SOUTHERN GAY HEALTH PROJECT

Annual Report.

January 2000

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Annual Report.

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Annual Report.

INTRODUCTION

The Southern Gay Health Project was established in Cork in 1995. It evolved from the experience of Gay Community initiatives locally and nationally over the past twenty years. Its aim is to provide a regional, Gay-specific response to the issues of HIV/AIDS, focusing on the area of preventative education. To date it has developed a number of successful local and national initiatives. It continues to operate under severe financial restrictions. Despite our preventative focus we have, from the outset, been drawn into the area of care and support for those directly affected. This labour intensive area now represents a major portion of our work. The project is funded through support from the community with fund-raising activities and section 65 grant aid from the Southern Health Board.

Over the past five years the project has produced substantial financial deficit. (App 1)

We have a management board of eight persons who bring a wide range of experience and are representative of different aspects of the Gay Community. (App 7}

We employ three part-time workers (App 7)

Priorities for the next year are:

A. Devise and seek implementation of a co-ordinated care plan by the voluntary sector.
B. Employ one full time worker to direct the overall work of the project.
C. Strengthen our financial base.
D. Increase volunteer involvement.

This plan includes a review of the work of the project, together with an outline of proposed developments for the immediate and medium term future.
The Project welcomes the Southern Health Boards "HIV/AID Strategy and Action Plan 1999-2000".

HISTORY

Gay Health Action the earliest response to AIDS by the Gay community in Ireland was established in Cork in 1984. Through international organisations and the media we were aware of the issues as they emerged at a very early stage. The first information campaign was carried out in early 1984. Gay Health Action developed as a national organisation with groups based in Dublin and Cork. Cairde the care group now based in Dublin was initiated and established in Cork in 1986. In 1987 the Cork group decided to support the establishment of a broad based AIDS group in our area and was central to the establishment of The Cork AIDS Alliance in 1987/1988. From the outset a major portion of the energy of the local Gay Group was integrated into the Alliance and continued to play a central role up to 1995. As a result of this concentration of energy very little work was done on the development of facilities for the gay community in the Cork area over this period. No Gay-specific social or other facilities apart from a gay-friendly pub existed. This made the work on health education almost impossible.

In 1991 'The Other Place' a social and community centre aimed at the lesbian and gay communities was established in St. Augustine Street in the City centre

A wide range of services to both the Lesbian and Gay communities were developed over subsequent years (App 6). Essential financial support was provided by The Quay Coop, by FAS through the Community Employment Scheme and the community through voluntary and financial support. In 1999 the Health project acquired its own offices in Patrick's Hill and an independent Lesbian centre has been established at 24 George's Quay, both in the city centre. In 1998 a members Social Club was established including a Café, Bookshop, Meeting space etc. and this now provides an essential contact point between the Health Project and the community. The Project continues its involvement with national initiatives such as Gay HIV Strategies and The Gay Men's Health Network.

CONTEXT Of OPERATION

GAY COMMUNITY

Defining the Gay community is not an easy task. It involves a wide range of factors, the fear of being open about sexual orientation being the major issue ; our target group is primarily the Gay community in the Munster area to whom Cork City would represent a major centre of activity. Accepting 750,000 as the overall population within this area, it would indicate a gay male population in the region of 18,000, and a potentially sexually active population of 7,500 Gay men (ages of 17 to 45). These are obviously approximate figures. (App.5)

At the outset of the project we identified four main categories with different needs to which we need to relate.

1. Gay men who regularly access the gay community facilities, such as cafes, club etc. This group constitutes the core of the gay community in the region.

2. Men who identify as gay but do not use community facilities, because they are married, under-age etc.

3. Men who have sex with men but do not identify themselves as gay, and who do not use gay venues.

These groups are not homogenous and can be subdivided in terms of age, education, and social class, etc each presenting particular challenges to implementation of effective health education.

PROJECT AIMS

- To implement and develop strategies that will help reduce the risk of male-to-male transmission of HIV and other STDs.
- To provide gay/bisexual men with the information and support necessary to make informed decisions.
- To help create a climate of safer-sex practice.
- To provide practical and emotional support to those living with HIV/AIDS.
- To promote broad health awareness, particularly in areas such as, drug use, mental health etc.
- To ensure that statutory and voluntary organisations fulfill their health education obligations and promote awareness of particular issues relating to the Gay Community.

The project is part of an overall community development programme, which includes a wide range of services to the gay community; this includes a social club, information phone line, library, café and a range of social, education and support groups.

Our particular objectives over the next year are:

* To commission a report evaluating preventative work strategy to date with recommendations for changes where necessary. (App.3).
* To recruit a full-time director for the project.
* To establish a viable long-term economic base for the project.
* Seek to establish a designated care group,

The project is funded through support from the community with fund-raising activities and grant aid.
Over its five years of existence the project has produced substantial deficit. (App.1)

Management:

The Health Project is the responsibility of the overall management board. A sub-committee chaired by a board member is responsible for this specific work of the project. (App.7)

WORK STRATEGY

The project employs three part-time outreach/support workers: James Walsh, Barbara Scott and Arthur Leahy.
The project has now completed five years under its present format.
A number of areas of concern have been identified:

1. The difficulty of effective evaluation.
2. The on-going major financial deficit.
3. The lack of co-ordinated voluntary care.
4. The lack of connection between voluntary & statutory bodies and the needs of the lesbian and gay communities, particularly in areas of education. Health promotion is not solely the responsibility of Health Boards; other agencies need to address their responsibilities. (App.3). The consequences of HIV and general health awareness in the gay community are greatly affected by this factor.

The Project funded Nexus Research to carry out a preliminary study in August 1999 to consider these issues. As a result of its findings, and given the successful programme developed in the Eastern Health Board, we proposed to jointly commission, with the Health Board, a more detailed study. This would examine the work of the Project in the context of the overall environment and develop an overall strategy relating to the needs of our community. (App.3)

WORK PROGRAMME

The following is the work programme currently being carried out by the project.

In each area we outline possible developments.

Safer-sex, HIV publications & information:

The project continues to distribute a wide range of materials concerning HIV/AIDS & safer-sex. Some of this material is home produced either by ourselves or jointly with the Gay Men's Health Network or imported from abroad and adjusted for local use. This literature is distributed through information stalls at gay social events, pubs, clubs, and also through students unions community groups, and similar bodies.
We distribute specific publications for HIV. We have responsibility for the production and national distribution of posters, leaflets etc., on Hepatitis B.

Copies of these leaflets are contained in Appendix 8.

Condoms & lubricants:

The project continues to ensure that condoms are readily available to those who may need them.
We provide a number of vending machines distributing condoms & lubricants at cost price. They are distributed free at all gay social events, such as the weekly disco in Cork, and are supplied to events in Waterford and other events in our area.
The project works with similar groups around the country. We have been involved in the design and update of condoms packs. This also provides for the bulk purchase of condoms and the production of novelty and special packs.
We also distribute free at appropriate student events.
A survey on condom use and preferences etc. will be conducted in April/May 2000.

Hepatitis B campaign:

We propose to update the Hepatitis B campaign producing again a series of leaflets. 1,000 posters and 10,000 leaflets have been distributed as part of the first stage of the campaign.
We propose to re-launch this campaign in August 2000.

Outreach work:

In large Population centres outreach visits to cruising areas are seen to be effective, distributing condoms, information, and where possible making direct contact. The project conducted a series of these visits in our area but considered contact would be better made through other meeting places i.e. Pubs, Clubs, Saunas. We will continue this service but on a more limited and innovative level.

An amateur theatre group has been established in the center and is currently working on a number of sketches /events on health issues, which we will promote in Gay venues around the country.

The Project makes extensive use of the Gay press and maintains a profile in the local media.

Drop In Centre

The project now runs a limited drop-in and telephone service at no. 22 Patrick's Hill. It will operate, four sessions per week on a trial basis for six months from January 2000. Up-to-date treatment directories, U.K. National Aids Manuals etc, together with access to the Internet, are available.

Telephone Information:
The project continues to co-ordinate the work of the gay information line, callers who are concerned about HIV infection or anxious because they are HIV+ are referred to project workers, where appointments can be made. To date, up to 25 HIV+ people have availed of this service.
The line operates two sessions per week with an average of 12 calls per session. It is staffed by volunteers.

Gay Health Networking:

The project continues to play a role in the gay men's health network, a nation-wide group of workers in the gay HIV field. This provides a central base to produce health education material on a cost effective basis, and to organise the purchase of condoms, lubricants and other materials. The network also provides a forum for the exchange of ideas, and the development of training programmes.
The project is also centrally involved in the gay HIV strategies programme, the aim of which is to develop a partnership approach to HIV prevention between statutory groups and the gay community organisation.
This project has been involved with the Eastern, South-Eastern & Mid-Western Health Boards and has had considerable success to date.
Effective strategies have been developed within the Eastern Health Board to help facilitate the development of effective programme HIV prevention within a wide cross section of gay organisation.

Work with third level colleges:
Ronan Watters, prior to his departure to the Eastern Health Board was, as an outreach worker, involved with student organisation throughout our area. He promoted workshops on HIV prevention, the consequences of drug abuse in relationship to HIV and a wide range of related matters, providing good quality condoms for college vending machines. He also set up many safer-sex information stalls at student events. Ronan was responsible for the setting up of a committee to run and maintain the safer-sex programme in UCC. The committee has produced a leaflet for all art colleges in Cork.
Since Ronan's departure much of this work has ceased, we would see it as a priority for any full-time worker to re-activate this area of work.

Social groups:

The project has run a wide range of self-help support groups and workshops for gay men, with an emphasis on personal development, using professional facilitators. The feedback from the groups has been very positive. Each year we have organised public meetings on HIV and other health issues. Gay Men's Health Awareness weekends are planned for February and September of this year (App. 9).

Peer education in smaller groups:

Peer group work has proved the most effective means of influencing sexual behaviour within the gay community. This is also a valuable way of identifying the needs and evaluating the overall work of the project. Outreach workers organise small groups in a social setting. Through wide ranging discussions participants are encouraged to discuss issues concerning sexual practice & relationships.

This work is labour intensive but has been particularly effective.
A number of HIV+ persons have 'come out' as a result of their participation in these groups. Because of pressure of work we have not done as much work in this area as we would have liked.
We propose that this would be a central part of our work over the next year.

Training:

The project provides ongoing training for the workers together with those involved as volunteers, such as the 'Information Line', 'Icebreakers' etc.

HIV Care & Support:
Care & Support constitutes a major proportion of the workload of the project. Depending on the particular cases this can vary enormously, both in quantity and intensity. There are major issues to be resolved in this area relating to overall co-ordination, the role of the voluntary sector and the provision of adequate funding. More detailed information is contained in App.4. A car was recently purchased to enable us to visit people on a more regular basis.

Mental Health Project.
Very limited care and support is provided to an increasing number of Gay Men with mental health problems. This includes hospital and home visits, support for self help group etc. There is a very poor awareness or acknowledgement of Lesbian and Gay issues among Mental Health Professionals and Institutions in our area.

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APP. 1.

SOUTHERN GAY HEALTH PROJECT

8 SOUTH MAIN STREET

CORK

STATEMENT OF INCOME & EXPENDITURE

FOR THE YEAR ENDED 30 APRIL 1999

APP 1. (cont)

SOUTHERN GAY HEALTH PROJECT

YEAR ENDED 30 APRIL 1999

ACCOUNTANTS REPORT

We have prepared the foregoing Statement of Income & Expenditure for the Year Ended 30 April 1999 from the accounting records maintained by the above concern.

In our opinion, the financial statements give a true and fair view of the state of affairs of this concern for the period under review. We have audited the financial statements which are in agreement with the books of account.

We have obtained all the information and explanations we considered necessary for the purposes of the audit.

Daniel J. Coleman

Daniel J Coleman & Co
Accountants
Wilton House
Wilton Road
Cork

DATE: 10th February 2000

APP. 1 cont.

SOUTHERN GAY HEALTH PROJECT

STATEMENT OF INCOME AND EXPENDITURE FOR THE YEAR ENDED 30 APRIL

	1999 £	1998 £
INCOME		
Southern Health Board Grant	25,000	25,000
Donations	-	3,000
Department of Social Welfare	1,000	-
Fundraising	10,600	6,320
	36,600	34,320
EXPENDITURE		
Rent/Rates	7,200	5,600
Wages & PRSI	18,316	16,060
Light, Heat & Power	2,103	1,840
Public Liability Insurance	1,520	1,380
Postage	160	180
Travel	2,576	1,612
Printing & Design	350	1,920
Condoms	2,640	2,832
Crisis fund	2,620	2,409
Telephone	3,572	2,604
Advertising	1,747	1,294
Equipment	884	609
Sundry	2,270	1,725
Bank charges, Interest	1,901	1,634
Leasing	1,747	285
Subscriptions	790	730
Training	1,928	1,400
Repairs & Replacements	1,100	800
Accountancy	300	250
	53,724	45,164
SURPLUS/(DEFICIT)	(17,124)	(10,844)
FINANCED BY:		
Bank Overdraft	17,124	10,844

I approve the above Income and Expenditure Account and confirm that I have made available all relevant records and information for its preparation.

Arthur Leahy

Date: 12/2/2000

Appendix 1.1

SOUTHERN GAY HEALTH PROJECT

STATMENT OF INCOME AND EXPENDITURE FOR THE YEARS 1996 to 1999

INCOME	1999	1998	1997	1996	TOTAL
	25000	25000	25000	25000	100000
		3000	1700	1300	6000
	1000			750	1750
	10600	6320	5700	2400	25020
Total	**36600**	**34320**	**32400**	**29450**	**132770**
EXPENDITURE					
Rent/RateSouthern Health Boa	7200	5600	5600	5300	23700
Wages /PDonations	18316	16060	15339	14882	64597
Light/HeaDept. Social Welfare	2103	1840	1780	1650	7373
InsuranceFundraising	1520	1380	1250	850	5000
Postage	160	180	120	420	880
Travel	2576	1612	1244	2114	7546
Printing/Design	350	1920	320	3358	5948
Condoms	2640	2832	1937	3288	10697
Crisis Fund	2620	2409	2847	2551	10427
Telephone	3572	2604	2180	2630	10986
Advertising	1747	1294	1176	630	4847
Sundry	2270	1725	1151	788	5934
Bank charges/Interest	1901	1634	1136	1320	5991
Leasing	1747	285	285	1100	3417
Subscriptions	790	730	722		2242
Training	1928	1400	756		4084
Repairs/Replacements	1100	800	600		2500
Equipment	884	609	1105	800	3398
Accountancy	300	250			550
TOTAL	**53724**	**45164**	**39548**	**41681**	**180117**
Surplus/Deficit	**17124**	**10844**	**7148**	**12231**	**47347**

Appendix 2

BUGET FORCAST

INCOME

Southern Health Board	65.000
Donations	2.000
Other Grant Applications	18.000
Fund-raising	20.000
TOTAL	105.000

EXPENDITURE

Rent/Rates	8.500
Wages /PRSI	33,000
Light & Heat	2.650
Insurance	2.150
Postage	250
Travel	4.200
Transport	2.225
Printing/Design.	2.400
Condoms	3.500
Crisis Fund.	2.750
Telephone.	2.750
Advertising.	3.850
Equipment.	1.125
Leasing.	750
Bank charges/interest	2.300
Training.	2.500
Repairs and Renewals.	1.250
Subscriptions	1.000
Sundry	2.500
SUB TOTAL	89.650
Research. Project	15.000
TOTAL	104.650

Notes to Accounts.

Rent/Rates:
Office space at 22 Patricks Hill.

Wages:
Overall costs to employ one full-time and two half-time workers.

Light/ Heat:
ESB and Gas (heating)

Insurance:
Employers, public liability and misl. Insurance's.

Travel:
1999: Train; Dublin 26,Belfast 3 Limerick 5 Galway 4.
Air; London 2 Leeds 1.
These include attending regional and national Groups/Networks with which we are involved. London was for training course and Leeds was Family support visit.

Transport:
Cost of running car (shared), includes repayments, fuel, service, taxes etc.

Printing/Design:
Includes contribution to national Network costs in this area, re-launch of Hepatitis B leaflet and poster campaign.

Condoms:
Purchase of condoms, lubricant related materials.

Crisis Fund:
Includes payments to those directly affected. Accommodation, Transport, Respite etc.

Telephone:
Costs for two lines including Internet access, one mobile phone.

Advertising:
Weekly advert in Examiner and Evening Echo, Monthly Gay Community News, and misl local press.

Equipment:
Purchase of answering machine, printer and security filing cabinet.

Leasing:
Photocopier, Computer inc. services charges.

Bank,
Average overdraft is £10,000.

Training:
Cost of training materials, facilitators, accommodation, fees and other related costs.

Subscriptions:
National AIDS Manual, Gay Pos., Internet and multiple copies of HIV related Magazines etc.

Appendix 4

CARE AND SUPPORT.

Care for those who are living with HIV infection and those who have developed AIDS is provided by a number of different statutory and voluntary agencies together with support from many different individuals. Overall co-ordination has improved but is still primarily on an ad hoc basis. There is little or no co-ordination within the voluntary sector. Until recently there many tasks have depended on workers provided under the FAS Community Employment Scheme. This resource is for all practical purposes now no longer available. No alternative resources are in place to fill the resulting gap.

Many of those living with HIV are now "living well" and need a minimal degree of support. However there is a sizeable minority who do need extensive support & care. In some cases this can create a large workload which can over-stretch the available resources. Maintaining a balance between dependency and effective support is always difficult. A clearer and more effective plan for counselling services needs to be devised and implemented.

Critical Periods.

After initial diagnosis.
Compliance with drug regimes
Periods of acute illness
Terminal Illness.

Persons affected are slow to involve the volunteers of the group and very often will not do so until their health has deteriorated.

Areas of support:

Dealing with personal anger/emotional issues
Lover/Family /Friends
Work/financial/housing related issues
Sexual issues.
Profound change.

The role of the voluntary sector is critical in this area of support. However it is currently ad hoc, undefined, under resourced and lacks co-ordination.

A designated care group along the lines of Cairde should be considered to draw together the disparate and inadequate services currently available.

It is essential that the recommendation regarding co-ordination of services is implemented immediately. (7.5 S.H.B. Plan) as a forum to deal with these issues.

Appendix 5

GAY COMMUNITY

Definitions and calculation of extent.

Catchment Area .Overall area comprises

1. Cork City and County.
2. Kerry.
3. Parts of counties Limerick, Tipperary, Wexford, and Waterford.

The overall population of this area is approximately 750.000.

Estimated Gay Male Population (2.5% of overall) 18.750

Potentially active sexually active gay population 42% 7875

These figures are based on 5% of overall population being identified as homosexual. These figures would increase if we include Bisexual men, or men who would occasionally have sex with men.
Many gay men are not sexually active for many reasons.
Immigration is still a major issue within gay community.

APP. 6.

THE OTHER PLACE

The Other Place is a Lesbian and Gay Community Centre. Its main aim is to provide a resource centre catering specifically to the needs of this community. The projects undertaken are in direct response to the needs of the community. The main focus of the project is, information and outreach work.

This is done through a a number of different types of sub-projects within the centre. These provide a variety of services:

Book-shop	to provide front line drop-in and information
Café	meeting place
Social Venue	provides weekend social outlet
Information Centre	reference library
Youth Group	providing supportive space & befriending
Lesbian Health Project	information, workshops and networking
Gay Health Project	outreach & information on HIV
Community history	archiving local gay community history
Publications/Graphics	local newsletter/leaflets etc.
Self-help/Support	support for groups such as Addiction Recovery
Gay & Lesbian information line	help-line to provide information and referrals
AA Group	regular meeting of local; AA group
Icebreakers	Gay men's coming out group.

APPENDIX 7

BOARD OF MANAGEMENT

John Calnan
Donal Sheehan
Peter Kelly
David Roach
Arthur Leahy
Cyril Shannahan
Eoin Collins
Chris Robson

WORKERS (1999)

Barbara Scott
James Walsh
Ronan Waters
Arthur Leahy

VOLUNTEERS

There are 11 volunteers currently working on different aspects of the project.

SOUTHERN HEALTH BOARD

Application Form for

GRANTS TO VOLUNTARY ORGANISATIONS, SECTION 65 (HEALTH ACT 1953) AND SECTION 10 (CHILDCARE ACT 1991)

- Please answer all the questions fully and place a ( ) tick in the boxes provided.
- Any additional information which you may wish to provide may be included.

Details of Organisation

1. Name of Organisation: SOUTHERN GAY HEALTH PROJECT

When was the organisation/group established: MAY (Month) 1995 (Year)

Geographical Area Covered: SHB areas (particularly Cork City + county) see Annual Report

Tax Reference Number (see note 1) 8256161A or Charitable Status Number (CHY) —

Are you a Registered Company ☑ YES ☐ NO Registration Number. 8256161A

How many members in your organisation. 22

Aim of Organisation

2 (a) Which of the following best describes the work of your organisation. (Please tick not more than three).

advocacy	☑	community activities	☐	social/health care	☑
research	☐	counselling/support	☐	information and advice	☑
housing	☐	self help	☐	training	☐

2 (b) Target Group (Please tick not more than three).

older person	☐	women	☐	men	☑
familes	☐	carers	☐	travellers	☐
unemployed people	☐	children at risk	☐	homeless	☐
young people	☐	lone parents	☐	substance misusers	☐
people with mental health problems	☐	people with learning disabilities	☐	people with physical and sensory disabilities	☐

Other than above (please specify) gay/bisexual men

2 (c) What is the main aim of your organisation. (Please complete the sentence in no more than 15 words).

My organisation/group is established to: Promote awareness of ~~HIV~~ risks of HIV infection, STDs and other health issues. Provide support for those of us affected by HIV/AIDS. Distribute Safer-sex materials, particularly in gay venues. Ensure statutory bodies fulfill their obligations in the above areas.

Note 1. Organisations in receipt of grants between £500 and £5,000 (or between £1,000 and £5,000 where charitable status has been granted by the Revenue Commissioners) must submit a tax reference number or charitable status)

Management Committee.

3. Please list main officers.

Name: JOHN CALNAN
Address: 23 ROMAN ST, CORK
Phone No. 021-501752 (day) 024-317026 (evening)
Fax No. 021-317660 Email
Role/Position: Chairperson

Name: Donal Sheehan
Address: 24 Sullivans Quay CORK.
Phone No. 021-317660 (daytime) 087682765 (evening)
Fax No. 317660. Email
Role/Position: Treasurer

Name: Peter Kelly
Address: Seven Oaks. Frankfield. CORK.
Phone no. 087-2753875 (day) 893199. (evening)
Fax No. Email
Role/Position: Board Member

Name: David Roche
Address: 14 Alexandra Villas MILITARY HILL CORK.
Phone no. 0872408295 (daytime) 504413. (evening)
Fax No. Email
Role/Position: Board Member

Name of Contact Person if different from above:

Name: Arthur Leahy Position Held: Project Manager
Address for Correspondence: 8 SOUTH MAIN ST., CORK
Phone No: 021-278470 (daytime) 087-2776914 (evening)
Fax No. 021 552845 Email: LESGAY@INDIGO.IE

Management Details.

4 (a).	Number of people on your management committee.	8 total	8 male	female
4 (b)	How many service users are on the management committee.	2 total	2 male	female
4 (c	State Number of paid workers (if any)	4 total	3 male	female
4 (d).	State number of voluntary workers.	19 total	17 male	2 female

Activities/Services which the Organisation provides.

5 (a) **List in order of importance the services/activities which the organisation provides** (use separate sheet if necessary) **Note: Organisations submitting an annual report need not complete question 5A.**

Services/Activities	Number Availing	Frequency of Service/Activity
Support for HIV persons	14-20	weekly/daily support
Health Promotion HIV	4,000 - 5000	ongoing
Mental Health Support	40 - 50	weekly/daily support
Develop strategy plan in relation to above areas based on particular approaches outlined in Annual Report		

5 (b). What are the difficulties/problems which the group experience: Many gay/bisexual men are not open about their sexuality and as such presents particular problems in relationship to the primary aspects of our work.

Statement of organisation/voluntary contribution to the project.

6. **Please insert the added value to your organisation by:**

Volunteers (e.g. number of meetings attended, time involved, number of volunteers working).

The work of this group requires high levels of communication skills, home visits, helplines, fundraising, ~~and~~ which are the main areas of work.

Facilities (Provision of premises, equipment etc).

The Project has office facilities around 1,000 sq. ft. on Patrick's Hill in the city centre.
Facilities have been built up over the past number of years and are now of a reasonable standard.

Financial Details For Past Year

7. ***Organisations receiving grants for less than £5,000 in total from the Southern Health Board must submit for the most recent financial year either:-**

(i) audited accounts **or**

(ii) accountants report **or**

(iii) their AGM treasurer's report signed by two officers (examples attached).

***Organisations receiving grants of more than £5,000 or more in total from the Southern Health Board must submit audited accounts for their most recent financial year.**

Grant-aid sought for the coming year.

Details of Project/Service

8 (a) **Name of Project/Service:** SOUTHERN GAY HEALTH PROJECT

8 (b) Please sate the specific purpose for which the grant is now being sought? Continue work as outlined in the annual report. Employment of outreach support workers. (1 full-time, 2 part-time)

8 (c If it is a new project/service what is the start-up date _____ month _____ year

8 (d) What will be the anticipated benefits of your project/service: A reduction in levels of HIV infection, reduction in levels of STD infections. Wide distribution of safer-sex materials. Development of self-help support groups. Ensure that statutory and voluntary service providers bodies are sensitive to the above issues.

8 (e) How many people will benefit from this work.

children (0-4yrs)	children (5-12yrs)	young people (12-18yrs)	adults (18-65 yrs)	adults (65yrs +)	TOTAL
		50	4,000-5,000	4,000-5,000	4000-5000

8 (f) How will those who benefit from the service be involved in the development and running of the project/service?

The Project is part of an overall community development approach. The Project is based within the Quay Community Centre. The Centre facilitates a wide range of community activities based on voluntary involvement

Details of Cost.

8 (g) Amount of grant-aid now being sought: £ 65,000

Total Estimate Cost: £ 95,000

Breakdown of Estimated Cost.

Capital Costs:

Building	£
Refurbishment	£ 1,250
Office Equipment	£ 1,125
Transport/Vehicle	£ 2,225
Other	£
Rise -	£ 750
	£
	£
	£
	£
	£

Revenue Costs

Salaries	£ 33,000
Rent	£ 8,500
Training	£ 2,500
Travel	£ 4,200
Information	£ 3,650
Publicity	£ 3,850
~~Other~~ Heat	£ 2,650
Insurance	£ 2,150
Condoms	£ 3,500
Telephone	£ 2,750
Bank charges	£ 2,300
Misc.	2,500
Research Project	15,000
CRISIS Fund	2,750

8 (h) What is the minimum amount of grant necessary to make the project happen? £

8 (i) Has your organisation made or does it intend to make an application for a grant towards this project or any aspect of it, to any other service ☑ YES ☐ NO

If yes pleas specify amount and source: £ 5,000.

8 (j) How does your organisation intend to make up the shortfall?

The Project will continue fundraising within the community and will make applications to appropriate funding organisations

Declaration:

On behalf of SOUTHERN GAY HEALTH PROJECT

I declare that all information is true and complete to the best of my knowledge.

Name of main contact: ARTHUR LEAHY

Signature: [signature]

Date: 12/3/2000

Name of Chairperson: JOHN CALNAN

Signature: [signature]

Date: 13/3/2000

Application Checklist.

Please ☐ (tick) that you have enclosed:

For groups receiving £5,000 or less

1. Completed application form. ✓
2. A copy of Constitution or Articles and Memorandum of Association (if not previously submitted) ☐
3. Copy of audited accounts or accountants report or treasurer's AGM Report (signed by two officers) ☐
4. Completed Tax Declaration Form and Grant Acknowledgement Form. ☐

Organisations in receipt of grants from the Southern Health Board totalling £5,000 or more must also submit.

1. Completed application form. ✓
2. A copy of Constitution or Articles and Memorandum of Association (if not previously submitted) ✓
3. A current Tax Clearance Certificate. ✓
4. A copy of Audited Accounts. ✓
5. Annual Report ✓

SOUTHERN HEALTH BOARD

In Y2000 the Section 65/10 Grant will be paid directly into the organisations Bank.

Please complete the details.

Name of Organisation: Southern Grey Health Project.
8 South Main St.
Corc.

Name of Bank Account: Southern Grey Health Project.

Name and Address of Bank: AIB

Where account is held: 67 Patrick St. Corc.

Number of Bank Account: 21152085.

Signed: _____ **Signed:** _____

Chairperson. **Treasurer.**

SOUTHERN HEALTH BOARD

Name of Organisation: Southern Gay Health Project.

Tax District: Cork.

Tax Ref. Number: 8256161A.

GRANT ACKNOWLEDGEMENT

Amount of grant obtained in 1999: £25,000

I acknowledge receipt of the above grant in respect of Section 65 Grant.

(name of organisation) are in order.

TAX CLEARANCE DECLARATION

I confirm, to the best of my knowledge the Tax Affairs of Southern Gay Health Project (Cork Corporate Inc)

(name of organisation) are in order.

Signed: John P Cahon
Chairperson.

Signed: [signature]
Treasurer.

Date: [signature] 13/3/2000

GAY HIV PREVENTION: BUILDING A STRATEGY FOR THE SOUTHERN HEALTH BOARD REGION

GAY HEALTH CORK/NEXUS EUROPE

February 1999

1. BACKGROUND TO THE PROPOSAL

This following document is based on a series of consultations between members of Gay Health Cork, the Coordinator of Gay HIV Strategies, and Nexus Europe Ltd.

It has become apparent, through these discussions, that there is both the need and the opportunity to develop a coherent strategy around HIV prevention amongst Gay men in the SHB region.

1.2 Gay HIV Strategy at the National Level

The approach proposed here has been informed by progress in the ongoing implementation of such a strategy at national level[1]. The approach at national level has involved:

- Close cooperation with organisations and groups representative of the Gay community (beginning with an extensive consultation process facilitated with the help of Nexus Research).
- The development of structures, procedures and actions that are directly based upon the expressed needs of these organisations and groups (negotiated as part of the consultation process).
- Establishing a partnership between statutory and voluntary groups (including non-Gay voluntary groups).

The rationale for this approach lay in the conviction that effective prevention was less likely to arise from a 'top-down' or prescriptive approach; and much more likely to be effective if there is a real sense of ownership by the Gay community. This is in keeping with international experience. The World Health Organisation, for example has acknowledged that:

> "Health Promotion works through concrete and effective community action in setting priorities, making decisions, planning strategies and implementing them to achieve better health. At the heart of this process is the empowerment of communities, their ownership and control of their own endeavours and destinies."(WHO, 1986)

Although it is too early to be definitive about outputs and impacts of the national strategy (a formal evaluation is just beginning), some important benefits are already clear. These include:

- Building capacity within particular groups, activities and services within the Gay community.
- The development of stronger and more formalised links amongst these groups, services and activities.
- A subsequent widening and deepening of the information base regarding HIV prevention.

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1 HIV Prevention Strategies and the Gay Community, Department of Health; GLEN; Nexus, 1996

- The successful development of working partnerships with a range of statutory organisations and services (in Ireland and in Europe).

It is already evident that the strategy at national level has not only been effective in promoting safer sex within the gay community; it has also succeeded, thorough collaboration and joint endeavours, in broadening out the health promotion base to a much wider range of statutory and voluntary organisations than was the case hitherto.

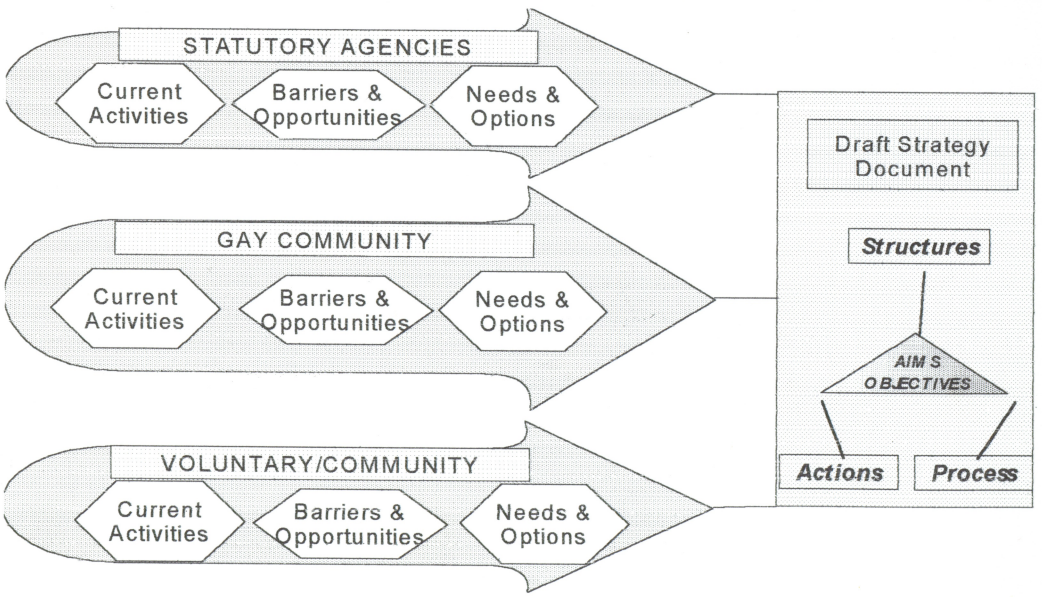
The proposal here is not to replicate the work already undertaken nationally. It is rather about initiating a similar process, in order to establish the first Gay HIV Strategy at a *regional* level.

2. PHASES AND TASKS

The diagram below summarises the various elements of work involved.

It is based on the assumption that the most effective regional strategy will depend ultimately upon:

- A full and realistic understanding of the needs, barriers and opportunities associated with all key actors within the Gay community, statutory and voluntary agencies.
- Building up consensus amongst these 'stakeholders' around the approach to be taken strategically; as well as clarity around specific responsibilities, procedures



and structures.

2.1 Consultation with Gay Community Groups, Organisations and Individuals

Could you give us some information on:

IN CORK CITY

- List of *voluntary* activities/organisations associated with gay community

- Kinds of activity/service etc they are involved in – eg counselling? Switchboard? Training etc.

- Important *social* focal points?

- What are the current drawbacks/issues/obstacles. We don't want to into too much detail here since we will be consulting people directly, but really to give a realistic picture of current constraints. Especially, what is preventing the gay community from delivering effective HIV prevention actions right now?

SHB REGION OUTSIDE CORK CITY (INCLUDING INFORMAL SOCIAL NETWORKS?)

Probably only the last two points are relevant here (as we've already discussed). But the intention is to give a picture of the kinds of contacts we'll be making with people in the community; and the kind of issues we are likely to explore with them. On the 'kinds of contact' question, it might be useful to think about how we access respondents in the absence of formalised groups – for example, through discos? Shop? Etc. etc.

2.2 Consultation with Statutory and Governmental Organisations

Following on from the issues highlighted above:

- what are the KEY agencies, and functions within these agencies, you think are centrally important.

- Indicate in each case whether local or regional.

- What are the likely focal points for consultation in each case – for example schools and awareness-building?; FAS and specific skills training? pre-training or development? Etc

Again, the idea here is to give a flavour of what could be pursued through this process – just to make it a bit more real for the reader and to make it applicable to the region.

2.2 Consultation with Other Relevant Voluntary and Community-based Interests

It is especially important that you can give some lead here on:

- Which organisations/agencies/projects/services

- Where? – maybe these groups are more important outside Cork city, if no formal gay organisation exists – eg a more progressive community development project? Or youth projects.

- Which issues could be pursued with them? For community-based groups and most voluntary groups, the issues should flow from the needs identified in 2.1 above – for example possible outlets for information?, youth development? Capacity-building initiatives? BUT also specifically think about issues to be explored with voluntary organisations that have a HIV-related function. Is the AIDS Alliance the only organisation in this category?

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