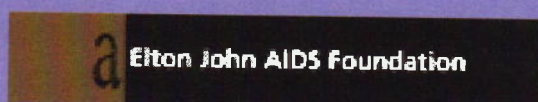




INTERNATIONAL SMALL  
GRANTS FUND (ISGF)  
BRAZIL - 2006



**FINAL REPORT**

**JANUARY, 2008.**



### Summary of the ISGF projects in São Paulo

Recipient Organisation	Area	Project Title / Objectives
<b>CFSS - Coletivo Feminista Sexualidade e Saúde</b>	Prevention	Integrating clients to the strategies for prevention of STD/AIDS, in the universe of prostitution  <i>To reduce vulnerability among males, clients of sex professionals, educating men to be protagonists of prevention and their peers</i>
<b>CORSA - Cidadania, Orgulho, Respeito, Solidariedade e Amor</b>	Life Appraisal and Prevention	Breaking through isolation  <i>Training of homosexuals on social inclusion, acceptance and sexual freedom among homosexuals</i>
<b>GAPA São Paulo - Grupo de Apoio a Prevenção a Aids</b>	Communication, Education and Human Rights	Book: Opening the doors of SUS (National Health Program)  <i>Production of book on human rights including the following subjects: citizenship, people living with HIV/AIDS, drugs, women, sex professionals, transgender and legislation of the National Health System.</i>
<b>PROAD - Programa de Atenção ao Dependente</b>	Damage Reduction	Damage Reduction Program  <i>Training and supervision of drug users and former drug users to act as damage reduction agents with the aim of reducing the risk of HIV contamination in injectable drug users.</i>
<b>SEIVA- Serviço de Esperança e Incentivo à Vida Agora</b>	Prevention and Education	Our Family  <i>HIV/AIDS/STD prevention training of Health Family Program Teams of the Municipality of Ilha Solteira and other 4 satellite towns.</i>

### Summary of the ISGF projects in Fortaleza

Recipient Organisation	Area	Project Title / Objectives
<b>APROCE - Associação de Prostitutas do Ceará</b>	Prevention	Informed and Prepared Women – Daily Action  <i>Prevention campaigns targeting sex professionals and their clients through field work</i>
<b>GAPA Ceará - Grupo de Apoio à Prevenção à Aids</b>	Information, Prevention and Human Rights	Dial AIDS  <i>Training of professionals of a Dial-in service to improve delivery of prevention information</i>
<b>Nave - Núcleo de Ação e Valorização da Espécie Humana</b>	Life improvement e Art Therapy	Art & Citizenship – A possible frontier  <i>Art Therapy activities for 80 people living with HIV/AIDS</i>



**Elton John AIDS Foundation**

**1 Blythe Road, London W14 0HG - Tel: +44-20-7603 9996**

## **GRANT REPORT COVER SHEET**

**(Please copy and attach this top sheet to subsequent report documents)**

**Please complete each section of this form FULLY and IN ENGLISH**  
**NOTE: Only provide one copy of your report, unbound and not stapled**

Your Letter of Agreement will stipulate by which date your report is due. If you are unable to complete any section of the form or have any specific problems completing your report, please indicate why. You may provide supplementary information as appropriate.

### **GENERAL INFORMATION**

**1. Name of Organisation:**

**COLETIVO FEMINISTA SEXUALIDADE E SAÚDE**

**2. Project Title to which this report relates:**

**INTEGRATING CLIENTS TO THE STRATEGIES FOR PREVENTION OF STD/AIDS, IN THE UNIVERSE OF PROSTITUTION**

**3. Telephone No:**

**+55 11 3812-8681**

**Fax No:**

**+55 11 3813-8578**

**Email address:**

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**4. Report prepared by:**

**Ana Galati**

**Position:**

**Project Coordinator**

**5. Type of Report (interim/final):**

**Final Report – II**

**6. Report Period:**

**From: April 2006**

**To: April 2007**

**7. Date of Report:**

**31/01/2008**

**Signature:**





## FINAL REPORT – INFORMATION REQUIREMENTS

### 8. Executive Summary (maximum ½ page):

- This section highlights the major activities of the project funded: results, constraints, findings, recommendations etc. It should contain major points from the rest of the report and function as “stand-alone” summary of the project funded. Please include statistics on the number of direct or indirect beneficiaries of the project, where applicable.

**Area:** Prevention

**Project Objectives:** To reduce vulnerability among males, clients of sex professionals, educating men to be protagonists of prevention and their peers

**Institution:** CFSS – Coletivo Feminista Sexualidade e Saúde

**Project Coordinator:** Ana Galati

**Website:** [www.mulheres.org.br](http://www.mulheres.org.br)

The client is a user that exists within a structure with few possibilities to diminish its vulnerability. The opposite is true. The risk, the conquest and finally the payment are part of a system to buy and sell pleasure. The risk is an adrenalin for the sexual act, since the men were mostly educated to overcome the risks. And eventually, a STD means to have an active sexual activity. The punctual client or the visitor in low frequency is different from the constant person who frequents the place, who establishes a relationship with the professional. We want to determine these differences, because they compromise the use of condoms and also, most of the clients cannot realize if they are with the symptoms of STD (HPV and syphilis). at the beginning of this project, we held a field research with the Sex Professionals themselves, it was after their complaints about the clients that we went on to a project that aimed at understanding this process. The groups formed by the sex professionals made us understand some questions in relation to this millenary practice, that is the relationship between clients and prostitutes, they live in an ambiguous relationship with these men, since they need the men for survival, but they don't like the way they are treated. In the workshops, the most surprising were the questions about the masculine sexual health, we realized the need from the men to discuss subject matters that are not usually discussed between men, the common doubts about anatomy, STD, some men had never heard about HPV, and not even how it can be caught. As men do not present symptoms, such is unfortunately a common doubt, even in relation to AIDS, there are still many concepts pre-established, they do not know about current facts and statistics on the development of the disease in heterosexual couples, they have asked about and debated myths as:

“If the men comes quickly, there is no time to catch STD/AIDS”

“If the men put it in very slowly, there won't be cracks and there won't be risks”

“Men don't get AIDS from a woman, only syphilis”

Among other ideas, which we need to discuss and show that such concepts are incorrect and they were at risk, and the fact that although they show no symptoms for HPV, it doesn't mean they don't have or wouldn't have the disease, and wouldn't pass the virus even without symptoms. This subject was the most debated one, due to the total lack of knowledge. Already during the distribution, we were very successful, the first phrase we heard was from a transvestite “Take a look at my wonderful red nails”, the identification of the professionals with red nail giving away the condoms was general, the poster was gone through the whole country of Brazil, taken by leaders of Associations in Northeast, in events and meetings in São Paulo, organized by Pastoral and by the Municipality of São Paulo. We would like to have had more time to promote really efficient

changes in the relationship between the Client, the Prostitute and the Managers, to use expressions as "Use condom" in the imperative is something everybody does, what we want is to promote a behavior change in relation to the use of condoms, but for it to really happen, the client needs to see him/herself as an agent responsible for his/her own health, and to not think the fact of paying more for not wearing the condom is something advantageous, and such change takes time, but we are sure that within the 10 months of project, we have distributed not only condoms, but more knowledge to prostitution clients, about how "HEALTH IS PRICELESS" "LET SHE (IT) TAKES CARE OF YOU". The sentence has double meaning, the condom and the prostitute takes care of the client's health.

## 9. Description and Implementation of Project:

- As per your Project Report Table.

### Project Activities

- Conduct Educational workshops;
- Survey with brothel's managers on how to create posters and the best way to exhibit them;
- Create educational posters for STD/AIDS prevention;
- Distribute the posters.

### Process Indicators and Accomplishments

**Results and Impact Indicators – Project Integrating Clients to the Strategies for Prevention of STD/AIDS, in the Universe of Prostitution – EJAF ISGF 2006 (Feb/2007)**

Activity	Date	Indicator	Number
Program presentation for people running brothels and non-brothel based hot spots	Apr, May	Number of managers contacted	20
Identification of 4 sex worker's spots with the highest client turnover, where the weekly groups will be formed	Apr, May	Number of brothels with the highest client turnover and accept to cooperate	4
Educational groups with clients (4 per month), average of 10 men per group.	May/2006 to Feb/2007	Number of participants per group	400
Completion of questionnaires by clients groups for pre- and post-intervention evaluation.	May/2006 to Feb/2007	Number of questionnaires completed	400
Condom distribution among the clients	May/2006 to Feb/2007	Number o condoms distributed	3800 (5 per client)
Identification of potential locations to conduct the educational workshops	Aug/2006	Number of identified locations	10
Educational workshops (4 per month), average of 15 men per group.	Sep/2006 a Feb/2007	Number of workshops conducted / Total number of participants	24/360
Systematization of data collected during the project	Mar/2007	Qualitative and quantitative reporting	01 report produced

## 10. Management of Project:

- Describe any changes in staffing, budget or project duration between original application and actual implementation. Please also list any contributions – cash or in-kind – to the project, including collaboration with other agencies.

We had two alterations of the technical team during the Project, Lenira Silveira and Sérgio Barbosa, who got out by personal problems, handing down the coordination of the Project to Ana Galati and Projects Assistant Maria Jucinete de Souza. As we already had made a work plan, there were no problems with this alteration for the execution of the project. About the production of the brochure, besides lack of resources, due to the low budget, there were no resources necessary for a production that met the needs we have verified on field. We decided, after discussion with the team, to make an educational poster, this action also happened because the brochure required attentive reading from the client, what would not take place in a prostitution house, according to the opinions from managers and clients.

We used leftovers from the making of other products financed by Elton John Foundation, Pact Brazil and MacArthur Foundation.

- Glass holders with educational information and phone number of disk SOS (Service of Orientation for Health), for getting information in case of doubts;
- Brochures "Be Her Friend" (which we distributed and used in some workshops);
- Educational Schedule Book (we have distributed for professionals of the female gender);
- Brochure for approach for multipliers that we have made during the previous project distributed in the Pastoral;
- Condoms donated by CRT;
- Lubricant gel for prostitutes.

#### **11. Lessons Learned/Recommendations (maximum 1 page):**

- Describe any lessons learned or broad implications of the project's results and provide any recommendation for follow-up and future activities or interventions.
- Detail any qualitative data or information that did not fit into the Project Report Table (such as unexpected outcomes).

After a meeting with the brothel's managers, to get authorization for the workshops, we noticed that they were very protective with the clients referred as punctual clients, who book an hour during the day and are of difficult access. Eventual clients do not want to be disturbed. The only way to deal with these difficulties was to meet the eventual clients in the surrounding bars where they usually go before going into the brothel. The night clubs have both policemen and delinquents as clients and the sex workers consider both to have the same power "both policemen and delinquents have the same power" (sentence quoted by a sex worker), some of them do not want to pay for the service or wear condoms.

The night clubs' clients refused to complete the questionnaire, all questions were asked informally.

An important lesson learned for the project implementation was the understanding that we must respect the fact that the sex worker is the "product" and the client is the "consumer".

The difficulty of working with prostitution clients is due to the protection granted by managers of night clubs, and due to the clients themselves behave as eventual, they always say it is their first time in that place.

The customers do not admit paying more to not use condom, some even say they are already known and trust the Prostitute.

To get the trust from the houses' managers, beginning by the body-guard, is something essential, because they were very clear they were afraid our team would get in the way of the house's movement and we would make the clients go away.

Respecting the fact that the Prostitute is a "product" of the house and customer is the consumer was very difficult, but fundamental for any plan of educational action in the houses. Although we had freedom to act in the streets, we couldn't get a desirable number.

#### **12. Materials/Products:**

- List the key materials/products developed for this project and where appropriate quantities.

1,000 posters "HEALTH IS PRICELESS" "LET HER TAKE CARE OF YOU"

#### **13. Future Plans:**

- Please outline how the programme hopes to develop and if appropriate, what arrangements exist in respect of operational and financial planning to ensure its sustainability.

The need to continue this project is our goal, we have learned a lot with this project, but is too little time for gaining the trust from Managers of the houses, which is necessary for any agreement.

We also would like to make a brochure as firstly planned in this project, once we realized the doubts that the men had at the workshops were common, doubts about the functioning of the body, erection, loss of erection...

To make another one thousand posters, as the success in distribution was better than we expected, the identification of the sex professionals and customers was immediate, for the transvestites it was also well accepted.

#### **14. Future Grant Application**

- If you intend applying for a further grant, please **DO NOT** include a grant application with your report, please contact the Foundation to discuss your future grant requirements.

**Please note: If you received your reporting forms by post  
the Project Report Table is available by email**

## Project Report Table for the Elton John AIDS Foundation

**Name of Organisation:** COLETIVO FEMINISTA

**Name of Project:** INTEGRATING CLIENTS TO THE STRATEGIES FOR PREVENTION OF STD/AIDS, IN THE UNIVERSE OF PROSTITUTION

**Overall Aim of project:**

(use a separate sheet for each aim)

**Table prepared by:** Ana Galati

**Date:** 31/01/08

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
<i>List objectives exactly as set out in your application</i>	<i>List activities exactly as set out in your application</i>	<i>List the people who organised/ran the activity</i>	<i>List which groups were targeted (e.g. girls aged 16-24) and how many people actually benefited from the activity</i>	<i>Detail the actual timeframe of the activity e.g. undertaken between ..., evaluated on ...</i>	<i>Detail actual output of activity, measured as set out in your application</i>	<i>If the actual output differs from the expected output (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
					<i>Detail actual impact of activity, measured as set out in your application</i>	<i>If the actual impact differs from the expected impact (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
OBJECTIVE 1: To prevent and to reduce the vulnerability of the sex professionals in relation to their customers.	1.1. Identify and map 4 prostitution houses.	Sérgio Barbosa; João Silva; Ana Galatti.	Male customers of prostitutes, from 23 to 65 years-old. Direct beneficiary: 1,000 customers and indirectly: 200 prostitutes.	April to May 2006.	Contact with 20 managers of 4 prostitution houses. 100% of participation. Indicator: monthly reports resulting from meetings with managers of the prostitution houses, performed by Coletivo Feminista.	Yes.	N/A



Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
						Expected impact = actual impact?	Any resulting action?
					Knowledge of the managers about the existence of the project. 100% of monthly reports resulting from meetings with managers of the prostitution houses, performed by Coletivo Feminista.	Yes.	N/A
	1.2. Performance of 1 weekly workshop at the identified prostitution houses.	João Silva; Ana Galatti; Cleone Santos.	10 men per workshop.	February to November 2006.	Debate with the group of 10 men (weekly) about the negotiation of price for the use of condoms. 100% of awareness that anyone is a client and that he is also vulnerable. Indicator: forms filled out and informal interviews. Evaluation of the knowledge on STD/AIDS.	Yes.	N/A
	1.3 Creation of 2,000 educational posters.	Rafael and Felipe (in association with the Coletivo Feministas and managers)	Distribution in 168 houses of the district of Pinheiros, at the central part of the city, bars and stations, and 6 Brazilian States.	September to January 2007.	Identification from the prostitute with the posters. 100% acceptance of prostitution houses and strategic locations for distribution of posters.	70% had no knowledge	Forwards to services of orientation.
					Identification from the prostitute with the posters. There was an impact bigger than expected.	Visits in some houses and locations where the posters were delivered.	They were requested and forwarded to other prostitution houses and to Mozambique and Angola (countries speaking Portuguese)



**Elton John AIDS Foundation**

**1 Blythe Road, London W14 0HG - Tel: +44-20-7603 9996**

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### **GENERAL INFORMATION**

**1. Name of Organisation:**

**CORSA – CIDADANIA, ORGULHO, RESPEITO, SOLIDARIEDADE E AMOR**

**2. Project Title to which this report relates:**

**BREAKING THROUGH ISOLATION**

**3. Telephone No:**

**Fax No:**

**Email address:**

**+55 11 8404-7589**

**[nandodeandrade@yahoo.com.br](mailto:nandodeandrade@yahoo.com.br)**

**4. Report prepared by:**

**Position:**

**Fernando Andrade Silva**

**Director**

**5. Type of Report (interim/final):**

**Final Report – II**

**6. Report Period:**

**From: April 2006**

**To: July 2007**

**7. Date of Report:**

**Signature:**

**31/01/2008**



## FINAL REPORT – INFORMATION REQUIREMENTS

### 8. Executive Summary (maximum ½ page):

- This section highlights the major activities of the project funded: results, constraints, findings, recommendations etc. It should contain major points from the rest of the report and function as “stand-alone” summary of the project funded. Please include statistics on the number of direct or indirect beneficiaries of the project, where applicable.

**Area:** Life Appraisal and Prevention  
**Project Objectives:** Training of homosexuals on social inclusion, acceptance and sexual freedom among homosexuals  
**Institution:** CORSA – Cidadania, Orgulho, Respeito, Solidariedade e Amor (Citizenship, Pride, Respect, Solidarity and Love)  
**Project Coordinator:** Fernando Andrade Silva  
**Website:** [www.corsa.org.br](http://www.corsa.org.br)

Our mission is to enable homosexuals living in the southern region of the City of São Paulo to meet their peers in an environment of friendship and freedom of expression, which would allow them to feel comfortable with their sexuality, and to reflect on their personal lives, their position in the community they live in, their views of the world and society in general.

#### Results:

- Dissemination of safe sex practices, giving guidance to participants on using condoms (male and female) and lubricating gel, as well as comprehensive information on STDs and AIDS;
- Reduction / Extinction of internalized prejudiced experienced by some participants;
- Training multiplying agents to disseminate awareness of the rights and duties inherent in citizenship, among homosexuals;
- Socialization of group participants among themselves by holding social events that took place outside scheduled meetings;
- Referrals to take STD and HIV tests;
- Referrals to receive Hepatitis B vaccination;
- Referrals to psychotherapy for more serious cases of internalized prejudice.

#### Constraints:

- When advertising the groups, the lack of specific information materials;
- Initially, the lack of adequate space for forming the 3rd group;
- The impossibility to administer courses to health professionals due to their scheduling problems - the courses were to help improve their reception and care of the LGBT population (reduction of prejudice among health care staff).



#### Evaluation:

- The realisation of this project gave us the opportunity to gauge the direness of the situation faced by young homosexuals who reside in the poorer, outlying areas of the Greater São Paulo; not only is prejudice harbored by the people around them, but it also dwells in themselves. It thus causes them a great deal of harm, hindering their own self-acceptance of who they are, closing them up to new friendships and shutting them out from the enjoyment of their citizen rights, by which they would be able to fulfill their duties and demand their rights;
- We also found a high degree of misinformation about STDs and AIDS, and a general lack of preparation to deal with these topics;
- We therefore make a positive evaluation of our actions in these locations, by which we spread our knowledge and contributed to reducing the vulnerability that prevails in these areas.

#### 9. Description and Implementation of Project:

- As per your Project Report Table.

The project's main goal was to contribute to reducing vulnerability to infection by HIV and other STDs in the young homosexual population in poorer, outlying areas of the Greater São Paulo Metropolitan Region, as well as to encourage them to meet their peers in a framework of friendship and freedom, in which they may feel more comfortable about their sexuality. This enables them to reflect on their personal lives, their position in the communities to which they belong, their worldviews and their relationship to society. It also lead them to recast opinions and convictions, and remold behavioral patterns, as well as allowing them to find a space in the LGBT organized movement and in the political arena in general.

#### 10. Management of Project:

- Describe any changes in staffing, budget or project duration between original application and actual implementation. Please also list any contributions – cash or in-kind – to the project, including collaboration with other agencies.

##### Budget changes:

- We used money that had been budgeted for buying a DVD player to buy furniture (tables and chairs for one group), since the institution in which that group meets already had a DVD player and did not need a second one;
- We supplemented with CORSA's own funds the amount budgeted for buying a camcorder and a digital camera, in order to purchase equipments that were of a higher quality and technologically more performing;
- We used amounts budgeted for buying office material to pay for our office maintenance expenses (electricity, condominium charges and cooking gas), which we determined to be more urgent at the time.

##### Changes in group locations:

- Our initial assessment found a need for a peer support group in the central region of São Paulo, and we therefore decided to establish one group there, in order to meet this demand;
- In view of the difficulty of implementing the 3rd group in the outskirts of São Paulo, we made a partnership with another organisation in the town of Diadema, and established a group in that municipality (also belonging to the São Paulo Metropolitan Region), where the need for such action proved to be greater than what we had initially expected in São Paulo.

**11. Lessons Learned/Recommendations (maximum 1 page):**

- Describe any lessons learned or broad implications of the project's results and provide any recommendation for follow-up and future activities or interventions.
- Detail any qualitative data or information that did not fit into the Project Report Table (such as unexpected outcomes).

Implementing this project taught us to better deal with young people, and gave us a measure of their great need for information and acceptance

**12. Materials/Products:**

- List the key materials/products developed for this project and where appropriate quantities.

**13. Future Plans:**

- Please outline how the programme hopes to develop and if appropriate, what arrangements exist in respect of operational and financial planning to ensure its sustainability.

Because the project aimed to create support groups, we strived to do this in such a way that each participant would feel responsible for the group's existence. Thus, nine months after the project ended, the groups are continuing to meet regularly and to organise activities and appear to be as tightly knit as ever, and growing steadily.

We would need more financial resources to be able to feed intellectual content to the groups, by enrolling specialists to give talks on various topics of interest to the LGBT community, but the lack of such resources does not represent a threat for the groups' subsistence, because they are already well established.

**14. Future Grant Application**

- If you intend applying for a further grant, please **DO NOT** include a grant application with your report, please contact the Foundation to discuss your future grant requirements.

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## Report Table for Elton John AIDS Foundation Project

**Name of Organisation:** CORSA - CIDADANIA, ORGULHO, RESPEITO, SOLIDARIEDADE E AMOR

**Project Title:** BREAKING THROUGH ISOLATION

**Overall Aim of Project:** t: Contributing to reducing the vulnerability to HIV and other STD infections in the young homosexual population living in the “periferia” (poorer, outlying areas) of the São Paulo Metropolitan Region

**Table prepared by:** Fernando Andrade Silva

(use a separate sheet for each aim)

**Date:** 31/01/2008

Objective	Activities	Activity carried out by:	Type and Number of Beneficiaries	Time Schedule	Actual Result	Expected Result = Actual Result?	What Action Was Taken?
					Actual Impact	Expected Impact = Actual Impact?	What Action Was Taken?
<i>List objective(s) as described in the original grant request</i>	<i>List activities as described in the original plan (use one line for each activity)</i>	<i>List the persons responsible for organizing/carrying out the activity</i>	<i>List the groups targeted by the activity (e.g.: young women aged 16-24), and state how many people actually benefited from it.</i>		<i>Give details on the activity's actual results, evaluated with the indicator proposed in the original plan</i>	<i>If the actual result differs from the expected result (as described in the original plan), give reasons for this.</i>	<i>What action was taken or is planned to address the topics described in the previous column?</i>
					<i>Give details on the impact from the activity, evaluated with the indicator proposed in the original plan</i>	<i>If the actual impact differs from the expected impact (as described in the original plan), give reasons for this.</i>	<i>What action was taken or is planned to address the topics described in the previous column?</i>
OBJECTIVE 1: Dissemination of safer sex practices, focusing on using condoms and lubricating gel (information on forms of transmission for HIV and STDs, especially through anal and oral sex practices).	1.1 Participation in the VI Semana da Juventude - "Juventude Assumindo seu Lugar" (VI Youth Week - "Youth Taking Up Their Place"), in the city of Diadema	Fernando and Francisco (in partnership with CRJ - Centro de Referência e Juventude, Reference Center for Youth)	Approximately 5,000 people benefited from the activity, being young people (male and female), aged from 13 to 25 years, including homosexuals, bisexuals, transvestites, transsexuals and heterosexuals.	Carried out from November 27, 2006 to December 3, 2006. Evaluated between December 5, 2006 and December 20, 2006.	Results: Large-scale dissemination of safer sex practices, distribution of materials and guidance on condom use (male and female condoms) 5,000 people (expected: 2,000 people) Indicator: Estimate of number of participants in the Youth Week.	Number of persons reached: above our expectations	N/A



Objective	Activities	Activity carried out by:	Type and Number of Beneficiaries	Time Schedule	Actual Result	Expected Result = Actual Result?	What Action Was Taken?
					Actual Impact	Expected Impact = Actual Impact?	What Action Was Taken?
					Impact: Awareness of the importance of condom use. Indicator: We detected a pattern of appreciation in regard to our action, and greater interest in using these materials, through informal interviews.	YES	N/A
	1.2 Safer Sex Workshop directed at young homosexual males	Alexandre Yamaçake	23 direct beneficiaries and about 230 indirect beneficiaries, LGBT males aged from 18 to 45 years.	Carried out on October 2, 2006. Evaluated between October 3 and 10, 2006.	Results: Specific guidance directed at men on safer sex practices, personal care and STD/AIDS prevention. Indicator: participants' lists	YES	N/A
					Impact: 83% rate of participants' awareness on practicing and disseminating the information learned. Indicator: informal interviews	YES	N/A
	1.3 Safer Sex Workshop directed at young homosexual females	Irina Bacci	10 direct beneficiaries and about 100 indirect beneficiaries, mostly homosexual females aged from 18 to 30 years.	Carried out on October 2, 2006. Evaluated between October 3 and 10, 2006.	Results: Specific guidance directed at women on safer sex practices, personal care and STD/AIDS prevention. Indicator: informal interviews	YES	N/A

Objective	Activities	Activity carried out by:	Type and Number of Beneficiaries	Time Schedule	Actual Result	Expected Result = Actual Result?	What Action Was Taken?
					Actual Impact	Expected Impact = Actual Impact?	What Action Was Taken?
					Impact: 90% rate of participants' awareness on practicing and disseminating the information learned. Indicator: informal interviews	YES	N/A
	1.4 STD/AIDS Prevention Workshop	Helena Marques and Nancy Cintra	21 beneficiaries, aged from 18 to 45 years, LGBT	Carried out on September 4, 2006. Evaluated on September 4, 2006.	Results: Demonstration of risk levels of different sexual practices. Illustration of alternative, diverse sexual practices in which the group participants demonstrated the relevant risks themselves. Indicator: informal interviews	YES	N/A
					Impact: 100% awareness rate of the risk level of safe sexual practices. Indicator: informal interviews	YES	N/A
OBJECTIVE 2: Fighting internalized prejudices (strengthening self-esteem and developing citizenship skills)	2.1 Participation in the VI Semana da Juventude - "Juventude Assumindo seu Lugar", (VI Youth Week - "Youth Taking Up Their	Fernando and Francisco (in partnership with CRJ - Centro de Referência e Juventude, Reference Center for Youth)	Approximately 5,000 people benefited from the activity, being young people (male and female), aged from 13 to 25 years, including	Carried out from November 27, 2006 to December 3, 2006. Evaluated between December 5, 2006 and December 20, 2006.	Results: Significant mobilization and participation of the youths in all the activities. Indicator: informal interviews, number of participants	SIM	N/A

Objective	Activities	Activity carried out by:	Type and Number of Beneficiaries	Time Schedule	Actual Result	Expected Result = Actual Result?	What Action Was Taken?
					Actual Impact	Expected Impact = Actual Impact?	What Action Was Taken?
	Place”), in the city of Diadema		homosexuals, bisexuals, transvestites, transsexuals and heterosexuals.		Impact: Greater acceptance / respect of sexual diversity and gender identity among the youths. Indicator: informal interviews on interest shown in becoming acquainted with health services and our support group.	SIM	N/A
	2.2 Trip to the countryside for participants of the groups.	Fernando, Francisco and Edvan	Direct beneficiaries: 15 participants; LGBT youths aged from 18 to 30 years.	Carried out from November 27, 2006 to December 3, 2006. Evaluated between December 5, 2006 and December 20, 2006.	Results: Full integration among participants of two of the groups. Indicator: Focal groups.	YES	N/A
					Impact: Awareness-raising on citizen rights and duties; self-acceptance of own sexual orientation and gender identity. Indicator: Talking circle and debates.	YES	N/A
	2.3 Preparation Phase and Subsequent Participation of the Groups in the XI Parada do Orgulho GLBTT (LGBT Pride Parade) of São Paulo	Fernando, Francisco and Edvan	30 direct beneficiaries, about 900 indirect beneficiaries; persons aged from 13 to 50 years (on average), LGBT and heterosexual.	Preparation: carried out in April and May, 2007; The Parade was held on June 17, 2007. Evaluation carried out in June 2007.	Result: An exercise in integration and living together as a group.. Indicator: number of participants post Parade	YES	N/A



Objective	Activities	Activity carried out by:	Type and Number of Beneficiaries	Time Schedule	Actual Result	Expected Result = Actual Result?	What Action Was Taken?
					Actual Impact	Expected Impact = Actual Impact?	What Action Was Taken?
					Impact: Practice in citizen participation, by exercising the right to use public space and to express affection in it. Indicator: Informal analysis of participants' satisfaction.	YES	N/A
	2.4 Cross-Dressing Party	Marcella Monteiro and Patricia Lua (transvestites)	23 direct beneficiaries, aged from 18 to 45 years, LGBT	Carried out on August 27, 2007. Evaluated on August 27, 2007.	Result: Exchange of social roles. Indicator: number of participants	YES	N/A
					Impact: Awareness-raising on different identity constructions Indicator: Informal analysis of the satisfaction level for all participants.	YES	N/A



**Elton John AIDS Foundation**

**1 Blythe Road, London W14 0HG - Tel: +44-20-7603 9996**

## **GRANT REPORT COVER SHEET**

**(Please copy and attach this top sheet to subsequent report documents)**

**Please complete each section of this form FULLY and IN ENGLISH**  
**NOTE: Only provide one copy of your report, unbound and not stapled**

Your Letter of Agreement will stipulate by which date your report is due. If you are unable to complete any section of the form or have any specific problems completing your report, please indicate why. You may provide supplementary information as appropriate.

### **GENERAL INFORMATION**

**1. Name of Organisation:**

**GAPA/SP – GRUPO DE APOIO À PREVENÇÃO À AIDS**

**2. Project Title to which this report relates:**

**BOOK: OPENING THE DOORS OF SUS (NATIONAL HEALTH PROGRAM)**

**3. Telephone No:**

**+55 11 3333-5454**

**Fax No:**

**+55 11 3333-2528**

**Email address:**

**[gapabrsp@terra.com.br](mailto:gapabrsp@terra.com.br)**

**4. Report prepared by:**

**Aurea Celeste da Silva Abbade**

**Position:**

**Vice President**

**5. Type of Report (interim/final):**

**Final Report – II**

**6. Report Period:**

**From: May, 2006**

**To: December, 2007**

**7. Date of Report:**

**31/01/2008**

**Signature:**



## Elton John AIDS Foundation

### FINAL REPORT – INFORMATION REQUIREMENTS

#### 8. Executive Summary (maximum ½ page):

- This section highlights the major activities of the project funded: results, constraints, findings, recommendations etc. It should contain major points from the rest of the report and function as “stand-alone” summary of the project funded. Please include statistics on the number of direct or indirect beneficiaries of the project, where applicable.

**Area:** Communication, Education and Human Rights

**Project Objectives:** Production of book on human rights including the following subjects: citizenship, people living with HIV/AIDS, drugs, women, sex professionals, transgender and legislation of the National Health System

**Institution:** GAP/SP – Grupo de Apoio a Prevenção à AIDS (Support Group for AIDS Prevention)

**Project Coordinators:** Áurea Celeste da Silva Abbade and Fátima Baião

**Website:** [www.gapabrsp.org.br](http://www.gapabrsp.org.br)

The main objective of the project was to publish a book entitled “Abrindo as portas do SUS” (Opening the Doors of SUS – National Health Program) with articles of several people engaged in the fight for human rights. Each of these specialists produced a three to five pages article/text on the following subjects: Daily exercise of citizenship at the SUS”, “SUS and People Living With HIV/AIDS”, “Drugs and SUS Abuse”, “SUS and Women”, SUS and Sex Workers”, “SUS and Transgender”, “What is the SUS” and “SUS and Legislation”.

We believe that this book will be an important tool for people living with HIV/AIDS who need to use the SUS (public health system) on a regular basis, in many cases not having information about the rights and benefits to which they are entitled to through the SUS and where to claim these rights in case the services are not being offered according to what it is established by law. We also believe that this book will be a great tool which will help people living and coexisting with HIV/AIDS to fight for their rights. Petition templates will be included in the book.

The proposal to address SUS was presented following some difficulties and Project approval and after our participation in the lecture on SUS in the AIDS Prevention Seminar conducted in Belo Horizonte. The Idea of the book came about due to the questions raised by the audience mostly constituted by women and people living with HIV/AIDS.

The coordination team selected the topics to be addressed and who would be invited to write the texts. The invitations were then sent and promptly accepted.

The book has been printed and will be launched in March 2008.

#### 9. Description and Implementation of Project:

- As per your Project Report Table.
- Production and review of texts - completed;
- Printing – completed;
- Book launch – March 2008. The book launch will probably take place at São Paulo State AIDS Reference Centre.
  - Distribution of the books to all NGOs in the country;



- Distribution of the books in São Paulo to all SAES/UBS (Referral Centres /Primary care Units) - Health care Units reference centres;
- Distribution of books for all persons present in the book launching.

#### **10. Management of Project:**

- Describe any changes in staffing, budget or project duration between original application and actual implementation. Please also list any contributions – cash or in-kind – to the project, including collaboration with other agencies.

N/A

#### **11. Lessons Learned/Recommendations (maximum 1 page):**

- Describe any lessons learned or broad implications of the project's results and provide any recommendation for follow-up and future activities or interventions.
- Detail any qualitative data or information that did not fit into the Project Report Table (such as unexpected outcomes).

#### Constraints:

The project found difficulties due to the delay on approval of budget and by attempting to get one more partner, in order to be able to make more copies, to reach a higher number of people.

#### **12. Materials/Products:**

- List the key materials/products developed for this project and where appropriate quantities.

The book itself

#### **13. Future Plans:**

- Please outline how the programme hopes to develop and if appropriate, what arrangements exist in respect of operational and financial planning to ensure its sustainability.

To publish the book through electronic means, to allow it to be reached by a larger number of people, request to GT Unaid.

#### **14. Future Grant Application**

- If you intend applying for a further grant, please **DO NOT** include a grant application with your report, please contact the Foundation to discuss your future grant requirements.

**Please note: If you received your reporting forms by post  
the Project Report Table is available by email**

## Project Report Table for the Elton John AIDS Foundation

**Name of Organisation:** GRUPO DE APOIO À PREVENÇÃO À AIDS – GAPA-SP

**Name of Project:** BOOK: OPENING THE DOORS OF SUS  
(NATIONAL HEALTH PROGRAM)

**Overall Aim of project:**

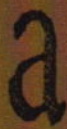
(use a separate  
sheet for each  
aim)

**Table prepared by:** Aurea Celeste da Silva Abbade

**Date:** 31/01/08

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
<i>List objectives exactly as set out in your application</i>	<i>List activities exactly as set out in your application</i>	<i>List the people who organised/ran the activity</i>	<i>List which groups were targeted (e.g. girls aged 16-24) and how many people actually benefited from the activity</i>	<i>Detail the actual timeframe of the activity e.g. undertaken between..., evaluated on...</i>	<i>Detail actual output of activity, measured as set out in your application</i>	<i>If the actual output differs from the expected output (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
					<i>Detail actual impact of activity, measured as set out in your application</i>	<i>If the actual impact differs from the expected impact (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
OBJECTIVE 1: To make easier the access to SUS by population living with HIV/AIDS, at their most diverse specifications	1.1 Select the target public for lectures, seminars and trainings.	Áurea Celeste da Silva Abbade and Fátima Baião.	100 people living with HIV/AIDS.	January and February 2006.	100% of the selection intended. 180 cards filled out.	Yes.	N/A
					N/A	N/A	N/A
	1.2 To contact 4 lectures, seminars on SUS with the target public.	Áurea Celeste da Silva Abbade, Fátima Baião, José Carlos Veloso Pereira da Silva, Gustavo Bezerril de Menezes	People living with HIV/AIDS recruited at the GAPA headquarters and on health services (SUS).	March, May, July and September.	100% of the lectures were held each one with 25 people. List of attendance and inscriptions of cards.	Yes.	N/A

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
					100% of knowledge on SUS. Questionnaire of evaluation and knowledge.	Yes.	N/A
	1.3 Seek specialists in the most diverse specialized areas of HIV/AIDS for explaining about SUS in a clear and objective way, for elaboration of a book.	Áurea Celeste da Silva Abbade and Fátima Baião.	People living with HIV/AIDS in their most diverse specifications (women, children and adolescents, sex professionals, transvestites and transgenders)	October.	Selection of 10 specialists. Production of articles.	Yes.	N/A
	1.4 Edition and distribution of 1,000 editions of the book "Human Rights and HIV/AIDS". "Opening doors for SUS" using popular language, to convey the information with exercise of rights resulting from Law 8080/90, that created SUS (Unique Health System).	Áurea Celeste da Silva Abbade, Fátima Baião, José Carlos Veloso Pereira da Silva, Gustavo Bezerril de Menezes, Paulo Giacomini, Hilda Sabino Siemons, Wilza Vieira Vilela, Roberto Domingues, Adréa Domanico, Widney Feres Contrera	452 NGOs AIDS of Brazil, 172 NGOs Aids of State of São Paulo, 16 GAPAs in Brazil, 100 people who attended the seminars, Governmental Agencies and Libraries of Health Services of São Paulo.	Months from November to December.	Book in final edition due to capture of additional resources.	Distribution under delay.	Getting additional resources.
					N/A	N/A	N/A



**Elton John AIDS Foundation**

**1 Blythe Road, London W14 0HG - Tel: +44-20-7603 9996**

## **GRANT REPORT COVER SHEET**

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**NOTE: Only provide one copy of your report, unbound and not stapled**

Your Letter of Agreement will stipulate by which date your report is due. If you are unable to complete any section of the form or have any specific problems completing your report, please indicate why. You may provide supplementary information as appropriate.

### **GENERAL INFORMATION**

**1. Name of Organisation:**

**PROAD – PROGRAMA DE ATENÇÃO AO DEPENDENTE**

**2. Project Title to which this report relates:**

**DAMAGE REDUCTION PROGRAM**

**3. Telephone No:**

**Fax No:**

**Email address:**

**+55 11 5579-1543**

**[ritahaiek@uol.com.br](mailto:ritahaiek@uol.com.br)**

**4. Report prepared by:**

**Position:**

**Rita de Cássia Haiek**

**Project Coordinator**

**5. Type of Report (interim/final):**

**Final Report – II**

**6. Report Period:**

**From: May, 2006**

**To: June, 2007**

**7. Date of Report:**

**Signature:**

**31/01/2008**





## FINAL REPORT – INFORMATION REQUIREMENTS

### 8. Executive Summary (maximum ½ page):

- This section highlights the major activities of the project funded: results, constraints, findings, recommendations etc. It should contain major points from the rest of the report and function as “stand-alone” summary of the project funded. Please include statistics on the number of direct or indirect beneficiaries of the project, where applicable.

**Area:** Damage Reduction  
**Project Objectives:** Training and supervision of drug users and former drug users to act as damage reduction agents with the aim of reducing injectable drug users.  
**Institution:** PROAD – Programa de Atenção ao Dependente (Drug Addiction Support Program)  
**Project Coordinator:** Rita de Cássia Haiek

**Previous data:** The project increased the service of exchange/distribution of syringes and the number of users of injectable drugs (UDI) assisted by PROAD. In this program, active users or ex-drug users assisted by PROAD were trained to act as Damage Reducers in regions previously identified as of high risk for the use of injectable drugs and contamination of HIV, be it by the shared use of syringes and needles or by practice of sex without protection.

**Objective:** To prevent contamination by HIV and HCV (hepatitis C) among users of injectable drugs, by use of sterile syringes without sharing at each injection and use of condoms in any intercourse.

**Method:** The method used was Education by peers, qualifying patients who are active users of drugs or inactive ones, for approach in locations where there is concentration of injectable drug users and transvestites who use syringes and needles for introduction of silicone to get female features. The strategy used was the advising to not share syringes and to have safe sex, and to decrease the pattern of use or replace by drugs with less harmful effects.

**Results:** Prevention kits with dischargeable syringes were distributed and so were condoms, in order to introduce them in the pattern of drug use of this population. The project has brought benefits for a total 512 UDI. 3833 syringes and 6300 condoms were distributed to them.

More than half of them, 252 UDI, were referred to STD/AIDS services and to services of treatment for alcohol and drugs.

### 9. Description and Implementation of Project:

- As per your Project Report Table.

With the objective of strengthening and enlarging the service of Distribution and Exchange of syringes on PROAD, in order to avoid sharing of syringes among users of injectable drugs, preventing infection by HIV and Hepatitis C, the following activities were developed:

1. Identify patients under treatment on PROAD to act as Damage Reducers, giving them the opportunity to work for the health of their pairs in the community.
2. Training of such users in themes relevant to STD/AIDS and drugs.
3. Visits on field for approaching and distribution of Prevention Kits, containing dischargeable syringes and other safe injection equipments, in the pattern of use of

injectable drugs UDI and change behavior with the intention of obtaining an epidemiological impact in this population.

4. Approach of UD to suggest substitution of Crack by Marijuana, as measure of RD the population user of Crack found on field during the execution of the project, who don't want to or can't stop using the drug.
5. Referring of UD and UDI to basic health services and to those specialized in STD/AIDS for testing and treatment, about dependency on alcohol and drugs.
6. Weekly meetings and supervision visits of the work with the coordinator.
7. Medical and psychological follow-up of the Damage Reducers by the PROAD team, to avoid fall backs.

#### **10. Management of Project:**

- Describe any changes in staffing, budget or project duration between original application and actual implementation. Please also list any contributions – cash or in-kind – to the project, including collaboration with other agencies.

The project management was performed by coordinator, by weekly meetings of supervision and by visits on work field.

The management was based in goals and quality and quantity indicators that served to us as parameters for the size and power of the project:

- a) Number of patients identified and trained, linked to the program.
- b) Control worksheets with the following data:
  - Number of people reached
  - Sex
  - Age
  - Number of Prevention Kits (syringes and condoms) distributed
  - Fields and communities open to work
- c) Recruiting of collaborators, friends of the project. This item revealed the support of the community to the project, as well as the program visibility in that location. The community established exchange stations with the volunteers.
- d) Referrals to the health network, UBS, specialized assistance in testing and treatment of STD/AIDS and Hepatitis by SAEs and CTAs and drug treatments, being the PROAD itself the unit of reference for such cases.

We point out to the support of State Program STD/AIDS, that provided the necessary Prevention Kits in the second semester, according to the growth of the project.

The support from people of the community who were willing to exchange syringes also have contributed for increasing the project, and it must be highlighted.

Sensibilised health units, have helped us to provide a quicker assistance to the population, considering the profile of resistance and low adhesion to treatment that this population presents in its history.

The back team of psychologists and psychiatrists of the clinic in attention to chemical dependency at PROAD who followed the Damage Reducers during the project.

#### **11. Lessons Learned/Recommendations (maximum 1 page):**

- Describe any lessons learned or broad implications of the project's results and provide any recommendation for follow-up and future activities or interventions.

- Detail any qualitative data or information that did not fit into the Project Report Table (such as unexpected outcomes).

The major difficulty found in this first semester was the fall back to the use of drugs by the part of damage reducers, what compromised temporarily his/her production and required efforts from the team to support him/her and to preserve his/her health and keep quality at reach from work.

Two other elements represented obstacles to the work:

- The fact that some drug users feared to take part in the project, because they thought the Program of Reduction of Damages could attract the police.
- The constant migration of the individual using drugs in the city of São Paulo, which has a huge territorial dimension and a population of about 15 million inhabitants, many times this made the project lose touch with the drugs user and it had to constantly change the field location.

Two effects of cocaine deserve to be mentioned, since they can make the contact with this user more difficult: craving and paranoia.

The craving is identified by the intense desire of using drugs, making the user in this state to be unavailable for contact or any other activity with other purposes.

It also makes him/her use (inject) the drug many times per day, seeking to get rid of this sensation.

In paranoia, the user feels he's being pursued, and fears any approximation, judging it to be harmful to him/her at that moment.

Today the program is specially concerned about the UDI of female gender, since qualitative studies in the region (Haiek, 2003) and the experience accumulated by the program of Reduction of damages reveal that women depending on drugs are very susceptible to practice sex without protection, in 2 situations:

- One of the main situations of vulnerability is the one when the women exchange sex by the drug.
- The craving contributes for the women to accept any condition for sexual relation, determined by the one who holds the drug.

In situations of craving, due to the mental state, the concern about prevention is null, and when there is exchange of sex by drugs, the one offering the drug sets the basis for the sexual intercourse.

Therefore, the Damage Reduction Program realizes the need of PRD to develop techniques to advise on safe sex, directed to women and couples who consider the cultural and gender issues that generate vulnerability.

## **12. Materials/Products:**

- List the key materials/products developed for this project and where appropriate quantities.

## **13. Future Plans:**

- Please outline how the programme hopes to develop and if appropriate, what arrangements exist in respect of operational and financial planning to ensure its sustainability.

## **14. Future Grant Application**

- If you intend applying for a further grant, please **DO NOT** include a grant application with your report, please contact the Foundation to discuss your future grant requirements.

**Please note: If you received your reporting forms by post  
the Project Report Table is available by email**

## Project Report Table for the Elton John AIDS Foundation

**Name of Organisation:** PROGRAMA DE ATENÇÃO AO DEPENDENTE

**Overall Aim of project:** Prevention against HIV and HCV between UDI

(use a separate  
sheet for each  
aim)

**Name of Project:** DAMAGE REDUCTION PROGRAM

**Table prepared by:** Rita de Cássia Haiek

**Date:** 31/01/08

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
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<i>List objectives exactly as set out in your application</i>	<i>List activities exactly as set out in your application</i>	<i>List the people who organised/ran the activity</i>	<i>List which groups were targeted (e.g. girls aged 16-24) and how many people actually benefited from the activity</i>	<i>Detail the actual timeframe of the activity e.g. undertaken between..., evaluated on...</i>	<i>Detail actual <u>output</u> of activity, measured as set out in your application</i>	<i>If the actual <u>output</u> differs from the expected output (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
					<i>Detail actual <u>impact</u> of activity, measured as set out in your application</i>	<i>If the actual <u>impact</u> differs from the expected impact (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
<b>OBJECTIVE 1:</b> Program of reduction of damages and risks to drug users	1.1. Formation of field team, by interviews with patients recommended by PROAD team, with the history of injectable drugs use.	Rita de Cássia Haiek, psychologist with experience in the area.	2 patients and 2 substitutes.	January 2006.	Team formed. Indicator: PROAD report.	Yes.	N/A
					N/A	N/A	N/A
<b>OBJECTIVE 2:</b> To qualify Damage Reducers to develop work of prevention against risks next to drug users.	2.1 Training by classes and workshops with themes relevant to STD/AIDS and drugs.	Rita de Cássia Haiek, Marcelo Niel (psychiatrist) and Fernanda Moreira (psychiatrist)	4 patients of PROAD with the history of injectable drug use	February 2006.	Trained reducers.	Yes.	N/A
					Qualified reducers to distribute prevention kits and advise about STD/AIDS. Indicator: evaluation of PROAD	Yes.	N/A
<b>OBJECTIVE 3:</b> To prevent against HIV and HCV between UDI	Activity on field with visits to approach UDI, presentation of work and offering of prevention kit.	Damage Reducers, Elisângela and Carlos	UDI approached during visits on field	March to December 2006.	512 UDIs reached with 3833 syringes and 6300 condoms distributed to them. Indicator: number of users approached and of materials distributed	Results higher than expected in 30%.	Opening of 5 new work fields and request of new remittance of prevention kits to the State Government.



Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
					Decrease of HIV and HCV contamination by the use of syringes and needles not shared, and by safe sex by the part of UDI. Indicator: official data showing decrease on index of contamination of this population.	Yes.	N/A
OBJECTIVE 4: Reduce damages of crack use and contamination by HIV/HCV by sex	4.1 Approach of a huge number of crack users found on field for advising to replace crack by hemp and for the practice of safe sex	Reducers of damages, Elisângela and Carlos	Crack users found on field	March to December 2006.	900 users of drugs approached and advised to replace crack by hemp and to practice safe sex. Indicator: number of users approached and advised	Results exceeded in 50%.	It was necessary to negotiate next to the State Government a superior amount of condoms to be distributed to this population.
					80% of the crack users (UD) adhered to condom. 60% of them adhered to partial replacement of crack by hemp, being 20% of those adhering completely to the substitution. 30% of them sought treatment on PROAD. 30% of them returned to the educational system. Questionnaires were created for survey of these data.	Yes.	V/A
OBJECTIVE 5: To make the access easier and enable drug users to make use of the public health network.	5.1 advising and forwarding to the STD/AIDS services and treatment of chemical dependency	Reducers of damages, Elisângela and Carlos	Drug users	March to December 2006.	252 UDI forwarded and 270 UD forwarded to the public network. Indicator: number of forwardings.	Yes.	Awareness of Network professionals, by meetings, to receive such cases. Fixing a monthly goal of forwarding for each reducer.

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
					Improvement on global health of the drug users and decrease of prejudice of health professionals against this population.	Yes.	N/A
OBJECTIVE 6: Ensure the quality of work and health of worker.	6.1 Visits on field and weekly meetings, medical and psychological consultations for reducers of damages.	Rita de Cássia Haiek and team of doctors and psychologists of PROAD	Users of drugs and reducers of damages.	March to December 2006.	Healthy reducers with mental health preserved and work better performed. Indicator: medical and psychological evaluation of reducers and worksheets of project monitoring	Yes.	N/A
					More efficiency and inclusion of actions and avoid fallbacks. Indicator: periodical evaluations of reducers.	Yes.	Orientation, evaluation and monitoring of activities and data, and follow-up by multiprofessional team.



# Elton John AIDS Foundation

1 Blythe Road, London W14 0HG - Tel: +44-20-7603 9996

## **GRANT REPORT COVER SHEET**

(Please copy and attach this top sheet to subsequent report documents)

**Please complete each section of this form FULLY and IN ENGLISH**  
**NOTE: Only provide one copy of your report, unbound and not stapled**

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### **GENERAL INFORMATION**

1. **Name of Organisation:**

SEIVA – SERVIÇO DE ESPERANÇA E INCENTIVO À VIDA AGORA

2. **Project Title to which this report relates:**

Our Family

3. **Telephone No:**

+55 18 3742-2198

**Fax No:**

+55 18 3742-2198

**Email address:**

[seiva@projetonet.com.br](mailto:seiva@projetonet.com.br)

4. **Report prepared by:**

Dr. Mário Márcio Estremote

**Position:**

Project Coordinator

5. **Type of Report (interim/final):**

Final Report – II

6. **Report Period:**

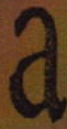
From: June 2006

To: December 2007

7. **Date of Report:**

01/21/2008

**Signature:**



## FINAL REPORT – INFORMATION REQUIREMENTS

### 8. Executive Summary (maximum ½ page):

- This section highlights the major activities of the project funded: results, constraints, findings, recommendations etc. It should contain major points from the rest of the report and function as “stand-alone” summary of the project funded. Please include statistics on the number of direct or indirect beneficiaries of the project, where applicable.

**Area:** Prevention and Education

**Project Objectives:** HIV/AIDS/STD prevention training of Health Family Program teams of the Municipality of Ilha Solteira and other 4 satellite towns

**Institution:** SEIVA – Serviço de Esperança e Incentivo à Vida Agora

**Project Coordinator:** Dr. Mário Márcio Estremote

**Website:** [www.ilhasolteira.com.br/seiva](http://www.ilhasolteira.com.br/seiva)

The Project performed training with 14 teams of the Family Health Program of 05 municipalities, including 120 health professionals, 7,000 families, reaching a total of about 37,000 people. There were 324 hours of trainings, qualifying assistants, nurse technicians, nurses, attendants and community agents. After performing the training, there was the implementation of preventive activities and forwards performed door by door, theme workshops, lectures in schools and on PSFs, dealing with the integral health and prevention on DST/AIDS next to the most diverse populations, as for example, women, teenagers, old aged, GLBTT, sex professionals and drug users. Each municipality, besides including all the micro areas with all the population, also began work with some populations they considered as the most vulnerable ones.

### 9. Description and Implementation of Project:

- As per your Project Report Table.

It is shown on the table reporting each activity how they were implemented and performed, the difficulties found, the challenges and the impacts caused.

### 10. Management of Project:

- Describe any changes in staffing, budget or project duration between original application and actual implementation. Please also list any contributions – cash or in-kind – to the project, including collaboration with other agencies.

The team performing the project did not change, but the PSFs teams of some municipalities did so, thus we had to perform new trainings in two municipalities, with the major part of the professionals, and the project had an increase of 06 months of execution due to the start of trainings. However, as explained, due also to the training performed by the Secretary of Health of the State of São Paulo, with the health community agents, and due to some cities go through changes of most of their employees within PSFs, so requiring the performance of new qualifications.

### 11. Lessons Learned/Recommendations (maximum 1 page):

- Describe any lessons learned or broad implications of the project's results and provide any recommendation for follow-up and future activities or interventions.



- Detail any qualitative data or information that did not fit into the Project Report Table (such as unexpected outcomes).

There was resistance from the population at the beginning of the project in the activities of orientation, concerning the use of condoms mainly for married women and old aged, in a different way than men, GBBTT and teenagers, who were very open for discussion. Another difficulty found at the beginning of the project was with the work of awareness about the use of condoms in sexual relations.

With the evaluation of the activities developed in prevention door by door, we noticed that the work is hard and detailed, and it must be calculated at the minimum details so we can get the desired impact and the health agent's direct contact with the population enables planning the methods to diminish the vulnerability of each person and of the population in general, so softening the individual and social program vulnerability.

#### **12. Materials/Products:**

- List the key materials/products developed for this project and where appropriate quantities.

500 serial albums on STD/AIDS and family planning;

100 DVDs with videos to deal with prevention for several populations.

#### **13. Future Plans:**

- Please outline how the programme hopes to develop and if appropriate, what arrangements exist in respect of operational and financial planning to ensure its sustainability.

As each municipality already has implemented their activities, we intend to have twice a year monitoring and evaluation of how the activities are being executed, and if the program of prevention against STD/HIV/AIDS still continue to be worked on, which population they are getting to, which is the most vulnerable population being assisted, what is the impact that such investment with qualification and educational material and with the implantation of activities has caused in the community in general. Also edition of a book reporting all the experiences and activities performed.

#### **14. Future Grant Application**

- If you intend applying for a further grant, please **DO NOT** include a grant application with your report, please contact the Foundation to discuss your future grant requirements.

**Please note: If you received your reporting forms by post  
the Project Report Table is available by email**

## Project Report Table for the Elton John AIDS Foundation

**Name of Organization:** SEIVA – SERVIÇO DE ESPERANÇA E INCENTIVO A VIDA AGORA

**Overall Goal of the Project:** To qualify professionals of PSF of 05 municipalities (Ilha Solteira, Pereira Barreto, Sud Menucci, Itapura and Andradina) of the region of Ilha Solteira, for the work of prevention against STD/HIV/AIDS, to promote health and social inclusion.

(use a separate sheet for each aim)

**Name of Project:** OUR FAMILY

**Table prepared by:** Dr. Mário Márcio Estremote

**Date:** 31/01/2008

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
<i>List objectives exactly as set out in your application</i>	<i>List activities exactly as set out in your application</i>	<i>List the people who organised/ran the activity</i>	<i>List which groups were targeted (e.g. girls aged 16-24) and how many people actually benefited from the activity</i>	<i>Detail the actual timeframe of the activity e.g. undertaken between..., evaluated on...</i>	<i>Detail actual output of activity, measured as set out in your application</i>	<i>If the actual output differs from the expected output (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
					<i>Detail actual impact of activity, measured as set out in your application</i>	<i>If the actual impact differs from the expected impact (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
<b>OBJECTIVE 1: To qualify professionals of PSF of municipalities</b>	1.1 Planning, selection of themes and preparation of professionals.	<b>Mário Márcio Estremote, Technical Coordinator, Márcia Oliveira dos Santos, Health Agent; Alessandra Marinho, Social Assistant; Tais de Brito Santos, Health Agent, and José Edson Gomes de Siqueira, Nurse Technician</b>	<b>5 Professionals responsible for the execution of the project</b>	01/05/2007 to 01/23/2007.	100% of planning executed. Indicator: work plan.	Yes.	N/A.
					There was the search for themes to be approached, studies of such themes, preparation of professionals and structuring of trainings. Indicator: schedule and program content of workshops.	Yes.	N/A.
	1.2 Contact and register professionals who will participate on training.	<b>Mário Márcio Estremote, Technical Coordinator, Márcia Oliveira dos Santos, Health Agent; Alessandra Marinho, Social Assistant; Tais de</b>	<b>150 professionals of PSF</b>	01/10/2007 to 02/20/2007.	<b>80% effectively participated on the trainings and activities proposed.</b>	<b>20% of the professionals did not participated on the trainings and activities due to holidays and re-structuring of the Programs themselves.</b>	<b>Training of professionals replaced.</b>

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
						Expected impact = actual impact?	Any resulting action?
		Brito Santos, Health Agent, and José Edson Gomes de Siqueira, President			100% adhesion of health managers and PSF professionals participating on the training for implantation of the project at the municipalities.	Yes.	N/A
OBJECTIVE 2: To buy and make the materials.	2.1 Reproduction of materials for execution of the project.	José Edson Gomes de Siqueira, President, and Lourival Alves da Costa, Professor.	120 professionals of PSS and to the population of 37,000 people to be assisted by them.	03/01/2007 to 03/31/2007	100% of the material was reproduced. Material on STD/AIDS and family planning, DVDs with videos for preventive work, purchase of penis prosthesis and acrylic pelvis.	Yes.	N/A
					Structuring of family health programs for the performance of works and activities proposed. Indicator: report of materials delivery.	Yes.	N/A
OBJECTIVE 3: To qualify PSF professionals for works of prevention against STD/AIDS.	3.1 Performance of 7 trainings of 16 hours	Mário Márcio Estremote, Technical Coordinator, Márcia Oliveira dos Santos, Health Agent; Alessandra Marinho, Social Assistant; Tais de Brito Santos, Health Agent, and José Edson Gomes de Siqueira, President	120 professionals of PSS and to the population of 37,000 people to be assisted by them.	04/02/2007 to 10/31/2007.	We managed to reach the 120 professionals. The number of trainings increased to 9 due to some PSF teams to present changes of professionals.	Yes.	Superior results: 2 other trainings besides the ones programmed were performed.

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
OBJECTIVE 4: To evaluate the trainings.	4.1 Performance of training evaluation.	Mário Márcio Estremote, Technical Coordinator, Márcia Oliveira dos Santos, Health Agent; Alessandra Marinho, Social Assistant; Tais de Brito Santos, Health Agent, and José Edson Gomes de Siqueira, President	5 Professionals responsible for the execution of the project and 120 professionals of PSF.	04/02/2007 to 10/31/2007.	By the final evaluations of each training, 90% of the professionals got prepared to perform the works proposed.	Yes.	N/A
					100% of the evaluations analyzed.	Yes.	N/A
					80% of the trainees indicated the trainings were excellent due to the language easy for both the health professionals and the populations they would work with, being such data found in all the final evaluations of the trainings.	Yes.	N/A
OBJECTIVE 5: To evaluate and monitor the actions of the project	5.1 performance of 7 meetings for evaluation and monitoring	Mário Márcio Estremote, Technical Coordinator, José Edson Gomes de Siqueira, President, and 5 people responsible for the PSFs.	Both the project execution team and the 5 PSFs.	04/20/2007 to 11/28/2007.	100% of the meetings performed. Indicator: Lists of attendance and reports of meetings.	Yes.	N/A
					Changes of intervention strategies and on execution of activities performed by some municipalities.	Yes.	N/A
OBJECTIVE 6: Close the project	6.1 Performance of closing event	Mário Márcio Estremote, Technical Coordinator, Márcia Oliveira dos Santos, Health Agent; Alessandra Marinho, Social Assistant; Tais de	SIVA team and 20 professionals of PSFs.	12/17/2007	100% of the municipalities presented the activities performed. Indicator: Lists of attendance, reports	Yes.	N/A



Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
		Brito Santos, Health Agent, and José Edson Gomes de Siqueira, President			of activities and photos.		
					During the Workshop performed it was demonstrated that the methodology used brought benefits to the professionals trained, as well as to the whole community included in the project.	Yes.	N/A



# Elton John AIDS Foundation

1 Blythe Road, London W14 0HG - Tel: +44-20-7603 9996

## **GRANT REPORT COVER SHEET**

(Please copy and attach this top sheet to subsequent report documents)

Please complete each section of this form **FULLY** and **IN ENGLISH**  
**NOTE: Only provide one copy of your report, unbound and not stapled**

Your Letter of Agreement will stipulate by which date your report is due. If you are unable to complete any section of the form or have any specific problems completing your report, please indicate why. You may provide supplementary information as appropriate.

### **GENERAL INFORMATION**

1. **Name of Organisation:**

APROCE – ASSOCIAÇÃO DAS PROSTITUTAS DO CEARÁ

2. **Project Title to which this report relates:**

INFORMED AND PREPARED WOMAN – DAILY ACTION

3. **Telephone No:**

+55 85 3472-1005

**Fax No:**

+55 85 3472-1005

**Email address:**

[aproce@yahoo.com.br](mailto:aproce@yahoo.com.br)

4. **Report prepared by:**

Rosarina de Fátima Sampaio da Silva

**Position:**

Coordinator

5. **Type of Report (interim/final):**

Final Report – II

6. **Report Period:**

From: April 2006

To: April 2007

7. **Date of Report:**

31/01/2008

**Signature:**



# Elton John AIDS Foundation

## FINAL REPORT – INFORMATION REQUIREMENTS

### 8. Executive Summary (maximum ½ page):

- This section highlights the major activities of the project funded: results, constraints, findings, recommendations etc. It should contain major points from the rest of the report and function as “stand-alone” summary of the project funded. Please include statistics on the number of direct or indirect beneficiaries of the project, where applicable.

<b>Area:</b>	Prevention
<b>Project Objectives:</b>	Prevention campaigns targeting sex professionals and their clients through field work
<b>Institution:</b>	APROCE – Associação de Prostitutas do Ceará (Association of Sex Workers of Ceará)
<b>Project Coordinator:</b>	Rosarina de Fátima Sampaio da Silva

The project Women Prepared and Informed Daily Action has as goal to benefit 800 prostitute women, 200 partners and 300 people of the community, by behavioral intervention. A continuous process of education and prevention against STD/HIV/AIDS, prevention against the improper use of legal or illegal drugs, aiming at the reduction of damages, seeking the promotion of health by stressing the importance of performing the exams of prevention for cancer on uterine colon and breasts, anti-HIV, besides immunization for hepatitis and tetanus. the project also reinforces associations with SUS, in the sense to improve the access and assistance of the target audience to the health units for receiving other health services that may be necessary, as for example, dental or eye treatment, etc. One of the great obstacles we find when we perform a prevention work with women in our country is the doubt about the gender relations, since the women seem to have great difficulty to manage the condom with love. With the prostitute is no different, they use the condoms with their clients, but hardly ever use it with their boyfriends, fixed partners, and this becomes a great problem for us.

Along with this report, follow enclosed the results of researches that we apply and we can verify that, despite of the difficulties and obstacles, we had a good result. We managed to get to our goal and to cause a behavior change in 75 per cent of our target public, including partners and people of the community. We have also reached excellent results about the number of people participating on the educational/informative activities offered by the project. we got satisfied with the number of women who understood the importance of periodically making preventive exams, and this same number of women performed the exams and reported they will have them monthly.

Another very positive point was the participation of men in the educational activities, the prostitutes said it is extremely important they help to divulge the importance of the use of condoms in order to avoid sexually transmitted diseases.

300 people of the community participated in the campaigns, they attended theatrical plays and lectures, the participation of the community in these events does not only help the multiplication of information on prevention against HIV/AIDS and other sexually transmittable diseases, but it also helps against the prejudice and discrimination against the prostitute women.

### 9. Description and Implementation of Project:

- As per your Project Report Table.

The Project Women Prepared and Informed Daily Action has reached 1,300 people, being 800 prostitutes, 200 partners and 300 people of the community.

At the beginning of the works it was made a mapping of areas to be worked on and the registration of 800 prostitutes.

It performed a behavioral intervention, by making the information easier, about prevention against HIV/AIDS and such other sexually transmittable diseases, by lectures, workshops, awareness campaigns and theatre.

The areas included were: Servilul, Vicente Pizon, Praia do Futuro, Beira Mar and Centro. These are prostitution areas, but the project also had action on schools, universities and community associations.

The educational and informative activities were performed as lectures, workshops, campaigns and theatre.

The evaluation was performed by analysis of monthly reports, surveys, applied at the beginning and at the end of the project. the means of inspection were based on photos, reports, depositions from the target public, visits of supervision at the areas included, monitoring visits performed by the coordinator.

There were also visits from the project's team to the health stations, in order to strengthen associations, to make viable the assistance and performance of exams by the target public.

#### **10. Management of Project:**

- Describe any changes in staffing, budget or project duration between original application and actual implementation. Please also list any contributions – cash or in-kind – to the project, including collaboration with other agencies.

There were no changes in the team.

The Project lasted for 12 months.

The only change on the budget was the reduction they made, a project which was estimated in 30,000 (thirty thousand BRL) was reduced to 25,000 (twenty-five thousand).

#### **11. Lessons Learned/Recommendations (maximum 1 page):**

- Describe any lessons learned or broad implications of the project's results and provide any recommendation for follow-up and future activities or interventions.
- Detail any qualitative data or information that did not fit into the Project Report Table (such as unexpected outcomes).

One of the lessons we learned is that it is a lot easier to work and to develop a project when we can count on partnerships as for example from the community of the area included. Having included the clients/associations was also essential for the success of our actions. It is possible to have many conclusions by the reports of educators and target public, in this sense, we can analyze both by the reports from the project's team and the target population, that these projects are very important to make easier the access to information of people who are extremely in need of everything, including information.

#### **12. Materials/Products:**

- List the key materials/products developed for this project and where appropriate quantities.

#### **13. Future Plans:**

- Please outline how the programme hopes to develop and if appropriate, what arrangements exist in respect of operational and financial planning to ensure its sustainability.

Even after the end of the project, APROCE continues to keep protected the areas included and the people who participated in the project continue to receive assistance, getting orientations, information and condoms, the prostitutes who were outstanding were identified as leaders and are transmitting the information acquired for their new colleagues who did not had access to the project. All the people who were connected are registered in APROCE so the contact is not lost. we plan for another year of project, when we can have the opportunity to reassert what we have done and to link a greater number of people, both of prostitute women and partners and people from the community.

There were established associations with the State and Municipal Health Departments, to give away female and male condoms, in order to grant sustenance to the project's actions after it ends.

#### **14. Future Grant Application**

- If you intend applying for a further grant, please **DO NOT** include a grant application with your report, please contact the Foundation to discuss your future grant requirements.

**Please note: If you received your reporting forms by post  
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## Project Report Table for the Elton John AIDS Foundation

**Name of Organisation:** APROCE - ASSOCIAÇÃO DAS PROSTITUTAS DO CEARÁ **Name of Project:** INFORMED AND PREPARED WOMAN – DAILY ACTION

**Overall Aim of project:** The aim of the Project is to reach 800 female sex workers, 200 partners and 300 people indirectly approached in field work or prevention campaigns. In total the Project aims to directly and indirectly reach 1300 people, among sex workers, partners and community offering information on prevention methods

(use a separate sheet for each aim)

**Date:** 31/01/2008

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
<i>List objectives exactly as set out in your application</i>	<i>List activities exactly as set out in your application</i>	<i>List the people who organised/ran the activity</i>	<i>List which groups were targeted (e.g. girls aged 16-24) and how many people actually benefited from the activity</i>	<i>Detail the actual timeframe of the activity e.g. undertaken between... evaluated on...</i>	<i>Detail actual output of activity, measured as set out in your application</i>	<i>If the actual output differs from the expected output (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
					<i>Detail actual impact of activity, measured as set out in your application</i>	<i>If the actual impact differs from the expected impact (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
Objective 1: To develop inclusive actions and activities to prevent against STD/HIV/AIDS, in the areas, prostitute houses, bars, stations, streets and squares of the city.	Performance of a strategic planning with the coordination and project agents. Qualification of educators and agents of the project	coordinator and team of the project	800 prostitute women, 200 partners, 300 people of the community	1 <sup>st</sup> month of performance of the project	project coordinated, reaching goals	Yes.	N/A
					all the actions proposed performed successfully.	Yes.	N/A
Objective 2: Perform educational activities inherent to STD/HIV/AIDS, as lectures, workshops, at	performance of educational workshops about STD/HIV/AIDS and sexuality. performance of meetings with the	teachers and agents of the project	800 prostitute women, 200 partners, 300 people of the community	from the 2nd month to the 12th month of the project	target audience having knowledge about STD/HIV/AIDS increased in 75 per cent.	Yes.	N/A

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
						Expected impact = actual impact?	
the locations of services from the project.	coordination of the project and agents.				target public knowing how to identify the signs and symptoms of STDs and to use condoms as protection barrier.	Yes.	N/A
					target audience having knowledge about STD/HIV/AIDS increased in 75 per cent. By theatrical plays and awareness campaigns	Yes.	N/A
Objective 3: Perform 06 educational campaigns in the areas of assistance, holding on to playful techniques, theatre of informative kind, distribution of educational material.	performance of 06 educational campaigns. presentation of 06 theatre plays, distribution of educational/informational materials.	teachers and agents of the project	800 prostitute women, 200 partners, 300 people of the community	2 <sup>nd</sup> , 4 <sup>th</sup> , 6 <sup>th</sup> , 8 <sup>th</sup> , 10 <sup>th</sup> , 12 <sup>th</sup> month of the project.	target public knowing how to identify the signs and symptoms of STDs and to use condoms as protection barrier.	Yes.	N/A
					1000 questionnaires applied and analyzed	Yes.	N/A
Objective 4: Perform a diagnosis of the target population,	application of surveys, evaluation of studies by target population.			2 <sup>nd</sup> , 3 <sup>rd</sup> , 4 <sup>th</sup> month of the project	target public knowing how to identify the signs and symptoms of STDs and to use condoms as protection barrier.	Yes.	N/A
					800 women participated in the workshops, 295 partners attended the workshops	Yes.	N/A
Objective5: To promote educational activities, stimulating the use of condoms with the partner	performance of workshops about STD/HIV/AIDS, safe/protected sex and about self-esteem	teachers and agents of the project	800 prostitute women, 200 partners	from the 2nd month to the 12th month of the project	target public knowing how to identify the signs and symptoms of STDs and to use condoms as protection barrier.	Yes.	N/A
					800 women participated in the workshops, 295 partners attended the workshops	Yes.	N/A

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
					target public knowing how to identify the signs and symptoms of STDs and to use condoms as protection barrier.	Yes.	N/A
Objective 6: To promote actions and to encourage the performance of preventive exams	lectures for awareness on the importance of performing preventive exams.		800 prostitute women, 200 partners, 300 people of the community	from the 2nd month to the 12th month of the project	800 women participated in the workshops, 295 partners attended the workshops	Yes.	N/A
Objective 7: Increase the knowledge of the target population about the prevention against improper use of drugs and reduction of damages	performance of self-esteem workshops and for valuing life. Performance of workshops, prevention against the use of drugs and reduction of damages.	teachers and agents of the project			target public knowing how to identify the signs and symptoms of STDs and to use condoms as protection barrier.	Yes.	N/A
Objective 8: To promote actions, aiming at strengthening the process of a self sustainable APROCE.	performance of partnerships with the health municipal and state secretary, in order to give away masculine and feminine condoms for the maintenance of the project.	project coordination	800 prostitute women.	from the 2nd month to the 12th month of the project	800 women participated in the workshops, 291 partners attended the workshops	Yes.	N/A
Objective 9: To perform lectures, workshops and educational campaigns in schools, universities, companies and associations.	organization of the services day and pathological evaluation, simple and educational. Performance of lectures, workshops and educational campaigns in schools, universities and community associations.	teachers and agents of the project			800 women participated in the workshops, 298 partners attended the workshops target public knowing how to identify the signs and symptoms of STDs and to use condoms as protection barrier.	Yes.	N/A



**Elton John AIDS Foundation**

**1 Blythe Road, London W14 0HG - Tel: +44-20-7603 9996**

## **GRANT REPORT COVER SHEET**

**(Please copy and attach this top sheet to subsequent report documents)**

**Please complete each section of this form FULLY and IN ENGLISH**  
**NOTE: Only provide one copy of your report, unbound and not stapled**

Your Letter of Agreement will stipulate by which date your report is due. If you are unable to complete any section of the form or have any specific problems completing your report, please indicate why. You may provide supplementary information as appropriate.

### **GENERAL INFORMATION**

**1. Name of Organisation:**

**GAPA/CE – GRUPO DE APOIO À PREVENÇÃO À AIDS**

**2. Project Title to which this report relates:**

**DIAL AIDS**

**3. Telephone No:**

**+55 85 3252- 1233**

**Fax No:**

**+55 85 3253- 4159**

**Email address:**

**[marcos.silva.social@gmail.com](mailto:marcos.silva.social@gmail.com)**

**4. Report prepared by:**

**Marcos Antonio Silva**

**Position:**

**Project Coordinator**

**5. Type of Report (interim/final):**

**Final Report – II**

**6. Report Period:**

**From: 01/10/2006**

**To: 20/03/2007**

**7. Date of Report:**

**31/01/2008**

**Signature:**



# Elton John AIDS Foundation

## FINAL REPORT – INFORMATION REQUIREMENTS

### 8. Executive Summary (maximum ½ page):

- This section highlights the major activities of the project funded: results, constraints, findings, recommendations etc. It should contain major points from the rest of the report and function as “stand-alone” summary of the project funded. Please include statistics on the number of direct or indirect beneficiaries of the project, where applicable.

**Area:** Information, Prevention and Human Rights  
**Project Objectives:** Training of professionals of a Dial-in service to improve delivery of prevention information  
**Institution:** GAPA-CE – Grupo de Apoio à Prevenção à AIDS  
**Project Coordinator:** Marcos Antonio Silva  
**Website:** [www.gapace.com.br](http://www.gapace.com.br)

The work of the assistance service by phone, Disk AIDS, is focused on 2,000 people directly reached (phone dials), 3,500,000 indirectly reached (other services provided by the institution, as lectures, workshops, information stands, etc.).

We intend to attend the population in general, because we work in the perspective of serving calls generated by doubts, regardless of who has the doubt, men or women, teenagers or adults, ultimately, the one concerned about prevention.

The services of Disk AIDS is the only one existing in the State, being available to the users since the year 1996, counting with the volunteer collaboration from the members of GAPA-CE. Only in the year 2003, this service had financial support, and in the other years, the fees related to maintenance of the line, transportation of volunteers and such other expenses were in charge of the ONG.

Where to have the anti-AIDS test and about the practice of safe sex, these are the main doubts of those using the phone services, which keeps anonymous the one who wishes to get answers to their doubts and to receive orientation about risks of contamination and forms of prevention against AIDS.

Due a larger divulgation in 2004, we saw an increase in the number of calls, what is requiring more dedication from the part of the volunteers. We set a special plan to avoid any failure in the service hours and reviewed our useful addresses book to be sure that all the services, as testing centers for example, are working in the right conditions to attend the demand. A specific datum we noticed is the profile of the person looking for Disk AIDS, once most of the calls is made by people from the feminine sex, with doubts on the forms of contamination and symptoms of AIDS.

By a continuous evaluation, we intend to follow step by step the outcome of the project. With the possibility to be seeking possible solutions for eventual problems. All the calls originated by the service are taken in our database for a statistical survey, with quality and quantity features. These data enable us to follow a number of services and to know the location, age, sex, school level, how the person got to know about Disk AIDS, and such other questions directed to the problem of STD/AIDS or appointment of a specialized Health Unit to perform the anti-HIV Test, Syphilis Serology. These data are kept month by month in a form of Disk AIDS, to be typed in our database in the Excel Office program, under File: Annual Statistics and recorded in the Folder: Documents of Disk AIDS, in order to serve as scientific material and research material for studies of comparison of data collected from the group.



## 9. Description and Implementation of Project:

- As per your Project Report Table.

### Activities

Activity	Time frame	Description	#
Recruitment and screening – capacity building	03/Feb/2006	Number of people recruited	10
Select trainee call operators among those qualified	07/Feb and Mar/2006	Number of selected trainees	04
Acquisition of general use materials	24/Jan, Feb and Jul/2006	Acquisition of general use materials	02
Development of educational material for the participants	Monthly	Development of educational material.	03
Capacity building sessions	02/02/2006	Renting a location	01
Define members who will participate in the study group	08/03/2006	Number of participants	04
Define the group to run phone service and shifts for <i>the AIDS Hotline</i>	08/03/2006	Number of selected trainees	04
Define administrative meetings	09/03/2006 Every fortnight	Number of meetings.	12
Create texts with information on STD/AIDS prevention and similar conditions	15/Jun/2006	Number of educational materials produced	10
Study group meetings	20/03/2006 Every fortnight	Number of group meetings	12
Art creation and production of posters and flyers	07/Mar and Aug/2006	Produced material	1.500
Define thematic and strategy scheduling for study group operation	01/Mar/2006	Planning Meeting	01
Art creation and production of the out bus	Feb/Mar and Aug/2006	Produced material	400
Marketing and advertising for December 1st	10/Sep/Oct and Nov 2006	Produced material.	5.000
Media interviews on topics related to December 1 <sup>st</sup> celebration	15/Sep/Oct and Nov 2006	# of interviews	05
Phone service to provide specialized information on STD/AIDS	Daily	Number of answered phone calls.	2.000
Assessment and monitoring	Bimonthly	# of reports	06

## 10. Management of Project:

- Describe any changes in staffing, budget or project duration between original application and actual implementation. Please also list any contributions – cash or in-kind – to the project, including collaboration with other agencies.

## 11. Lessons Learned/Recommendations (maximum 1 page):

- Describe any lessons learned or broad implications of the project's results and provide any recommendation for follow-up and future activities or interventions.
- Detail any qualitative data or information that did not fit into the Project Report Table (such as unexpected outcomes).

During the Project there was special concern regarding dissemination of information about the project and partnerships with other Institutions including television networks, newspapers, postal service, local community radio broadcasters, volunteers and a bus company

The advertisement of the AIDS Hotline number in posters exhibited in Seminars, Events and in the media was well accepted and facilitated due to the good reputation GAPA/CE has gained through the good work of its member in developing several projects with the community of Fortaleza.

## 12. Materials/Products:

- List the key materials/products developed for this project and where appropriate quantities.

Pamphlets: 5,500

Posters: 31,014

Reports: 52

Fliers = 8,000 (donation)

Bus Door Advertisements = 10 lines of great circulation

**13. Future Plans:**

- Please outline how the programme hopes to develop and if appropriate, what arrangements exist in respect of operational and financial planning to ensure its sustainability.

**14. Future Grant Application**

- If you intend applying for a further grant, please **DO NOT** include a grant application with your report, please contact the Foundation to discuss your future grant requirements.

**Please note: If you received your reporting forms by post  
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## Project Report Table for the Elton John AIDS Foundation

**Name of Organization:** GRUPO DE APOIO À PREVENÇÃO À AIDS NO CEARÁ

**Overall Aim of project:**

(utilize  
uma folha  
separada  
para cada  
objetivo)

**Name of Project:** DIAL AIDS

**Tabela preenchida por:** MARCOS  
ANTONIO SILVA

**Date:** 31/01/2008

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
<i>List objectives exactly as set out in your application</i>	<i>List activities exactly as set out in your application</i>	<i>List the people who organised/ran the activity</i>	<i>List which groups were targeted (e.g. girls aged 16-24) and how many people actually benefited from the activity</i>	<i>Detail the actual timeframe of the activity e.g. undertaken between..., evaluated on...</i>	<i>Detail actual output of activity, measured as set out in your application</i>	<i>If the actual output differs from the expected output (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
					<i>Detail actual impact of activity, measured as set out in your application</i>	<i>If the actual impact differs from the expected impact (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
<b>OBJECTIVE 1:</b> Improve the capacity level on HIV/AIDS and other STDs among GAPA-CE AIDS hotline workers.	Recruiting, Selection, Qualification	Marcos Silva – GAPA/CE project coordinator Leilanne – ASF-NE 01 Coordinator 03 Assistant	<ul style="list-style-type: none"> <li>10 people</li> <li>04 instructors</li> </ul>	April 2006.	100% of the number of volunteers acquired (10 people). Indicators: Information on recruiting and selection, forms and tests of the workshops.	Yes.	N/A
					Made people interested in participating on the social activities by volunteer work.	Slm	N/A
<b>OBJECTIVE 2:</b> To expand the AIDS Hotline advertising strategy among the general population of Fortaleza and in other municipalities of	Help Line Services – Disk AIDS implemented	01 Coordinator 03 Assistants	Active team on Help Line, benefiting 2000 users directly and 3,500,000 users indirectly	April 2006 to April 2007	Educational, participative process. Indicator: Report of calls (2000).	Yes.	N/A
					Awareness and mobilization of the community for exercising their role as contributor in actions for health improvement. Reduction	Yes.	N/A

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
						Expected impact = actual impact?	Any resulting action?
the State.					of morbid-mortality by damages. Reduction of pregnancy and STD/AIDS cases. Reduction of situations of risk to health of individuals and populational groups. Indicator: Statistics data of the Municipality.		
OBJECTIVE 3: Dissemination	Advertisement	Marcos Silva – GAP/ACE project coordinator	The community in general	April 2006 to April 2007	Divuligation of the work performed by Disk AIDS. Indicators: Pamphlets: 5,500. Posters: 31,014. Reports: 52. Fliers = 8,000 and Bus Door = 10 lines of great circulation	Yes.	N/A
					Awareness of the community in order to identify signs and symptoms of STD/HIV/AIDS. Indicators: Statistics data of the Municipality.	Yes.	N/A



**Elton John AIDS Foundation**

**1 Blythe Road, London W14 0HG - Tel: +44-20-7603 9996**

## **GRANT REPORT COVER SHEET**

**(Please copy and attach this top sheet to subsequent report documents)**

**Please complete each section of this form FULLY and IN ENGLISH**  
**NOTE: Only provide one copy of your report, unbound and not stapled**

Your Letter of Agreement will stipulate by which date your report is due. If you are unable to complete any section of the form or have any specific problems completing your report, please indicate why. You may provide supplementary information as appropriate.

### **GENERAL INFORMATION**

**1. Name of Organisation:**

**NAVE – NÚCLEO DE AÇÃO E VALORIZAÇÃO DA ESPÉCIE HUMANA**

**2. Project Title to which this report relates:**

**ART & CITIZENSHIP – A POSSIBLE FRONTIER**

**3. Telephone No:**

**Fax No:**

**Email address:**

**+55 85 3221-4487**

**naveh@terra.com.br**

**4. Report prepared by:**

**Position:**

**Helena Damasceno**

**Project Coordinator**

**5. Type of Report (interim/final):**

**Final Report – II**

**6. Report Period:**

**From: May 2006**

**To: December 2006**

**7. Date of Report:**

**Signature:**

**31/01/2008**





## FINAL REPORT – INFORMATION REQUIREMENTS

### 8. Executive Summary (maximum ½ page):

- This section highlights the major activities of the project funded: results, constraints, findings, recommendations etc. It should contain major points from the rest of the report and function as “stand-alone” summary of the project funded. Please include statistics on the number of direct or indirect beneficiaries of the project, where applicable.

**Area:** Life appraisal and Art therapy  
**Project Objectives:** Art Therapy activities for 80 people living with HIV/AIDS  
**Institution:** NAVE - Núcleo de Ação e Valorização da Espécie Humana  
**Project Coordinator:** Helena Damasceno

To develop, during 6 months, actions related to art therapy together with Modules on Human Development & Citizenship and art courses with 80 male and female aged 18 years and older living with AIDS referred by the Social Care Service of Hospital São José, and other similar institutions.

People living with AIDS, with whom we deal with in the workshops, are very needy by the economic point of view, also needy of information and education, but mainly of self-esteem. Some have great difficulty to love themselves, what results in extreme difficulty to accept each other in peaceful living together. One of them said he hates the whole world and at least two of them found hard to concentrate: for watching movies, participating in group work etc.

### 9. Description and Implementation of Project:

- As per your Project Report Table.

02 teams of beneficiary were formed in one year, including two periods of functioning - morning and afternoon, daily, using the Basic Modules of Human Education and Art Modules, making it a total of 80 beneficiary per year and 40 per semester. Each shift presented 20 participants, from Monday to Thursday. On Fridays, there were meetings held with the technical team, for evaluation and planning of the following week (morning) and with the families in the afternoon.

### Accomplishments

- Increase from 80 to 150 in the number of people directly benefited;
- Improvement of the quality of life of people living with HIV/AIDS as well as their competencies and potentialities;
- Four weekly meetings with 30 participants/day in which art therapy and human development activities were provided and art courses were offered;
- Expansion of partnerships by carrying out the activities in locations familiar to people;
- Expansion of the target public, involving other two Institutions in addition to Hospital São José, (Centro de Convivência Madre Regina and Rede Nacional de Pessoas Vivendo com HIV/AIDS);
- Transport voucher to allow people to go activities site;
- Improvement of self-esteem through art therapy, theatre and music modules;

- Training people to enable them to have access to the job market and/or to generate income (Craft courses, biscuit, fabric painting, etc.);
- Stimulate cooperativism through art courses;
- Work aiming to involve the children of people living with HIV/AIDS through music and theatre classes, regardless of the HIV test result of these children;
- Creation of a Solidarity Choir;
- Formation group of Flute players;
- Strengthening of active citizenship of people living with AIDS and their families;
- Making of a thematic fanzine as of the personal and collective experiences;
- We got to different audiences within the same sphere of problems, since we performed the activities in three different places, with different public:
  - São José Hospital: Mixed group – men and women with ages under 18 years-old. An oscillating audience, due to the period of stay in the hospital, that is a reference in the State of Ceará for infectious, contagious diseases, the Hospital São José, as well as their families and friends. We treated this public directly, in the units of services and confining, with activities of Handicraft, Art Therapy and Music Therapy, in a perspective to improve the self-esteem and to lower situations of stress caused by the period of stay in the hospital;
  - *Centro de Convivência Madre Regina*: Mixed Group – men and women in ages after 18 years-old, their families and children, with activities of Handicraft, Music, Plastic Arts, Theatre, Art Therapy and Basic Modules of Human Education, when there is discussion of issues inherent to affection, self-esteem, citizenship, resilience, identity, relationships between family members and society, context of gender and sexuality, adhesion to treatment, group and individual, affective bonds, etc. By art workshops: the exercise of creativity, the feeling of group, identity and self-esteem, valuing of image (of him/herself and of the other), aesthetics, elaboration of internal contents, sociability, etc., where the final products created were exhibited in the International Airport of Pinto Martins;
  - National Network of People Living with HIV/AIDS. Group of positive women, with activities of Handicraft, Music, Plastic Arts, Theatre, Art Therapy and Basic Modules of Human Education, when there is discussion of issues inherent to affection, self-esteem, citizenship, resilience, identity, relationships between family members and society, context of gender and sexuality, adhesion to treatment, group and individuals, affective bonds, etc. By art workshops, we facilitate the exercise of creativity, the feeling of a group unit, identity and self-esteem, promoting a space for free expression, making opportunities of individual and collective emotions in a playful way, we make a potential of image valuing (of him/herself and of others), aesthetics of art, creation of internal contents, sociability, etc. All the final products created were exhibited and the final product was passed on to the group.

#### **10. Management of Project:**

- Describe any changes in staffing, budget or project duration between original application and actual implementation. Please also list any contributions – cash or in-kind – to the project, including collaboration with other agencies.

The project went through modifications of material order during its execution. Due to the specificity of the group, some materials had to be altered, as: scissors, glues of strong smell, solvents, etc; because such would lead to damages for the quality of life of the people living with AIDS who were served. The project also went through adaptations of days and hours, specially about the specific dynamics of Hospital São José. When they are in the hospital, people living with AIDS need more medical attention, and as they get tired faster, as they are physically and mentally weak, the

activities had to be adapted to this routine. All the associations were very successful. But those were infra-structure ones. We received support with space for performance of the workshops. The team was the same from the beginning to the end of the project.

**11. Lessons Learned/Recommendations (maximum 1 page):**

- Describe any lessons learned or broad implications of the project's results and provide any recommendation for follow-up and future activities or interventions.
- Detail any qualitative data or information that did not fit into the Project Report Table (such as unexpected outcomes).

One of the lessons learned was that AIDS has not only a pauperising feature but affects people with low self-esteem, with lack of information and affection. Many are victims of family abandon and need spaces where they have people to take care of them. Art is a tool that brings new significance to life and helps to build an active citizenship.

**Constraints**

- Internal conflicts in a partner Institution, which were solved but hindered the communication among the parties;
- Low educational level of beneficiaries;
- Treatment resistance influencing the continuity of the group;
- Difficulty to have a photographic registry. Most people treated did not feel comfortable with this kind of exposition.

**12. Materials/Products:**

- List the key materials/products developed for this project and where appropriate quantities.

**13. Future Plans:**

- Please outline how the programme hopes to develop and if appropriate, what arrangements exist in respect of operational and financial planning to ensure its sustainability.

Focus more in the courses of handicraft, as an attempt of having other income possibilities. Also increase the focus of assistance to the family and to the community which the beneficiary are inserted along with, making possible a partnership between institutions of the very location where the people assisted by the project live in, as for example, trade of products manufactured during the execution of the project. Include debates about the relationship of gender in the handicraft courses. Seek associations with technical schools and commercial institutions alike. Request financing by forming a handicraft co-operative. Follow with psycho-social follow-up, including beneficiaries on the public policy.

Evidently, the majority of these issues are still under discussion for a next step – project, once our project has finished with the end of the financing in question. Other forms of assistance were thought of, as for instance, the continuance of the Flutes Group, by an associated institution, but most of the actions did not present a direct continuation.

**14. Future Grant Application**

- If you intend applying for a further grant, please **DO NOT** include a grant application with your report, please contact the Foundation to discuss your future grant requirements.

**Please note: If you received your reporting forms by post  
the Project Report Table is available by email**

## Project Report Table for the Elton John AIDS Foundation

**Name of Organisation:** NAVE – NÚCLEO DE AÇÃO E VALORIZAÇÃO DA ESPÉCIE HUMANA

**Name of Project:** ART & CITIZENSHIP – A POSSIBLE FRONTIER

**Overall Aim of project:** Art therapy for people living with HIV/AIDS.

**Table prepared by:** Helena Damasceno

**Date:** 31/12/2008

(use a separate sheet for each aim)

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
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<i>List objectives exactly as set out in your application</i>	<i>List activities exactly as set out in your application</i>	<i>List the people who organised/ran the activity</i>	<i>List which groups were targeted (e.g. girls aged 16-24) and how many people actually benefited from the activity</i>	<i>Detail the actual timeframe of the activity e.g. undertaken between ..., evaluated on...</i>	<i>Detail actual output of activity, measured as set out in your application</i>	<i>If the actual output differs from the expected output (as predicted in your application) please explain the reasons for this.</i>	<i>Has any action been taken or is any planned in order to address issues raised in the previous column</i>
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<b>OBJECTIVE 1:</b>	1. Four weekly meetings with 30 participants/day in which art therapy and human development activities were provided and art courses were offered. 2. Training people to enable them to have access to the job market and/or to generate income Craft courses, biscuit, fabric painting, etc.); 3. Stimulate cooperation through art courses; 4. Work aiming to involve the children of people living with HIV/AIDS though	NAVE	150	May 2006 to December 2006	Improvement of the quality of life of people living with HIV/AIDS as well as their competencies and potentialities	Expansion of the target public, involving other two Institutions in addition to Hospital São José, (Centro de Convivência Madre Regina and Rede Nacional de Pessoas Vivendo com HIV/AIDS  Increase from 80 to 150 in the number of people directly benefited	N/A

Objective	Activities	Undertaken by	Type and number of target beneficiaries reached	Timeframe	Actual output	Expected output = actual output?	Any resulting action?
					Actual impact	Expected impact = actual impact?	Any resulting action?
					Strengthening of active citizenship of people living with AIDS and their families	Expansion of partnerships by carrying out the activities in locations familiar to people	N/A
	music and theatre classes, regardless of the HIV test result of these children; 5. Creation of a Solidarity Choir; 6. Formation group of Flute players;						



**Annemarie Meyer**

Elton John AIDS Foundation  
1 Blythe Road  
London, England, W140HG

31<sup>st</sup> January, 2008.

Dear Annemarie,

Please find enclosed the reports of 2006 EJAF-ISGF projects in Brazil.

NGOs used the new forms to adhere to EJAFs new reporting system. Please notice that a different project format and reporting system was used when projects were implemented, and many NGOs found it difficult to furnish quantitative data about the projects. Furthermore, São Paulo (15 million inhabitants) and Fortaleza (2.5 million inhabitants) are very large cities, making it difficult to follow up beneficiaries to evaluate direct impact and immediate results. In the same manner, AIDS has a long incubation period and several interventions take place simultaneously and have to be analysed in the long term.

Small income generation projects have not the same impact in Brazil as they would have in Africa, for example. That is because of the high cost of life, particularly in large cities and the high currency value of Brazilian Real (£ 1 = R\$3.31). Nevertheless, these projects may initiate the professionalising process of individuals and help them to seek for job opportunities. Moreover, during those interventions citizenship is addressed to increase awareness of the rights of PLWA. Similarly, projects involving floating populations such as drug users, prostitutes and people approached on the streets are difficult to assess quantitatively, i.e. people referred to health services can not be followed up because there are no unified database systems; lost in follow up due to single contact. The qualitative review of these projects shows that they have been efficient to reach specific population, to promote partnerships and to strengthen local NGOs.

EJAF-ISGF projects in Brazil have been very important as they trigger larger projects, which are then conducted by already structured health services in Brazil.



The experience of EJA-ISGF projects in Brazil allowed the development of new techniques to implement actions in specific vulnerable groups and can be replicated in other cities or regions of Brazil and serve as a model for countries of the developing world.

Please do not hesitate to contact me if you need further information.

Best regards,

**Silas Pereira Barbosa Júnior**

HIV/AIDS/STD Project Manager

Associação Saúde da Família

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