A proposal for the
HIV/AIDS Community Development and Support Programme for the Portuguese-speaking Communities

submitted to the
Ontario Trillium Foundation

submitted by the
AIDS Committee of Toronto

29 September 2000

(Current edition incorporates any and all changes made to proposal after submission.)
Section A: Contact Information and Application Profile

A1. Applicant Name

Name of organisation: AIDS Committee of Toronto (ACT)

Address: 399 Church Street, 4th floor
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Ontario Corporation Number: 565627
Charitable Registration Number: 11877 9024 RR0001

A2. Collaborative Information

ACT is a member of VIVER, the Portuguese-speaking HIV/AIDS Coalition, and intends to carry out this project in collaboration with other VIVER members. ACT is the leading organisation for this programme. ACT has entered into a partnership agreement with VIVER and has committed itself to the integration of Portuguese-language services into its range of services. VIVER members include:

ACT
David Kelley Services, HIV/AIDS Community Counselling Programme
Abrigo Centre
Access Alliance Multicultural Community Health Centre
Arco-Iris
Hassle Free Clinic
Family Service Association of Toronto
St. Christopher House
The Works
St. Stephen’s Community House
Toronto Public Health
Working Women Community Centre

(For VIVER contact information, see Appendix 2)

A3. Has ACT lost any revenues as a result of the new charity casinos or slot machines at race tracks?

No.
A4. To which Programme is ACT applying?

Community
A5. **Name of Project**

HIV/AIDS Community Development and Support Programme for the Portuguese-speaking Communities

A6. **Which sector(s) are covered by ACT's application?**

Human and Social Services

A7. **What is the total amount ACT is requesting and over how long a period?**

We are requesting $186,120.00 over 48 months, starting in April 2001 and ending in March 2005.

**Section B: Organisational Background**

B1. **When was ACT started, and why?**

*First date of service:* 19 July 1983

*Incorporation date:* 4 October 1983

The mission of ACT, a community-based, non-profit organisation, is to provide health promotion, support, education, and advocacy for people living with HIV/AIDS and those affected by HIV/AIDS.

ACT was formed out of a community forum held by Gays in Health Care, in response to (what was) a new and mysterious disease affecting gay men. Early approaches to the work were based on a 'health from below' model from a feminist perspective, combined with gay community mobilisation (one of the first communities affected by HIV/AIDS in Toronto). HIV was discovered in 1984, with a test available soon after. Within a few years, able-bodied people with HIV needing both support and education began to outnumber those with full-blown AIDS. For many years, ACT was the only community-based AIDS organisation in Toronto; eventually others emerged, some of which started within ACT’s structure until they were formally organised. ACT began with very few staff, all of whom did just about everything. Specialisation came later, as did the need for a more formal structure with standards, policies, and procedures. ACT has always been—and continues to be—heavily volunteer-based. Today, ACT provides an extensive range of supportive services and HIV prevention programmes targeting men who have sex with men, at-risk women, and at-risk youth.

B2. **Where does ACT's work take place?**

ACT provides services to people in the City of Toronto and the Greater Toronto Area (GTA).
B3. Who makes up ACT’s community?

ACT serves all people living with HIV/AIDS in the GTA as well as communities that are at-risk for HIV infection due to marginalisation (gay and bisexual men, marginalised women, and youth).

Current support service clients (clients accessing counselling, support groups, health promotion programmes, practical assistance programmes, etc.): 1 274

Clients reached through education and outreach initiatives: 14 395

ACT Access Centre utilisation (library, referrals, information-to-go, Information and Support Line): 11 099

B4. What does ACT do?

ACT provides targeted HIV prevention and outreach programmes for gay and bisexual men, at-risk women, and at-risk youth. We also develop HIV prevention education campaigns. ACT staff provides training and consultative services about HIV/AIDS to health and social service organisations throughout the GTA. ACT houses the largest publicly accessible HIV/AIDS library in North America and contains books, videos, audiotapes, journals, and other forms of information. ACT provides referral services to other HIV/AIDS and support services. We provide counselling to individuals and couples in person, over the phone, and off-site. We offer a range of support groups for people living with or affected by HIV/AIDS. ACT offers a range of practical assistance programmes for people with HIV/AIDS (PHAs) (e.g., drives, moves, a free ‘hot lunch,’ income tax clinic, insurance benefits clinic, buddy programme, and social/recreational programmes) and employment services for PHAs who are considering (re-)employment. ACT’s work is carried out by 36 full-time equivalent staff and is assisted by over 400 volunteers.

Currently through the Portuguese-speaking Men’s Outreach Programme, ACT provides HIV prevention outreach and education to gay men, bisexual men, and other men who have sex with men (who do not identify themselves as gay or bisexual) from Portuguese-speaking communities. Outreach occurs in bars, bath houses, and public sex environments (mainly parks and theatres). In addition, outreach occurs at Portuguese-speaking social clubs. This outreach reaches many non-gay identified men who have sex with men. Moreover, most of the men encountered by the Portuguese-speaking Men’s Outreach Co-ordinator are not connected to supportive services due to the lack of culturally and linguistically appropriate support and practical assistance programmes.

ACT currently sponsors the Portuguese-speaking Men’s Outreach Co-ordinator position at the request of VIVER. This part-time position provides HIV prevention outreach and education to gay men, bisexual men, and other men who have sex with men (who do not identify themselves as gay or bisexual) from Portuguese-speaking communities. Funding for this position is provided through the City of Toronto’s annual AIDS prevention grants. The City of Toronto provides salary money for a 16 hour/week outreach worker position as well as some programme funding.
Ontario Trillium Foundation - HIV/AIDS Community Development and Support Programme for the Portuguese-speaking Communities

Amount received: $19,522

ACT’s Librarian has also worked closely with staff of St. Stephen’s Community House Wellness Programme to help them develop and organise their small resource centre holdings. ACT plans to work closely with St. Stephen's Community House to help them develop their Portuguese-language resource holdings.

ACT is also working in partnership with other VIVER members to develop and translate a “basic” HIV/AIDS brochure for Portuguese-speaking communities.

B5. Who does ACT work with?

ACT works in collaboration with many AIDS and social service organisations locally, and is involved in HIV/AIDS networks nationally and provincially (ACT is a member of the Canadian AIDS Society (CAS) and the Ontario AIDS Network (OAN)). ACT is a founding member of the Gay Men's Education Network of Toronto, the Women's Outreach Network, and the Youth and HIV/AIDS Network. ACT is a member of the VIVER coalition, which brings together service providers and agencies committed to raising awareness of, and support for, HIV education and support services in Toronto’s diverse Portuguese-speaking communities. In addition to networking, ACT works collaboratively with a variety of agencies to develop and deliver programmes. For example, an ACT counsellor provides off-site counselling at Voices of Positive Women, and we are planning similar off-site services with Central Toronto Youth Services (CTYS). ACT also offers two support groups in collaboration: the GAP (Gay and Positive) with CTYS and Women Gathering (with a number of women-serving agencies).

B6. Has ACT received Trillium funding since 1995?

No.

Section C: Proposal

C1. What does ACT want to do?

This initiative will enable the hiring of a Portuguese-speaking Community Development Co-ordinator who will recruit and train Portuguese-speaking volunteers to work with service providers, churches, and other community groups to provide practical assistance and compassionate support to Portuguese-speaking individuals and families infected and affected by HIV/AIDS. Through targeted outreach, PHAs and their families will be able to access ACT’s range of support services. The staff and volunteers will also work with member agencies of VIVER to raise awareness of HIV/AIDS in
Portuguese-speaking communities, and provide training to service providers working in the Portuguese-speaking communities, thus increasing the capacity of Portuguese-speaking communities to respond to HIV/AIDS in a culturally appropriate way.

C2. Why does ACT want to do it?

In 1989, Toronto’s Portuguese and Brasilian communities identified that 53% of Portuguese-speaking people over the age of 18 were non-English speaking (Portuguese Interagency Network, 1995). The Immunodeficiency Clinic of the Toronto Hospital (General Division) reports that less than 5% of its patients are identified as being Portuguese-speaking (Toronto Hospital, 1999). In addition, the Immunodeficiency Clinic indicates that Portuguese-speaking clients have traditionally accessed these services at very late stages in the progression of their illness. The above data suggest that this group’s accessibility to the HIV clinic’s services is significantly less than the general population. This points to the need for increased education and support interventions in the community. Lack of access to health and social services is also evident in the area of HIV/AIDS: there is limited availability of linguistically and culturally appropriate HIV/AIDS information. Unlike many other cultural and linguistic groups in Toronto, no HIV/AIDS specific agency or support programmes exist for Portuguese-speaking communities, despite the fact that Portuguese is the fourth most common language spoken in the GTA (Statistics Canada, 1996 Census).

To address these concerns, a community AIDS forum was held in 1997. In attendance were Portuguese social services providers, PHAs, and other community members. The forum revealed a tremendous gap in services to people infected and affected by the disease. Out of this forum emerged VIVER, the Portuguese-speaking HIV/AIDS Coalition. VIVER was founded to address the lack of services for Portuguese-speaking people living with HIV/AIDS even though “the demographics of Toronto’s population suggest that anywhere from 1 in 10 or [1] in 12 persons infected with HIV are of Portuguese-Canadian background” (Letter from Toronto Hospital Immunodeficiency Clinic, January 1999). VIVER’s mission is to reduce the spread of HIV infection and to enhance the quality of life of Portuguese-speaking people living with or affected by HIV/AIDS, to promote awareness, to advocate on behalf of PHAs, and to break down AIDS-related taboos in Portuguese-speaking communities. VIVER membership includes many Portuguese-language service agencies and programmes in Toronto.

In 1998, VIVER obtained AIDS Prevention Funds from Toronto Public Health for an outreach and education project targeting Portuguese-speaking men who have sex with men, which was sponsored by St. Christopher House. Following a very successful relationship with St. Christopher House, VIVER decided to seek sponsorship for the proposed 1999 project from ACT. The decision was made to approach ACT because VIVER concluded that it was more strategic to partner with an ASO rather than a multi-service organisation. A partnership between ACT and VIVER was established, and ACT sponsored the 1999 outreach project. ACT has agreed to sponsor this year’s application to Toronto Public Health.

In January 1999, VIVER asked ACT to consider forming a partnership. After internal discussion and consultation with funders, it was clear to VIVER that it was best to offer services to the Portuguese-speaking community in partnership with an existing ASO rather than forming a new agency. This
service integration is fiscally responsible and avoids service duplication. After a number of meetings and with an invitation from VIVER, ACT committed to the integration of Portuguese-language services into its range of programmes and services, and to fostering greater accessibility to existing services and resources for Portuguese-speaking service users. VIVER will continue to play an important role in relation to HIV/AIDS issues within Portuguese-speaking communities. VIVER will function in an advisory capacity to ACT’s Portuguese-speaking services and provide a strong link to Portuguese-speaking communities for ACT’s services and staff, gradually introducing ACT and its services and working alongside ACT staff in doing outreach and support in the Portuguese-speaking communities. Both the Portuguese-speaking Men’s Outreach Worker and the Portuguese-speaking Community Development Co-ordinator will regularly attend VIVER network meetings for information sharing and advisory input.

Through the Portuguese-speaking Men’s Outreach Programme, ACT is currently able to provide only limited HIV prevention education and direct outreach to at-risk men who have sex with men from Portuguese-speaking communities. Most men encountered by our outreach worker are not connected to supportive services due to the lack of culturally and linguistically appropriate assistance programmes.

Funding for the HIV/AIDS Community Development and Support Programme for the Portuguese-speaking Communities proposal would enable the development of appropriate supportive programmes through the recruitment and training of volunteer service providers. In addition, this staff position would allow ACT—in partnership with other VIVER members—to raise awareness of HIV/AIDS amongst Portuguese-language service providers, increasing referrals to these services. This will enable Portuguese-speaking PHAs to access the support they need to maintain their health and well-being. In addition, broader community education and awareness within Portuguese-speaking communities will help to reduce the stigma and isolation faced by many Portuguese-speaking people with HIV/AIDS.

C3. Who will benefit and how?

The primary benefit of this project will be Portuguese-speaking people living with HIV/AIDS, their families, partners, and caregivers. This historically under served community will have access to a range of supportive services here at ACT and will, through referrals, have access to other services in Portuguese-speaking communities. Portuguese-speaking service providers will have greater knowledge of HIV/AIDS and supportive services available. Secondly, members of Portuguese-speaking communities will have greater knowledge of HIV/AIDS, greater compassion towards people living with HIV/AIDS, resulting in a reduction in social isolation and lack of adequate care and support faced by many Portuguese-speaking people with HIV/AIDS. ACT will establish itself as a resource available to Portuguese-speaking people living with or affected by HIV/AIDS with a pool of trained volunteers who can deliver supportive and practical services.

C4. How will ACT reach out to those members of the community who are isolated or who have not traditionally been involved in this kind of activity?
This project aims to reach a linguistic community that has been impacted by HIV/AIDS, and requires greater information and support than currently can be provided by existing under-resourced community-service organisations. ACT has committed itself in its current Strategic Plan to respond to the changing needs of people infected and affected by HIV/AIDS. Furthermore, ACT’s partnership with VIVER was a strong statement of our commitment to provide an appropriate range of HIV/AIDS services to Portuguese-speaking communities. Through our membership in VIVER, we commit to working with Portuguese-speaking service providers to provide education and training to diverse Portuguese-speaking communities, to provide referrals to appropriate agencies, and to make ACT’s services accessible and appropriate to Portuguese-speaking peoples. In 1999, we were able to mobilise for the first time a contingent in the annual AIDS Walk representing the Portuguese-speaking communities. This garnered coverage in the Portuguese media and a repeated presence in this year’s AIDS Walk.
Section D: Workplan

D1. Will ACT be working on its own or in partnership with others?

ACT will not be working alone on this project. ACT has entered into a partnership agreement with VIVER, the Portuguese-speaking HIV/AIDS Coalition. This partnership (adopted at the 7 May 1999 VIVER meeting) states that “The AIDS Committee of Toronto (ACT), after an invitation from, and in collaboration with VIVER - the Portuguese-speaking HIV/AIDS Coalition, is committed to the integration of Portuguese-language services into its range of programmes and services and to fostering greater accessibility to existing services and resources for Portuguese-speaking service users.”

VIVER will act in an advisory capacity to this project, providing access to Portuguese-speaking service providers, linkages with people living with HIV/AIDS and potential project volunteers. The Portuguese-speaking Community Development Co-ordinator will work closely with other VIVER members, and will attend all VIVER coalition meetings.

VIVER members include the following agencies:
(a) ACT: VIVER membership, lead organisation for this programme;
(b) David Kelley Services, HIV/AIDS Community Counselling Programme of Family Service Association of Toronto: an organisation that provides short and long term counselling for individuals, couples, and families dealing with HIV/AIDS loss, relationships, self-esteem, self care, planning for healthy living, changing health status, home care or other HIV/AIDS-related issues;
(c) Abrigo Centre: a multiservice organisation that provides services in English and Portuguese. Services include individual, family, and marital counselling; individual and group counselling for victims of woman abuse; counselling for adult survivors of child abuse; individual and group counselling for male perpetrators; youth counselling and education programming; employment counselling and job development; parenting groups; assistance with filling ACT’s government forms; information and referral; and community education, advocacy, and outreach;
(d) Access Alliance Multicultural Community Health Centre: a community health centre that serves newcomers, immigrants and refugees. Provides primary health care services including medical treatment, marital and family counselling, mental health counselling, nutrition and sexual health care. Also offers community programs such as fitness, nutrition, women’s self-help and support groups and a seniors drop in;
(e) Arco-Iris: this is a Portuguese-speaking/Portuguese-identified social/recreational organisation for lesbian, gay, and bisexual people. This organisation provides opportunities for social support and recreational programming for Portuguese-speaking lesbians, gay, and bisexuals (e.g., dances, discussion groups, newsletters, and outings);
(f) Hassle Free Clinic: this facility provides counselling and medical services for birth control and sexually transmitted diseases (STDs). The clinic offers separate clinics for men and women on STD testing and treatment, anonymous HIV antibody testing, and counselling on safer sex. The clinic has a Portuguese-speaking staff person;

(g) Parkdale Community Health Centre: a community health centre that provides a range of general medical services, prenatal classes, seniors programmes, and a street health programme (i.e., health care and outreach for street-involved persons)

(h) St. Christopher House: this is a multiservice neighbourhood centre providing programmes and resources for all age groups. It operates an Older Adult Centre, a Settlement and Adult Education Centre, a Woman Abuse Programme, Children and Youth Programmes, a Music School, a Meeting Place (for socially isolated and homeless adults), and Employment Programmes;

(i) St. Stephen’s Community House: a community programme that provides a Wellness Promotion programme which includes its AIDS information, dissemination, and education services targeting Chinese and Portuguese-speaking communities through education sessions, women’s groups, and educational materials;

(j) The Works: operated by Toronto Public Health, this initiative provides a needle exchange, free condoms, hepatitis B/C screening services, health information, and referrals. The Works operates a van which patrols the city doing outreach to drug users and is staffed by a Portuguese-speaking worker;

(k) Toronto Public Health: municipal funder, see (j);

(l) Working Women Community Centre: a community centre for immigrant women providing settlement services, individual counselling, and support groups. The center offers a Portuguese women’s support group.

Throughout this project, the Portuguese-speaking Community Development Co-ordinator will work closely with VIVER members to establish connections within the Portuguese-speaking community. This will involve making linkages with service providers (e.g., physicians, counsellors, staff working in social service organisations), social clubs and organisations, and the Portuguese-speaking media. Volunteers will be recruited from Portuguese-speaking communities. These volunteers will help to adapt and or create new supportive services that are culturally and linguistically appropriate.

**D2. How will ACT do this work?**

*(see also Workplan chart, Section D3)*

Each of the four years of this proposal will have a particular focus, although many activities will happen simultaneously and throughout the course of the project. The focus areas for the four years of this proposal are the following:

*Phase 1 - Year 1 (2001/2002): Community Development*
This will include recruitment of volunteers and raising awareness of HIV/AIDS issues among Portuguese-speaking physicians and other service providers in order to increase referrals to appropriate HIV/AIDS services. This work will be done in partnership with VIVER members.

**Phase 2 - Year 2 (2002/2003): Training & Matching Volunteers**

The emphasis of this year will be on recruiting and training additional volunteers to provide HIV/AIDS related support services and linking them with individuals and families infected and affected by HIV/AIDS.

**Phase 3 - Year 3 (2003/2004): Increase in Active Volunteers & Increased Knowledge Base of Service Providers**

During this year, the emphasis will be on increasing the number of active volunteers and providing further education to Portuguese-speaking service providers so that they can provide appropriate services for PHAs and their families.

**Phase 4 - Year 4 (2004/2005): Sustainability of Services**

The emphasis in the fourth year will be ensuring that the volunteer and agency services and partnerships that have been developed will be sustainable for the future. This could include further training for Portuguese-speaking agencies, developing arrangements where a counsellor from a Portuguese-speaking agency would provide services each week at ACT or vice versa. At this point, ACT could assess whether the services are sustainable without the need for a Community Development Co-ordinator.

The main tasks of this initiative are:

(a) The Community Development Co-ordinator will build on the links that VIVER members have developed in the community to provide education about HIV/AIDS and related services with health care providers and social service agencies that serve the Portuguese-speaking community. VIVER members and other volunteers will be involved in these outreach efforts which will include individual meetings and presentations in group settings;

(b) the Co-ordinator will work in partnership with other ACT staff and VIVER members to link Portuguese-speaking services with mainstream HIV/AIDS specific services and vice versa. This will include identifying the most appropriate linkages and partnerships within the existing HIV/AIDS groups/organisations and planning to give the community greater access to vital services;

(c) the Co-ordinator will organise an HIV/AIDS forum in partnership with VIVER’s member agencies and Portuguese-speaking physicians and other service providers;

(d) the Co-ordinator will work with VIVER member agencies to develop and implement volunteer recruitment strategies among potential Portuguese-speaking volunteers. The Co-ordinator will utilise Portuguese-speaking media and local newspapers to promote the volunteer recruitment drive;
(e) the Co-ordinator will work with ACT's Volunteer Co-ordinator to adapt ACT's well-developed volunteer training programme to train ten Portuguese-speaking volunteers;

(f) the trained Portuguese-speaking volunteers will provide services to Portuguese-speaking clients (including translation), as well as culturally and linguistically appropriate ACT programmes such as buddy support, support groups, drives to HIV-related medical appointments, help with moves, etc.;

(g) the Co-ordinator and volunteers will promote service to the Portuguese-speaking community via the media and VIVER member agencies;

(h) the Co-ordinator and volunteers will promote ACT's culturally appropriate services to emergency departments, HIV/AIDS clinics, and community health centres; and

(i) the ACT Development Department will develop and implement a plan to raise fundraising revenue from the Portuguese-speaking community to support ACT's work in that community. This will involve strategising with VIVER coalition members and identifying key members of the community to lead these efforts. If appropriate, ACT may hire a consultant to provide direction to our efforts to reach out to this particular community. The focus of the efforts will be on raising funds from individuals and corporate sponsors from the Portuguese-speaking community.
D3. **What results does ACT hope to achieve by doing this work?**

*(see also Section D2)*

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<tbody>
<tr>
<td><strong>Phase 1</strong>&lt;br&gt; (1) Increase Portuguese-speaking community access to HIV/AIDS information &amp; services</td>
<td>(1) To facilitate:&lt;br&gt; (3) early testing;&lt;br&gt; (4) access to treatment;&lt;br&gt; (5) social support for people living with HIV/AIDS (PHAs) &amp; affected families;&lt;br&gt; (6) the development of a pool of Portuguese speaking volunteers providing HIV/AIDS related services to Portuguese speaking PHAs at ACT;</td>
<td>(1)(a) Community Development Coordinator &amp; VIVER member agencies &amp; other volunteers, through individual meetings &amp; group presentations, will provide education about HIV &amp; HIV/AIDS services with health care providers &amp; social service agencies which serve the Portuguese-speaking communities;&lt;br&gt; (b) community/programme development: continue to build sustaining linkages/partnerships to promote awareness &amp; develop a volunteer base;&lt;br&gt; (c) work to link Portuguese-speaking services with mainstream HIV/AIDS specific resources/services;&lt;br&gt; (d) organise an HIV/AIDS forum in partnership with VIVER member agencies &amp; Portuguese-speaking physicians;&lt;br&gt; (e) recruit bilingual (Portuguese &amp; English) volunteers for training in ACT’s 10-week volunteer training programme. Volunteers trained to provide services such as buddy support, rides to HIV-related medical appointments, etc to Portuguese-speaking clients;&lt;br&gt; (f) identify &amp; translate existing ACT HIV/AIDS information into</td>
<td><em>(1)(a) Increased community awareness of HIV/AIDS services (5 articles/features in Portuguese media);</em>(br&gt; <em>(b) increased referrals from Portuguese community agencies to HIV/AIDS specific services (10 referrals);</em>(br&gt; <em>(c) increased referrals from family physicians to HIV/AIDS specific resources/services (e.g., Toronto Hospital Immunodeficiency Clinic &amp; ACT) to ensure earlier intervention when Portuguese-speaking clients are at an early stage of disease progression (15 referrals);</em>(br&gt; <em>(d) increased self-referrals from PHA clients to community HIV/AIDS services (20 referrals);</em>(br&gt; <em>(e) 60-75 physicians, church representatives, social service providers, &amp; others from the Portuguese-speaking community will attend the HIV/AIDS forum;</em>(br&gt; <em>(f) 5 Portuguese-speaking volunteers will be trained &amp; begin work with PHAs;</em></td>
<td><strong>Year 1 (2001/2002): Community Development</strong>&lt;br&gt; This will be the main focus of this phase; however, it will continue throughout the life of the project.</td>
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<td>(2) Increase fundraising in Portuguese-speaking communities to sustain Portuguese-speaking HIV/AIDS services at ACT</td>
<td>(2) To explore, through consultation with VIVER members, appropriate methods of fundraising in Portuguese-speaking communities</td>
<td>Portuguese; (2)(a) Develop a strategy, with the help of a consultant, to effectively solicit individual, special event, &amp; corporate gifts from Portuguese-speaking communities</td>
<td>(2)(a) To have 5 meetings with key leaders in the Portuguese-speaking community regarding fundraising for HIV/AIDS; (b) to have a VIVER contingent marching in the annual AIDS Walk; (c) to encourage members of the Portuguese-speaking communities to attend the AIDS Walk</td>
<td>Year 2 (2002/2003): Training &amp; Matching Volunteers. The emphasis of this year will be on recruiting &amp; training additional volunteers to provide HIV/AIDS related support services &amp; linking them with individuals &amp; families infected &amp; affected by HIV/AIDS.</td>
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<td>Phase 2 (Year 1 programmes will continue as needed.)</td>
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<td>(1) Increase Portuguese-speaking communities access to HIV/AIDS information &amp; support;</td>
<td>(1)(a) To facilitate communication between PHA clients with HIV/AIDS service providers; (b) to increase support to PHA clients in order to decrease social isolation &amp; to foster positive coping skills; (c) to provide PHA clients with information/linkage to community social &amp; health resources;</td>
<td>(1)(a) Identify &amp; translate 5 HIV/AIDS resources into Portuguese from ACT’s “Information-to-Go” packages; (b) disseminate materials to VIVER members agencies/other Portuguese-language services (including physicians);</td>
<td>(1)(a) 5 resources translated &amp; distributed; (b) referrals from Portuguese-agencies to HIV/AIDS related services; 25 referrals from physicians to HIV/AIDS services &amp; 30 self referrals to HIV/AIDS related services;</td>
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<td>(2) Increase the numbers of trained Portuguese-speaking volunteers at ACT;</td>
<td></td>
<td>(2)(a) Work with VIVER agencies &amp; Portuguese-speaking congregations to develop &amp; implement volunteer recruitment strategies; (b) train 10 bilingual (Portuguese &amp; English) volunteers including support group facilitators, friendly visitors, interpreters, etc.; (c) adapt ACT’s volunteer program</td>
<td>(2)(a) 15 bilingual &amp; 15 unilingual volunteers will express interest in receiving volunteer training; (b) 10 bilingual &amp; 10 unilingual volunteers will receive ACT volunteer training &amp; begin work with PHAs &amp; those affected by HIV/AIDS; (c) public service announcements to recruit volunteers &amp; to advertise Portuguese-speaking HIV/AIDS related services will appear in the following Portuguese media:</td>
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### Goals

1. **Increase financial support for HIV/AIDS services targeting Portuguese-speaking communities**

### Objectives

1. **Increase Portuguese-speaking communities access to HIV/AIDS information & services;**

### Tasks

- Training programme to train 10 unilingual Portuguese-speaking volunteers;
- Utilise Portuguese-speaking media, newspapers, churches & social service agency to recruit volunteers & promote Portuguese-speaking HIV/AIDS services;
- Recruit volunteers & promote Portuguese-speaking HIV/AIDS services in the University of Toronto Portuguese Association, other youth & college groups, & among the Alliance of Portuguese Social Clubs;
- Implement an individual giving programme with Portuguese-speaking individuals & hold two fundraising events in partnership with Portuguese organisations;
- Revenues of $10,000 will be raised from fundraising initiatives;

### Results/outcomes

- Television stations, 3 radio stations, & 3 magazines & newspapers;
- Announcements to recruit volunteers & to advertise Portuguese-speaking HIV/AIDS related services will appear in 10 church bulletins & 8 agency bulletins. In-services to 5 churches to recruit volunteers & promote services;

### Time frame

- **Phase 3**
  - Year 1 & 2 programmes will continue in Year 3 as needed.
  - Increase in Active Volunteers & Increased Knowledge Base of Service Providers
    - During this year, the emphasis will be on increasing the number of active volunteers & providing further education to Portuguese-speaking service providers so that they can provide appropriate services for people living with HIV/AIDS & their families.
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<tr>
<td>(2) Sustain recruitment &amp; training of Portuguese-speaking volunteers;</td>
<td>(2) To continually recruit volunteers for delivery of programmes;</td>
<td>(2) Build on existing recruitment strategies outlined above to significantly increase the number of Portuguese-speaking volunteers available to provide services;</td>
<td>(2)(a) 15 bilingual &amp; 15 unilingual volunteers will receive ACT volunteer training &amp; begin work with PHAs &amp; those affected by HIV/AIDS; (b) public service announcements will continue in at least 10 media outlets; (c) announcements to recruit volunteers &amp; to advertise Portuguese-speaking HIV/AIDS related services will appear in 12 church bulletins &amp; 10 agency bulletins. In-services to 7 churches to recruit volunteers &amp; promote services;</td>
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<td>(3) Increase financial support for HIV/AIDS services targeting Portuguese-speaking communities</td>
<td>(3) To increase the Portuguese community’s financial support of ACT’s HIV/AIDS services to the Portuguese-speaking communities</td>
<td>(3) Use direct mail &amp; telemarketing to upgrade the number of individual donors from Portuguese-speaking communities &amp; relaunch the two fundraising events held in Year 2. Further develop AIDS Walk teams from Portuguese-speaking communities</td>
<td>(3) Fundraising revenue will increase to $20,000</td>
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**Phase 4**

(Year 1, 2, & 3 programmes will continue in Year 4 as needed.)

| (1) Ensure that the volunteer & agency services & partnerships that have been developed will be sustainable for the future; | (1) To ensure that services will be provided for Portuguese-speaking PHAs & their families over the long term; | (1)(a) Host a community forum to determine what additional training, support & partnership development is needed so that Portuguese-speaking services & HIV/AIDS services can continue to serve Portuguese-speaking PHAs; (b) provide additional training as needed & ensure that partnerships among | (1)(a) 40 people will attend the community forum; (b) additional training will be provided to 7-10 service providers; (c) publicity for volunteer recruitment & service promotion will continue at the same rate as in Year 3; (d) fundraising revenue will increase to $30,000 | Year 4 (2004/2005): Sustainability of Services  
The emphasis in the fourth year will be to ensure that the volunteer & agency services & partnerships that have been developed will be sustainable for the future. |

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<th>Objectives</th>
<th>Tasks</th>
<th>Results/outcomes</th>
<th>Time frame</th>
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<td>(2) Ensure the financial stability of Portuguese-speaking services at ACT</td>
<td>(2) To increase the sustainability of Portuguese-speaking HIV/AIDS services at ACT through the identification of adequate fiscal resources</td>
<td>Portuguese-speaking services &amp; HIV/AIDS services are working well; (2) Upgrade the donations of individual donors &amp; solicit new donors from Portuguese-speaking communities. Expand special events &amp; AIDS Walk participation.</td>
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**Ontario Trillium Foundation - HIV/AIDS Community Development and Support Programme for the Portuguese-speaking Communities**
Year 1:
PHAs: 45 (new clients)
Physicians and social service providers attending forum/training sessions: 70
Media articles/appearances in Portuguese-language media: 5 articles/features
Community leaders: 25
Volunteers trained: 5
Individuals reached through outreach/education sessions: 700

Year 2:
PHAs: 65 (new clients)
Physicians and social service providers attending training sessions: 50
Media articles/appearances in Portuguese-language media/other advertisements: 18
Public service announcement (PSA) appearances: 9 = 3 TV, 3 radio, 3 print
Community leaders: 35
Volunteers trained: 20 (new volunteers in programme)
Individuals reached through outreach/education sessions: 900

Year 3:
PHAs: 75 (new clients)
Physicians and social service providers attending training sessions: 30
Media articles/appearances in Portuguese-language media: 18
PSA appearances: 9 = 3 TV, 3 radio, 3 print
Community leaders: 35
Volunteers trained: 30 (new volunteers in programme)
Individuals reached through outreach/education sessions: 1 100

Year 4:
PHAs: 75 (new clients)
Participants in Community Forum on HIV/AIDS: 40
Physicians and social service providers attending training sessions: 7
Media articles/appearances in Portuguese-language media: 18
PSA appearances: 9 = 3 TV, 3 radio, 3 print
Community leaders: 35
Volunteers trained: 30 (new volunteers in programme)
Individuals reached through outreach/education sessions: 1 300

Changes/results that will occur:
(a) increased community awareness of HIV/AIDS services;
(b) increased referrals from community agencies to ACT;
(c) increased referrals from family physicians to HIV/AIDS specific resources/services (e.g., Toronto Hospital Immunodeficiency Clinic and ACT) to ensure intervention when Portuguese-speaking clients are at an early stage of the disease progression;
(d) increased self-referrals from Portuguese-speaking PHA clients to community HIV/AIDS services;
(e) increased number of volunteers;
(f) increased number of Portuguese-speaking volunteers trained and providing services through ACT's volunteer programmes;
(g) increased service requests from the Portuguese-speaking community and English-speaking social and health service providers for the service of Portuguese-speaking ACT volunteers; and
(h) increased financial support for ACT from the Portuguese-speaking community to support ACT's services to the community.
Section F: Impact and Sustainability

F1. Is anyone doing similar work?

As noted earlier, there is not a dedicated Portuguese-language ASO in Toronto. In addition, there is a lack of culturally appropriate HIV information and support programmes. The VIVER coalition was formed to respond to this lack of services, and approached ACT to integrate Portuguese-language services into its programmes. While some VIVER member agencies are able to offer some HIV/AIDS support services due to a Portuguese-speaking staff person (viz. David Kelley Services), there exist huge service gaps for this population. This project would allow ACT, in partnership with VIVER, to fulfill its mandate to integrate Portuguese-language services and train other service providers in the Portuguese-speaking community.

F2. How will ACT sustain this work in the future?

During the four years of this project, ACT will cover an increased percentage of the programme and salary costs from its general fundraising revenues. ACT currently generates over 60% of its revenue from private sources, with revenue increasing by over 10% during each of the last two years. ACT's Strategic Plan calls for continued growth in private sector revenue, including increasing support for the Co-ordinator position as Trillium support decreases. ACT's Development Department and VIVER members are developing plans to increase financial support for ACT from the Portuguese-speaking community as part of ACT's overall revenue generation efforts.

F3. What economic impact (if any) will result from this work?

Increased education about HIV/AIDS will reduce the rate of new HIV infections within this community. HIV/AIDS places serious burdens on the health care system. In addition, HIV infection heavily impacts family members. These family members are often caregivers and often see a loss of income as they leave and/or reduce work to support family members living with HIV/AIDS.

Section H: Monitoring and Evaluation

H1. How will ACT know if it is achieving the results listed in Question D3?
The effectiveness of our outreach and community development efforts will be evaluated using the following techniques:

(a) needs assessments will be conducted at Portuguese-speaking agencies regarding HIV/AIDS and safer sex training requirements (Community Development Co-ordinator, other VIVER members);
(b) follow-up surveys will be administered after training sessions at agencies in the Portuguese-speaking community to determine increase in knowledge about HIV/AIDS issues (Community Development Co-ordinator, other VIVER members);
(c) numbers in attendance and pre-/post-“knowledge of AIDS” measures will be administered at forums/events (Community Development Co-ordinator, other VIVER members);
(d) numbers of volunteers recruited (Community Development Co-ordinator);
(e) number of media reports in Portuguese-speaking media (Community Development Co-ordinator);
(f) number of resource materials translated/requests for these materials (Community Development Co-ordinator);
(g) evaluation of all volunteer training workshop participants (Community Development Co-ordinator);
(h) monthly programme statistical collection and review on number of services hours provided by volunteers and staff, number of volunteer hours provided, referrals made to the Community Development Co-ordinator and to partner agencies, numbers of clients accessing support services etc (Community Development Co-ordinator);
(i) monthly update meetings at monthly VIVER meetings (Community Development Co-ordinator); and
(j) semi-annual progress reports to funders (Community Development Co-ordinator).

H2. Does ACT have any plans to share the results of your evaluation? If so, how?

ACT has a long history of sharing its resources with other AIDS and social service agencies. Results of this project will be disseminated to other ASOs through CAS, will be made available on ACT’s Web site and in the ACT Library, and will be available through the Canadian HIV/AIDS Clearinghouse in Ottawa. In addition, we will make the work of this project known to members of the Portuguese-speaking communities through the Portuguese-speaking media (i.e., through print, radio, and television).
### Section I: Budget - summary

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*Excluding in-kind donations*
### Section I: Budget - detailed

Part 1 of 3

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#### Revenues

- **Ontario Trillium Foundation**
  - $63,860
  - $47,260
  - $40,000
  - $35,000
  - $186,120

- ACT general fundraising revenues
  - $11,492
  - $18,778
  - $25,299
  - $55,569

- In-kind donations
  - ACT
    - $12,000
    - $12,000
    - $12,000
    - $12,000
    - $48,000
  - VIVER
    - $13,000
    - $13,000
    - $13,000
    - $52,000
  - Voluntarism
    - $50,235
    - $59,100
    - $59,100
    - $59,100
    - $227,535

**Total revenues**

- $139,095
- $142,852
- $142,878
- $144,399
- $569,224
### Section I: Budget - detailed

**Part 2 of 3**

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<td>To develop and co-ordinate a volunteer-based community response to HIV/AIDS-related support issues within Portuguese-speaking communities</td>
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<tr>
<td>Salary</td>
<td>$36 500</td>
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<td>$153 500</td>
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<td>All government &amp; internal benefit expenses are based on current rates &amp; may vary with time</td>
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<td>To provide expertise on developing &amp; implementing ACT's fundraising initiatives within Portuguese-speaking communities</td>
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Section I: Budget - detailed
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Cash revenues over expenses
Excluding in-kind donations

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<td>$327,536</td>
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Appendix: Attachments

- Cover letters
- Appendix 1: Contact Information for ACT Board of Directors
- Appendix 2: Contact Information for References
- Audited financial statements, 1999/2000
- Incorporation/charitable status documentation
- Strategic Plan, 1998-2001
Appendix 1: Contact Information for ACT Board of Directors
(as of 29 September 2000)

Dalton Truthwaite, Chair
625 Huron Street
Toronto, Ontario M5R 2R8 Canada
Tel. (home): 416-324-8119
Tel. (work): 416-643-8974
Tel. (ACT V-mail): 416-340-8484, ext. 312
Fax: 416-229-2524
E-mail: dtruthwaite@deloitte.ca

Enrico Mandarino, Vice Chair
77 Huntley Street, Suite 1102
Toronto, Ontario M4Y 2P3 Canada
Tel. (home): 416-929-1200
Tel. (ACT v-mail): 416-340-8484, ext. 313
E-mail: rico@myna.com

Susan Feldman, Treasurer
58 Harcourt Avenue
Toronto, Ontario M4J 1J2 Canada
Tel. (home/work): 416-461-0375
Tel. (ACT V-mail): 416-340-8484, ext. 310
Fax: 416-461-2259

David Williamson, Secretary
58 Winchester Street , Suite 2
Toronto, Ontario M4X 1A9 Canada
Tel. (home): 416-922-6330
Tel. (work): 416-962-8113
Tel. (ACT V-mail): 416-340-8484, ext. 315
Fax: 416-962-4615
E-mail: dawilliamson@trebnet.com

Ali Ahmad
565 Sherbourne Street, Suite 1818
Toronto, Ontario M4X 1W7 Canada
Tel. (home): 416-921-5095
Tel. (work): 416-243-1900, ext. 4045

Tel. (ACT V-mail): 416-340-8484, ext. 306
E-mail: aiahmad@canada.com

Dr. Dean Behrens
15 Maitland Place , Suite 1208
Toronto, Ontario M4Y 2X3 Canada
Tel. (home): 416-921-8729
Tel. (work): 416-978-8265
Tel. (ACT V-mail): 416-340-8484, ext. 311
Fax: 416-978-3963
E-mail: dbehrens@chass.utoronto.ca
Appendix 1

Dr. Evan Collins
833 King Street West, Suite 304
Toronto, Ontario M6G 3A8 Canada
Tel. (home/work): 416-603-6027
Tel. (ACT V-mail): 416-340-8484, ext. 308
E-mail: ecollins@interlog.com

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Appendix 2: Contact Information for References

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Referee 2

Name: Sharon Baxter
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Relationship to ACT: Staff, CAS: ACT is a member of CAS
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Referee 3

Name: Laurie Edmiston
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Referee 4

Name: Henry Koo

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Referee 5

Name: Frank McGee

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Referee 7

Name: Karen Cairney

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Referee 8

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Referee 9

Name: Susy Nunes

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