant Accounting Policies (continued)

(n) Goods and Services Tax

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the Balance Sheet are shown inclusive of GST. The amount of GST recoverable from or payable to the ATO is included with other receivables or payables in the Statement of Financial Position. Cash flows are presented in the Statement of Cash Flows on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

(o) Income Tax

No provision for income tax has been made as PCFA is a charitable institution for the purposes of Australian taxation legislation and therefore exempt from income tax under Division 50 of the Income Tax Assessment Act 1997.

(p) Provisions

Provisions are recognised when PCFA has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured. Provisions recognised represent the best estimate of the amounts required to settle the obligation at reporting date.

(q) Comparative Figures

Where required by Accounting Standards, comparative figures have been adjusted to conform with changes in presentation for the current financial year

(r) Accounts payable and other payables

Accounts payable and other payables represent liabilities outstanding at the end of the reporting period for goods and services received by PCFA during the financial year which remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability. The carrying amount of the payables is deemed to reflect fair value.

(s) Critical Accounting Estimates and Judgements

The directors evaluate estimates and judgements incorporated into the financial report based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within PCFA.

Key Estimates - Impairment

PCFA assesses impairment at each reporting date by evaluating conditions specific to PCFA that may be indicative of impairment triggers. Recoverable amounts of relevant assets are reassessed using value-in-use calculations which incorporate various key assumptions.

Key judgements - Available-for-sale investments

PCFA maintains a portfolio of managed funds with a carrying value of \$198,798 at reporting date. Should investment prices decline in value for an extended period of time, PCFA has determined that such investments will be considered for impairment in the future.

(t) Basis of Consolidation

Subsidiaries are entities controlled by the Group. The consolidated financial statements incorporate the assets and liabilities of all subsidiaries as at 30 June and results for the year then ended. Intragroup balances and transactions, and any unrealized income and expenses arising, are eliminated in preparing the consolidated financial statements.

Note 3: Fundraising Appeals Conducted During the Financial Year

The following disclosures for the current period are included to comply with the *Charitable Fundraising Act 1991*.

During the financial year PCFA raised funds primarily through:

- Solicited corporate and general donations;
- Gifts and bequests; and
- Charity events such as Movember.

RESULTS FROM FUNDRAISING APPEALS	2013	%	2012	%
	\$		\$	
Gross income from fundraising and donations	12,302,357		12,216,383	
Total cost of fundraising	(1,389,007)	11%	(915,127)	7%
Net income after fundraising costs	10,913,350	89%	11,301,256	93%
Total income	12,885,652		13,211,425	
Total expenditure	11,620,121		14,192,408	
Total payments to support services, research grants and specialist nursing service program, awareness activities, plus projects	7,192,515		10,803,114	
Payments support services, research grants and specialist nursing service program, awareness activities, plus projects as a percentage of total income	56%		82%	
Payments to support services, research grants and specialist nursing service program, awareness activities, plus projects as a percentage of total expenditure	62%		76%	

Further information on the application of the net surplus from fundraising and other income is contained in the Statement of Comprehensive Income and the Statement of Cash Flows.

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

Note 4: Revenue

	2013	2012
	\$	\$
Revenue from government and other grants	1,652,231	1,310,000
Fundraising revenue:		
- Donations	412,498	524,093
- Corporate donations	447,809	400,938
- Major gifts	401,264	249,144
- Direct mail	621,788	710,531
- Movember	5,000,000	6,100,000
- Major events	3,115,686	2,399,447
- Trusts and foundations	635,132	493,501
- Merchandise sales	15,949	28,729
Total fundraising revenue	10,650,126	10,906,383
Other revenue	49,031	147,219
Interest and dividends received	534,264	847,823
Total revenue	12,885,652	13,211,425

Note 5: Net Surplus/ (Deficit) for the Year

	2013	2012
	\$	\$
Net Surplus/ (Deficit) for the year has been determined after the following expenses:		
Project – Specialist Nursing Program	189,589	219,538
Project – Supporting men with prostate cancer through evidence-based resources and support	1,189,899	915,544
Project – Prostate Cancer Rural Education Road Show	154,064	-
Project – Prostate Cancer Survivorship Research Centre	42,725	-
Project – PSA Testing Guidelines	49,283	-
Project – iPad App Development	69,462	-
Depreciation		
- Furniture and equipment	38,096	19,407
- Leasehold Improvements	29,202	2,744
Employee benefits expense	2,545,966	2,111,891
Rental expense on operating leases	347,486	330,154
Auditor Remuneration		
- Audit services	42,500	40,000
- Other audit services re government grant acquittal	-	2,200
	42,500	42,200
Donation to Brady Urological Research Institute (USA)	100,000	-

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

Note 6: Cash and Cash Equivalents

	2013	2012
	\$	\$
CURRENT		
Cash at bank	4,456,379	3,888,842
Cash on hand	3,071	2,050
Term deposits	9,715,050	11,204,575
	14,174,500	15,095,467

Note 7: Trade and Other Receivables

	2013	2012
	\$	\$
CURRENT		
Accounts receivable	136,752	242,023
Movember income receivable	3,600,000	3,600,000
Interest receivable	16,675	17,989
GST receivable	55,511	102,966
	3,808,938	3,962,978

Note 8: Other Current Assets

	2013	2012
	\$	\$
Accrued income	-	187,243
Prepayments	283,963	265,051
Other deposits	43,631	-
	327,594	452,294

Note 9: Inventory

	2013	2012
	\$	\$
CURRENT		
Inventory (at cost)	73,683	103,871

Note 10: Financial Assets

	2013	2012
	\$	\$
NON CURRENT		
<i>Available-for-sale financial instruments:</i>		
Managed investment portfolio	198,798	843,354
Direct share portfolio	-	-
	198,798	843,354
<i>Held to Maturity financial instruments:</i>		
Rental deposits	5,656	86,735
	204,454	930,089

Available-for-sale financial assets comprise of investments in managed funds and listed trusts and listed shares. There are no fixed returns or fixed maturity dates attached to these investments. A gain or loss on an available-for-sale financial asset is recognised directly in equity, through the statement of changes in equity, except for impairment losses and foreign exchange gains and losses, until the financial asset is derecognised, at which time the cumulative gain or loss previously recognised in equity shall be recognised in profit or loss. PCFA does not hold these assets for trading or for short term profit making.

Held to maturity financial assets are comprised of bank deposits held.

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

Note 11: Plant & Equipment and Leasehold Improvements

	2013	2012
	\$	\$
Plant and equipment		
At cost	401,070	328,954
Less accumulated depreciation	(154,866)	(116,771)
Total plant and equipment	246,204	212,183

	2013	2012
	\$	\$
Leasehold Improvements		
At cost	144,875	11,500
Less accumulated depreciation	(31,947)	(2,744)
Total plant and equipment	112,928	8,756

Movements in Carrying Amounts	Plant and equipment	Leasehold improvement
2012	\$	\$
Balance at the beginning of year	212,863	-
Additions at cost	43,167	11,500
Disposals	(24,440)	-
Depreciation expense	(19,407)	(2,744)
Carrying amount at end of year	212,183	8,756
2013		
Balance at the beginning of the year	212,183	8,756
Additions at cost	72,117	133,374
Disposals	-	-
Depreciation expense	(38,096)	(29,202)
Carrying amount at end of year	246,204	112,928

Note 12: Trade and Other Payables

	2013	2012
	\$	\$
Trade creditors and accruals	626,981	646,561
Short-term employees benefits	181,514	148,380
	808,495	794,941
<i>Financial liabilities at amortised cost classified as trade and other payables.</i>		
Trade and other payables		
- Total current	716,715	769,090
- Total non-current	91,780	25,851
	808,495	794,941
Less short term employee benefits	(181,514)	(148,380)
Financial liabilities as trade and other payables	626,981	646,561

Note 13: Research Grants and Specialist Nursing Program Payable

	2013	2012
	\$	\$
CURRENT		
Research grants payable	4,925,415	5,840,289
Specialist Nursing Program payable	1,233,884	1,137,493
NON CURRENT		
Research grants payable	2,689,883	3,618,737
Specialist Nursing Program payable	799,881	2,237,792
	9,649,063	12,834,311

Research grants payable relate to 53 (2012: 57) approved applications to which PCFA are presently committed. These will be paid over the next 4 financial years according to the agreed letters of offer.

Specialist Nursing Program payable is based on funds received from or committed by Movember during previous financial years and retained for this purpose. Contracts have been awarded to provide nurses in hospitals at various locations around Australia and funds also set aside for evaluation of the program. These funds are to be expended over several years.

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

Note 14: Provisions

	2013	2012
	\$	\$
Long service leave	5,259	13,514
Nursing education	70,093	34,611
Lease incentive	52,164	73,030
	127,516	121,155

Provisions	2013	2012
	\$	\$
- Current	90,959	55,477
- Non-current	36,557	65,678
	127,516	121,155

2013	Long service leave	Nursing Education	Lease incentive
	\$	\$	\$
Analysis of Total Provisions			
Opening balance at 1 July	13,514	34,611	73,030
Additional provisions raised during year	6,900	50,859	-
Amounts used	(15,155)	(15,377)	(20,866)
Balance at 30 June	5,259	70,093	52,164

Provision for long-term employee benefits

A provision has been recognised for employee entitlements relating to long service leave. In calculating the present value of future cash flows in respect of long service leave, the probability of long service leave being taken is based on historical data. The measurement and recognition criteria relating to employee benefits have been included in Note 2 to this report.

Provision for Nursing education

A provision has been recognised for amounts provided for education purposes for nurses. These claims are expected to be settled in the next financial year. The provision is based on funds received from an endowment.

Provision for Lease incentive

The company entered into a new operating lease for PCFA's Sydney headquarters on 1 January, 2011 for a period of 5 years. PCFA received a rent free incentive of \$104,330 in the form of rent, outgoings and parking. This incentive will be amortised over the life of the lease.

Note 15: Reserves

Asset Revaluation Reserve

This reserve records the revaluation of financial assets classified as available-for-sale, which is the difference between the asset's carrying value and market value at balance sheet date.

In the prior year, the opening balance of the reserve at 1 July 2011 was reduced by \$187,106 through a transfer to retained earnings. The transfer relates to available-for-sale assets which were realised in previous periods.

	2013	2012
	\$	\$
Opening balance 1 July	(134,353)	(277,794)
Revaluation of available for sale assets	(9,438)	(55,656)
Reserve written back on realisation of financial assets	91,903	11,991
Adjustment	-	187,106
Balance 30 June	(51,888)	(134,353)

Note 16: Capital and Leasing Commitments

(a) Operating lease commitments

	2013	2012
	\$	\$
<i>Non-cancellable operating leases contracted for but not capitalised in the financial statements.</i>		
Payable – minimum lease payments		
- not later than 12 months	303,137	314,375
- later than 12 months but not later than 5 years	442,031	517,348
- greater than 5 years	-	-
	745,168	831,723

The property lease commitments are non-cancellable operating leases contracted for but not capitalised in the financial statements within a three year term. No capital commitments exist in regards to the operating lease commitments at year-end. Increase in lease commitments are in line with the lease agreements at an average increase of 4% upon each anniversary date. PCFA are able to renew the term of operating leases for a further three years upon termination of the current lease period.

(b) Capital commitments

PCFA have no capital commitments that require disclosure in this report.

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

Note 17: Contingent Liabilities and Assets

PCFA has a bank guarantee at 30 June 2013 for the performance of certain office lease commitments amounting to \$135,765 (2012: \$115,793).

Note 18: Events After Balance Sheet Date

Subsequent to 30 June 2013 PCFA entered into a Funding Agreement with the Australian Government as represented by the Department of Health and Ageing for additional funding for Prostate Cancer Nurses. These funds, totalling \$6,796,000 (inclusive of GST) are to be provided from the Chronic Disease Treatment Program for a term to end on 30 August 2017 (approximately 4 years hence).

No other matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of PCFA, the results of those operations, or the state of affairs of PCFA in subsequent financial years.

Note 19: Related Parties and Related Party Transactions

Directors' compensation

The directors act in an honorary capacity and receive no compensation for their services.

Note 20: Cash Flow Information

Reconciliation of cashflow from operations with (deficit) / surplus from ordinary activities after income tax.

	2013	2012
	\$	\$
Surplus/(Deficit) from ordinary activities	1,265,531	(980,983)
<i>Non-cash flows</i>		
Loss on Sale of Financial Assets	91,903	24,147
Depreciation	67,298	22,151
<i>Changes in assets and liabilities</i>		
Decrease /(increase) in trade receivables and other assets	154,040	(1,248,437)
Decrease /(increase) in other current assets	124,700	(298,965)
Decrease /(increase) in inventory	30,188	(103,871)
(Decrease)/ increase in program & grants payable	(3,185,248)	1,203,449
Increase in trade and other payables	13,554	458,306
Increase/ (decrease) in provisions	6,361	(82,593)
	(1,431,673)	(1,006,796)

Note 21: Foundation Details

The registered office and principal place of business of PCFA is:

Level 3, 39-41 Chandos Street
St Leonards, New South Wales, 2065

NOTES TO THE CONSOLIDATED FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2013

Note 22: Parent Entity Financial Information

The individual financial statements for the parent entity show the following aggregate amounts:

	2013	2012
	\$	\$
Balance Sheet	-	-
Current Assets	-	-
Total Assets	-	-
Current Liabilities	-	-
Total Liabilities	-	-
Shareholders' Equity	-	-
Profit or Loss for the year	-	-
Total Comprehensive Income	-	-

Prostate Cancer Foundation of Australia Limited (ABN 42 073 253 924), a company limited by guarantee, is the corporate trustee for its only controlled entity, Prostate Cancer Foundation of Australia (ABN 31 521 774 656).

Prostate Cancer Foundation of Australia Limited is incorporated under the Corporations Act 2001. If it is wound up, the constitution states that each member is required to contribute a maximum of \$10 each towards meeting any outstanding and obligations of PCFA. As at 30 June 2013 the number of members was 105 (2012: 99)

DIRECTORS' DECLARATION

Directors' Declaration

The directors of PCFA declare that:

1. the consolidated financial statements and notes, as set out on pages 10 to 33, are in accordance with the Corporations Act 2001:
 - (a) comply with Australian Accounting Standards-Reduced Disclosure Requirements and the Corporations Regulations 2001; and
 - (b) give a true and fair view of the financial position as at 30 June 2013 and of the performance for the year ended on that date of PCFA.
2. in the directors' opinion there are reasonable grounds to believe that PCFA will be able to pay its debts as and when they become due and payable.
3. pursuant to Schedule 1, Section 7(3) of the NSW Charitable Fundraising Regulations 2008;
 - (a) the Consolidated Statement of Comprehensive Income is drawn up so as to give a true and fair view of income and expenditure of PCFA for the year ended 30 June 2013 with respect to fundraising appeals;
 - (b) the Consolidated Statement of Financial Position and Statement of Cash Flows are drawn up so as to give a true and fair view of the state of affairs of PCFA as at 30 June 2013 with respect to fundraising appeals;
 - (c) the provisions of the Charitable Fundraising Act 1991 and the regulations under the Act and the conditions attached to PCFA have been complied with for the year ended 30 June 2013; and
 - (d) the internal controls exercised by PCFA are appropriate and effective in accounting for all income received and applied by PCFA from any of the fundraising appeals.

This declaration is made in accordance with a resolution of the Board of Directors.



Chris Hall

Director

Dated this 22nd day of October 2013
Sydney, NSW

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF PROSTATE CANCER FOUNDATION OF AUSTRALIA LIMITED

Report on the financial report

We have audited the accompanying financial report of Prostate Cancer Foundation of Australia Limited (the company), which comprises the statement of financial position as at 30 June 2013, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year ended on that date, a summary of significant accounting policies, other explanatory notes and the directors' declaration for Prostate Cancer Foundation of Australia (the consolidated entity). The consolidated entity comprises the company and the entities it controlled at year's end or from time to time during the financial year.

Directors' responsibility for the financial report

The directors of the company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Requirements and the *Corporations Act 2001* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

Auditor's responsibility

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. Those standards require that we comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the consolidated entity's preparation and fair presentation of the financial report in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by the directors, as well as evaluating the overall presentation of the financial report.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Independence

In conducting our audit, we have complied with the independence requirements of the *Corporations Act 2001*.

Liability limited by a scheme, approved under Professional Standards Legislation.

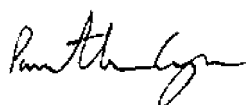
Basis for Qualified Opinion

Cash from donations and other fundraising activities are a significant source of revenue for the company. The company's directors have determined that it is impracticable to establish control over the collection of revenue from these sources prior to entry into its financial records. Accordingly, as the evidence available to us regarding revenue from cash donations and other fundraising activities was limited, our audit procedures with respect to revenue from these sources had to be restricted to the amounts recorded in the company's financial records. As a result, we are unable to express an opinion as to whether revenue from cash donations and other fundraising activities is complete.

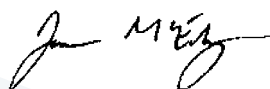
Qualified Opinion

In our opinion, except for the possible effects of the matter described in the Basis for Qualified Opinion paragraph, the financial report of Prostate Cancer Foundation of Australia Limited is in accordance with the *Corporations Act 2001*, including:

- (a) giving a true and fair view of the company's financial position as at 30 June 2013 and of its performance for the year ended on that date, and
- (b) complying with Australian Accounting Standards - Reduced Disclosure Requirements including the Australian Accounting Interpretations and the Corporations Regulations 2001.



PricewaterhouseCoopers



James McElvogue

Partner

Dated this 22nd day of October 2013
Sydney, NSW

THA

NIK

YOU



THANK YOU

PCFA relies on the generosity of the community, companies and individuals to advance its research, raise awareness and provide support to men diagnosed with prostate cancer and their families. PCFA sincerely thanks all donors and supporters who generously made a contribution during the 2012/2013 financial year.

Listed below are the individuals who contributed \$1,000 or more, and companies and community fundraisers who contributed \$5,000 or more.

Rotary

In 1996 the members of the Rotary Club of Lane Cove established the Prostate Cancer Research Foundation. The company merged in 1999 with the Australian Prostate Cancer Foundation which was also founded in 1996, and the Association of Prostate Cancer Support Groups, which was established in 1998, and changed its name to Prostate Cancer Foundation of Australia on 12 July 1999. Since this time, the organisation has grown tremendously to become the peak body for prostate cancer in this country. Like its Founders, the organisation is dedicated to making an impact on the lives of men with prostate cancer and their families. PCFA would like to acknowledge Rotary for its ongoing commitment to the organisation and its mission.

Rotary Club of Bentleigh Moorabbin Central
Rotary Club of Biloela
Rotary Club of Brighton
Rotary Club of Campbelltown
Rotary Club of Canberra Weston Creek
Rotary Club of Casey
Rotary Club of Condoblin
Rotary Club of Coonabarabran
Rotary Club of Corio Bay Inc
Rotary Club of Crows Nest
Rotary Club of Devonport North Inc
Rotary Club of Encounter Bay
Rotary Club of Fitzroy
Rotary Club of Frenchs Forest
Rotary Club of Goolwa
Rotary Club of Harvey
Rotary Club of Henley Beach
Rotary Club of Hobart
Rotary Club of Holdfast Bay
Rotary Club of Hornsby

Rotary Club of Kaniva
Rotary Club of Lane Cove
Rotary Club of Lightning Ridge
Rotary Club of Lismore West
Rotary Club of Macksville
Rotary Club of Mansfield
Rotary Club of Monbulk and District
Rotary Club of Moranbah
Rotary Club of Mosman
Rotary Club of Mundaring
Rotary Club of Rossmoyne
Rotary Club of Ryde
Rotary Club of Summerland Sunrise
Rotary Club of Swan Hill
Rotary Club of Taree North
Rotary Club of Terang
Rotary Club of Theodore
Rotary Club of Toowoomba Inc
Rotary Club of Tumut
Rotary Club of Tuncurry-Forster Inc
Rotary Club of Wagga Wagga
Rotary Club of Warrnambool East
Rotary Club of Wingham
Rotary Club of Wynnum & Manly

Corporate

3rd Combat Engineer Regiment
AbbVie Pty Ltd
Abigroup Contractors Pty Ltd
Actew Corporation
Adonis Society
Allwest Plant Hire
American Medical Systems
Association of Financial Advisors Foundation
Australia Post
Australian Institute of Superannuation Trustees
Balmain Sports Medicine
BASF - The Chemical Company
Bayer Australia Limited
Bendigo Publishing Pty Ltd
Bendzulla Professional Service
BHP Billiton
Brackwell Pty Ltd
Bunnings Group Limited
Capricorn Resort Yeppoon
Cass Brothers
Charity Greeting Cards Pty Ltd
Citibank AUS & NZ
Coloplast Pty Ltd

Commonwealth Bank of Australia
Corporate Rugby Tens Pty Ltd
CSR Gyprock
Digi Direct
Fox Collection
Giles Partners Pty Ltd
Grewlan Investments Pty Ltd
Iaker Pty Ltd
ICAP Australia
Independent Gaming Corporation
J Rowe & Son Pty Ltd
JJ Richard & Sons Pty Limited
John Holland Group Pty Ltd
Lotterywest
Major League Corporate Marketing
Mann Family Settlement
Nine Network Australia
Origin Alliance
Pirtek Fluid Systems Pty Ltd
Premier PR
Prostate Cancer Alliance Inc
Qantas
RedInk Homes
Reece Australia Limited
Retracom Group
Roads and Maritime Services
Robern Menz
Rockhampton Base Hospital
Rosella Foods
Rumble Riders
Rush Events & Communications
Sanofi-Aventis Australia Pty Limited
Simson Cards
Sinclair Knight Merz
Southern Cross M Austereo Pty Ltd
Stream Group
Sydney Market Foundation
Table 4 Ten
The Conservatory Rooftop Bar
The Horizon Committee Inc
The Movember Group Pty Ltd
The Tradies Group
The Western Herald
Thiess Pty Ltd
Thiess Pty Ltd, Mt Owen Mine
Think Pink Realty
Thomas Hare Investments Ltd
Thomson Reuters
Thor Specialties Pty Ltd
Three's a Crowd Design Pty Ltd

Tish n' Enigma Books
 Tour de Cure Ltd
 Tyrolit Australia Pty Ltd
 Versace Timbers
 Wescone Distribution Pty Ltd
 Whisky Live Sydney

Trusts

Advertiser Sunday Mail Foundation
 Bell Charitable Fund
 Campaspe Family Trust
 Comiskey Family Foundation
 Cure Cancer Australia Foundation
 David Z Burger Foundation
 Gandel Philanthropy
 H & L Hecht Trust
 Harwood Foundation Trustee
 Macquarie Group Foundation
 Mannal Economic Education Foundation
 Mather Foundation Ltd
 Paul Ainsworth Family Foundation
 Perpetual Philanthropic Services
 Protrust Pty Ltd
 RobMeree Foundation
 Stan Perron Charitable Trust
 Steadfast Foundation
 Sydney Markets Foundation Inc
 The Good Guys Foundation

Clubs

Altona RSL Sub-Branch
 Ashgrove Gps Rugby Union Club
 Barossa Grape & Wine Association
 Bathurst RSL Club Ltd
 Bayview Golf Club
 Blackwater Mineworkers Club
 Carbrook Golf Club
 East Malvern Tennis Club
 Illawarra Retirement Trust-Links Seaside
 Ipswich Kart Club
 Ipswich 4 Wheel Drive Club Prostate
 Committee
 Leeton & District Bowling Club
 New South Wales Golf Club
 Royal Fremantle Golf Club
 Shag Islet Cruising Yacht Club
 Southside Sport and Community Club
 St Alberts Rugby Union Football Club
 The Long Ride Supporters
 The Luncheon Group
 WA Monaro Nationals 2012
 West Arana Hill Rugby League Football Club

Estates

Estate of the Late Dory Said Asfour
 Estate of the Late Roy Alexander Bonnington
 Estate of the Late Darryl Claude Chivell
 Estate of the Late Suzanne Deacon Dunne

Estate of the Late Cecil Allan Henry Hedger
 Estate of the Late Frank Kuster
 Estate of the Late Mervyn Alfred Legge
 Estate of the Late Bill Dudley Norman
 Estate of the Late Manlio Pratelli
 Estate of the Late Thomas Alexander Tonkin

In Memoriam

Robert Adamson
 William Ambridge
 Edwyn Anderson
 Colin Mervyn Anson
 Mark M Arnold
 Robert Dennis Arnold
 Bob Arnold
 Douglas Edward Baker
 Donald Bartle
 Lyn Barton
 Colin M Batten
 John Andrew Lindsay Bell
 George Benson
 Donald Bickford
 Giuseppe Boccanfuso
 Ronald Leslie Brame
 John Brennan
 Jack Brennan
 Michael Brent
 Charles C Britten
 Henry Charles Brittin
 Ronald Brooking
 Thomas Brown
 Tom Brown
 Alexander Brown
 Anders Buch
 George Bucsa
 Leo James Burke
 Cliff Bursle
 Romeo Calcinotto
 Gordon Carlyle Cameron
 Allen Edward Carroll
 Stefano Cincotta
 R Clayton
 Sydney Cleeland
 Noel Bernard Coleman
 Harold Coleman
 Max Leonard Collins
 Alexander Coulter
 Laurence Maxwell Coyne
 Phil Critchley
 Gregory William Crowe
 Frank Cullen
 Ken Darkin
 William Davies
 Giuseppe De Pasquale
 Lawrence Boyd Delroy
 Lawrence Boyd Delroy
 Dennis Denmead
 Rosa Di Bella
 O B B Dinham
 Douglas Francis Doody

Frank Doolan
 Stan Douglas
 Ronald William Dowling
 Robert Eaton
 Christopher Ellis
 Harold Falkenhagen
 Trevor Raymond Fendt
 John Fleming
 Luciano Fonda
 Tony Forgan
 Dennis Foster
 Leslie Oswin French
 Limo Freschi
 Dennis Frodsham
 Francesco Galati
 Robert Boyd Gardner
 Eric Gill
 Herbert John Gilmour
 John Gosbell
 Albert Ian Greig
 Clarrie Grimes
 Bruce Haberfield
 Edward Hale
 Garth Hamley
 Kevin Hammond
 John Laurie Harris
 Dermot Hatfield
 Tim Healey
 Kevin Healy
 Ted Hebblewhite
 Laszlo Hegyi
 William Henderson
 Guy Henderson
 Robert Herschausen
 John Hofstede
 Brian John Horrocks
 John Hose
 Lionel Huth
 Graham Douglas Irons
 Graham Douglas Irons
 Robert Henry Jesse
 Trenton Hedley Jones
 Robert Jones
 David Kacan
 John Karras
 Allan Killips
 Harry Kioussis
 Barrie Kirby
 Giacomo Lacchiana
 Julio Cesar Laguzzi
 Michele Lallo
 Keith Larsen
 Terry Lawrence
 Ross Ellis Lay
 Joe Lindsay
 Jim Lowe
 Leon Lawrence Lurner
 James Macdonald
 Giuseppe Mallamo
 Tony Marsh
 Lang Martin

THANK YOU

Doylah Ernest Martin
P Martino
Lyell Mather
Ken Matthew
James McDonald
Charles McKendry
Brian Mecham
Anthony John Merrick
Brian Mills
Trevor Mitchell
Leslie Mitchell
Eiryn Rees Mort
William Moyle
George Moyle
Cyril Mudge
Edith Muir
Shaun Augustine Murray
Barry Neve
Robert Arthur Nugent
John Calvert O'Donnell
Graeme O'Toole
Roland Otto
Vito Pancari
Bruce Barnett Paterson
Peter Patmore
Harold James Paynter
Raymond John Peacock
John Peacock
Gordon Pettit
Gregory Priest
Murray Pryor
Keith Ronald Purdey
Phil Randell
Erwin Rasche
Douglas John Rawling
Ron Reading
Graham Richards
Barry Roberts
Graeme Robertson
Clive Roche
Steve Rodriguez
Norman Ross
Antonino Russo
Paul Samuels
Gordon Peter Sawyer
Luigi Scandelin
Norman Joseph Schofield
Robert Scholl
Anthony Schramko
Alessio Scodellaro
Edward Scrutton
Giovanni Serafin
Richard Sheridan
David Simpson
John Skinner
Basil Peter Smidt
Joe Smithyman
Harry Spilsbury
Corbert James Stewart
John Stobart
Tony William Surmon

Eric John Sykes
Elwyn Keith Sypfers
Rodney Tartakouer
Eugene Teiermanis
Roy Thorburn
William Tracey
Doug Tregenza
Len Tripp
Len Usher
Harry van Daesdonk
Pietro Venditti
Roger Vinall
Wayne Waitai
Ken Walker
Jim Walton
Robert Frank Warden
John Watts
Mervyn Welke
Keith Weston
Leslie John Williams
Francis John Williams
John Edward Wills
Roger David Woods
William Wright
Terrance Wayne Young
Terry Young
Phillip Bruce Young
Silvio Zambelli
Robert Zeven

Individuals

Leonard Ainsworth
Matthew Amos
Linda Attard
Ross Beckhouse
Imelda Bilato
Colin Bloomfield
Jason Boladeras
Ian Boucher
Stephen Bowden
Robert Brakspear
Wesley Brown
Ann Browne
Leo Browne
Kate Buechner
Peter H Butts
E Calder
John Cameron
BJ Chapman
Martin Clark
Brian Coates
Julie Cobb
Timothy Cohen
Michael Cohn
Melissa Cooke
Michael Coorey
P Cox
Stephen Crozier
Murray David
Glenn De Vries

John Delano
Sheryn Ellis
Kerry Eupene
Lindsay Evans
Joan Evenden
Don Faithfull
C W & J A Farmer
John Farrell
Martin Fausch
Colin Flint
Freer
A Garg
G R & E M Godden
A J Goebbels
J Grace
Alan Green
Alex Green
B Hacker
William Hardy
John & Rhonda Hawley
J L Hoge
Graham Horton
Jim Hughes AM
Bill Jauncey
Graeme Johnston
Robert Johnston
Helen Jones
James Kerrigan
Alison Kittle
Bruce Kynaston
JN Lake
Graham Lennon
Antony Lo
Peter Lyons
Ruth MacMillan
Tony Madden
Samir Malek
A & S Malouf
Theo & Julie Marinis
Tom Marish
Simon Mathams
Lesley McAulay
David McManus
Geoffrey Meggs
Ian Miller
Sam Miller
Professor John Mills
Warren Morley
Robert Mostyn
Murilo Moura
Leonie Myers
John Newcomb
Ian Payne
Luigi Piccone
M W F Powell
Deborah Pulton
Grant Pursey
Leigh Reeves
Dulcie Richards
Kathryn Rigney
Ken Roberts

Adrian Ruse
 Pamela Russell AM
 Leslie Sanderson
 David Sandoe OAM
 Pam Sandoe OAM
 G E Sharp
 William Sherlock
 Garry Shirvington
 Robert Smith
 Troy Sparks
 Chris Spresser
 Dr Peter Sutherland
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Community Fundraisers

2013 Gold Coast Airport Marathon
 Allphones Arena Rocks City 2 Surf team
 Aussie Adventurers Rally for Cancer
 Australian Defence Force
 Bairnsdale Big Blokes Barbeque
 Ballarat's Biggest Ever Blokes Lunch
 Baw Baw Big Blokes BBQ
 Bendigo Biggest Ever Blokes Lunch
 Berkeley IT
 BRS Trail Ride
 BTing Cancer Walk 2012 Prostate
 Will Bosma
 Bulk Water Alliance Fundraising Page
 Bull N' Bush Hotel PCFA Fundraiser
 David Cadden
 Casper Dekker
 Echuca Biggest Ever Blokes Lunch
 Phil Endersbee's
 Greg Fordham
 Fundraiser In Memory Of Peter Rapp
 Gasoline Alley Australia Pty Ltd
 Robert Glover
 Wayne Grady and Brian Jones Pro-Am Series
 Jenni Greaves' Big Aussie Barbie
 Michael Grogan & Committee
 Amine Haddad's Big Aussie Barbie
 How Good Are These Puppies
 Hungry Haydo's Eating Challenge
 - Taking a Bite Out of Cancer!
 Ipswich Kart Club Inc
 Latrobe's Biggest Ever Blokes BBQ
 Doug Marshall
 Mates 500 Relay
 Ross Mitchell
 Muscle On The Mountain

Neil's BBQ for the Boys & Carswell Classic
 Golf Tournament
 No Joke Bloke Campaign
 Norm Ross Memorial Cricket Day
 Dave O'Callaghan
 David Parkin OAM
 Perth to Margaret River Cycle
 Port Bike Rally 2012 - 10th Anniversary
 Andrew Powis
 Pull Ups 4 Prostate
 QLD Long Riders
 Paul Rayner
 Reach For the Stars
 Rockhampton Base Hospital
 Round the Rock 4 PCFA
 SEQLD Defence Riders
 Shepparton's Biggest Ever Blokes Lunch
 Simon's Prostate Cancer Ball
 The Long Ride 2013
 The Luncheon Group
 The Male Bag Ride
 WA Monaro Nationals 2012 Committee
 Wombat's Head & Beard Shave

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PCFA support groups help people with prostate cancer to navigate their cancer journey.



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