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where men have sex with men....**Everywhere**

everywhere 

A European Methodological Model of HIV Prevention
in Men who have Sex with Men (MSM): The
Everywhere Project

Continuous and Final Evaluation Report

Deliverable 17

Contributors

Elizabeth Pottinger

Dr Liz McDonnell

Dr Nigel Sherriff

on behalf of the Everywhere Consortium



University of Brighton

**International Health Development Research Centre
(IHDRC)**

University of Brighton
Mayfield House
Brighton, BN1 9PH
UK

Web: www.brighton.ac.uk/snm/research/ihdrc/
www.everywhereproject.eu





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Section 1

1.1 Introduction

The Everywhere Project was co-funded by the European Commission and aimed to develop and establish a culturally adapted European model of Human Immunodeficiency Virus (HIV) prevention in Men who have Sex with Men (MSM). This has been achieved through the efforts of a coordinated European network made up of 17 organisations from different areas of public health and health promotion, including public health organisations, academic organisations, non-government organisations active in HIV issues or in the defence of the rights of gay people, and organisations that unite gay business owners. Led by the International Health Development Research Centre (IHDRC) at the University of Brighton¹, Everywhere has worked in collaboration with a European network of 17 partners (eight associated partners and seven collaborating) from eight different countries including the UK, Spain, France, Cyprus, Hungary, Italy, Poland, and Slovenia (See Appendix A for a list of the associated partners)

Social mediators (SM) from each participating country have been trained to identify access and achieve the commitment of the 'gay'² businesses (located in tourist destinations and other European capital cities) for HIV prevention targeting MSM. These businesses include both sex and non-sex venues, such as clubs, bars, saunas, cinemas, hotels, travel agents and dating websites. The commitment made by businesses refers to meeting either the Minimum or Premium Standards for HIV prevention (see table 1 for details of these Standards; see also Friboulet, Alexandre, McDonnell, Sherriff, and Tunstall, 2010; Sherriff, McDonnell, Sutton, Tunstall, Alexandre, Friboulet, Martín-Pérez, and Hernández-Fernández, 2010).

SMs assessed whether the businesses met these standards and if successful awarded them with the Everywhere Seal of Approval (See Appendix B for copies of the Everywhere certificate) which is valid for one year in the first instance. If businesses were not successful in achieving the Everywhere Minimum Standards, then SMs were encouraged to support them until they could meet the Standards or at least were promoting risk-reduction behaviour.

To explore the feasibility of this culturally adaptive project a Pilot Action was conducted. The Pilot Action was due to start on the 1st March 2010, however due to delays in the development of the Everywhere Standards (discussed later in the report, see page 22), the start date was postponed until the 18th March 2010. The Pilot aimed to contact up to 140 businesses and have at least 30 businesses certified to either Minimum or Premium Standards by the end of the pilot on 30th July 2010.

¹ Everywhere was originally coordinated by the Dirección General de Atención Primaria (DGAP) in Madrid between April 2008 and April 2009 under the directorship of Dr Ramon Aguirre. IHDRC at the University of Brighton began talks to take over the project co-ordination during October 2008 which was finalised in April 2009 following submission of an amendment to the European Commission in January, 2009.

² 'Gay' business is used as a general term accounting for any business which facilitates sex between men.

Table 1. Requirements for the Everywhere Minimum and Premium Standards

The Standards for Minimum Seal are:
1. Condoms and lubricant provision (free, discounted or full price)* 2. Information about: <ul style="list-style-type: none"> - Where to get tested for HIV and other STIs - Where to be treated for HIV and other STIs 3. Staff knowledge about the Everywhere Project <small>*Or information on where to get them for websites</small>
The Standards for the Premium Seal are:
1. Free condoms and lubricant 2. Information about: <ul style="list-style-type: none"> - Where to get tested for HIV and other STIs - Where to be treated for HIV and other STIs - How to protect yourself and your partners from HIV and other STIs 3. A safer environment for your sexual health 4. Welcome of sexual health outreach workers * 5. Regular staff updates about HIV/STI issues and the Everywhere Project 6. Commitment to anti-discrimination in relation to HIV positive staff and customers <small>*except for travel agents and hotels</small>

1.2. The Continuous and Final Evaluation

Everywhere is divided into nine distinct Work Packages (WPs). This Continuous and Final Evaluation Report is linked directly to Work Package 3 ‘Evaluation of the Project’ and constitutes a high-priority activity within Everywhere. A continuous and final evaluation plan was submitted to the European Commission as Deliverable 3 in June, 2008 by the former main beneficiary DGAP (formerly the Instituto de Salud Pública [ISP]). The original plan was developed by external consultants Adriana Consulting under the auspices of Dr Ramon Aguirre, Dr Tomas Hernandez, and Alberto Martin-Perez, and set-up a follow up and control system for the collection of information every six months. The evaluation process was intended to be external to the project coordinators and planned to be monitored by the Universidad Complutense de Madrid and Adriana Consulting.

The change of main beneficiary from DGAP to the UoB in April 2009, led to the design of a new continuous and final evaluation plan to reflect the changes made during the amendment to the Everywhere Project contract. On reflection, it was felt that the initial plan was overly complex and not feasible to implement due to the delays experienced in the project. Consequently, the revised evaluation plan was much simpler and more streamlined whilst still allowing effective process and outcome evaluation to be implemented (see Sherriff, 2009 for full details of the change in main beneficiary and the subsequent project changes that resulted from this). In this report a process evaluation signifies a focus on what the project does and for whom; and outcome evaluation represent a focus on the changes that have occurred as a result of the project and whether it is having its intended effect. There have also been some further (albeit minor) developments to the second evaluation plan since its submission that were deemed necessary in order to reflect the fluid and organic processes involved in continuous evaluation.

The evaluation of the project has unsurprisingly been affected by the tight (and delayed) project timelines within which it has been operating; approximately nine months of project time were lost due to the significant administrative changes in coordination pre April 2009. This has led to a greater focus in the evaluation on processes rather than outcomes as there has been less time to measure these. It is also important to note that this evaluation has been conducted by the UoB and therefore by the Everywhere Project Coordination team. There are of course potential advantages of an internal evaluation such as being able to monitor the project's operation and make changes to the delivery plan as necessary thus enhancing project outcomes. Also, detailed knowledge and understanding of the project mean that small but influential issues can be identified and accounted for in the evaluation. During the project monitoring data has been used to reflect on and change aspects of the project that were not working i.e. to improve the operation of the program. This has been extremely important and has allowed delivery of the best program possible considering the restrictions in time and other resources.

However, there are also potential disadvantages of an internal evaluation including: evaluators potentially being less objective in their analysis as they are closer to the project; and that evaluation processes take staff and resources away from the everyday management and implementation of the project. Evaluation processes have definitely reduced staff time for project delivery tasks in Everywhere; however, as stated earlier, this has been offset by the improvements that have made to the delivery of the project through the team's more nuanced understanding of project processes. Issues around objectivity are clearly pertinent here and it is fair to say that the UoB team could not have been as objective as an evaluator from outside of the project. A key issue is that much of the evaluation data has been collected by the UoB team and perhaps it was more difficult for participants to be open and forthcoming, particularly around project coordination issues.

1.3 Data Collection for the Evaluation

Evaluation data has been collected from several sources at various designated time points throughout the project. Specifically, three groups have been consulted during the project including coordinators, partners (including SMS) and target groups (e.g. MSM, businesses, other NGOs and PHAs). A breakdown of the consultation with each group is shown below.

Coordinators:

- Consultation with members of the coordination team at regular intervals throughout the project.
- Review of e-mail or telephone correspondence between the coordinators and the partners or target groups.

Partners:

- Consultation with associated partners through Skype/telephone interviews, focus groups and questionnaires over seven time points: June, September, October/November 2009 and January, April/May, July/August and September 2010
- Questionnaire feedback from 13 SMS after attending the SM training in September 2009.
- Written feedback from two Spanish NGO representatives who attended the SM training in September 2009.

- Feedback questionnaire from partners following the final dissemination seminar held in Madrid during September 2010.
- A written report from Ben Tunstall (BT; Social Mediation Trainer and leader for work packages 5 & 6) from the THT, on the SM training and facilitating the SM network (Tunstall, 2009).

Target Groups:

- Baseline audit of 'gay' businesses: 54 Interviews with relevant businesses conducted by SMs in October and November 2009.
- E-mail feedback from a Hungarian 'gay' business owner.
- Teleconference between project coordinators and David Novak, Senior Public Health Strategist at Online Buddies in November 2009.
- Consultation with relevant stakeholders throughout the evaluation process (e.g. Nikos Dedes [European AIDS Treatment Group], and Robbie Currie [Department of Health, UK])
- Feedback questionnaire from participants including NGOs, PHAs, and businesses, following the final dissemination seminar held in Madrid during September 2010.

Further informal sources of data and information have also been drawn upon in the continuous evaluation including (but not exclusively):

- The Everywhere Project website
- Regular email and other personal communications
- Work plans
- Agendas and minutes of the project meetings
- The Scoping Report
- Conference presentations
- Written scientific papers
- Other relevant documentation

1.4 Aims of the Evaluation

At the end of the evaluation, the UoB team wanted to be able to:

- Identify strengths and weaknesses of the project
- Identify processes and activities that have been found to be useful in implementing the project
- Identify the contextual factors that may affect implementation of project activities e.g. Policy, law, sex culture
- Improve the implementation of the project both *during* the project and in possible future scenarios e.g. If a second phase of the project is funded
- Measure the short term impact of the project
- Consider the potential sustainability of elements of the project's processes and outcomes

Section 2 - Evaluation Framework

2.1 Everywhere Logic Model

The evaluation of Everywhere has drawn upon useful and relevant tools from the Program Evaluation Tool Kit published by the Public Health Agency of Canada (PHAC, 2008). The tool kit is tailored specifically for the evaluation of public health programs and aims to give program managers effective ways to evaluate programs effectiveness and consequently to effect change within those programs.

A Logic Model is an evaluation tool that presents a clear description of the project and links project activities with outcomes and covers questions about what the project is supposed to do, with whom and why (PHAC, 2008). Logic Models include:

- *Components*: groups of closely-related activities in a project
- *Activities*: the things the project does to work toward its desired outcomes
- *Target groups*: the individuals, groups or communities for whom the project's activities are designed
- *Outcomes*: the short (direct results of project) and long term (consequences of project in broader community) changes the project hopes to achieve.

In relation to the long term project outcomes, it has been beyond the scope of this evaluation to measure these due to funding restrictions i.e. that project funding ceased two months after the Pilot Action was completed. Moreover, long term outcomes can take a much longer time to occur and are notoriously difficult to measure because of an array of potentially intervening factors/forces. Nevertheless, there should be a logical flow between short and long term outcomes which make it likely that if short outcomes are achieved, long term outcomes will follow (PHAC, 2008).

The Everywhere Project Logic Model is described below and forms the foundation of the evaluation.

Figure 1. Everywhere Project logic model

Components	Social Mediation (SM)	HIV Prevention and Sexual Health Promotion	Building Intersectoral Network
Activities	<ul style="list-style-type: none"> ▪ Train SM's ▪ Develop training Materials ▪ Facilitate SM Network ▪ Audit of European Businesses ▪ Assess and Certify Approved Businesses using Social Mediation 	<ul style="list-style-type: none"> ▪ Design and Produce Everywhere Leaflets for MSM and Businesses ▪ Design and market promotional tools ▪ Develop culturally adaptable HIV Prevention Standards ▪ Monitor Standards and Certification Process during Pilot Action ▪ Develop Database of Businesses Certified with Everywhere Seal ▪ Disseminate Information about the Project ▪ Publish and Disseminate the Everywhere Manual 	<ul style="list-style-type: none"> ▪ Project Meetings ▪ Website Management ▪ Scoping Report ▪ Coordination of Consortium ▪ Final Dissemination Seminar
Target Groups	<ul style="list-style-type: none"> ▪ Businesses ▪ NGOs 	<ul style="list-style-type: none"> ▪ Businesses ▪ NGOs ▪ MSM (indirect) 	<ul style="list-style-type: none"> ▪ Businesses ▪ NGOs ▪ Public Health Authorities (PHAs)
Short-term Outcomes	<ul style="list-style-type: none"> ▪ Increased no's of trained SM's ▪ Increased no of businesses commit to HIV prevention activities ▪ NGOs support businesses in HIV prevention activities 	<ul style="list-style-type: none"> ▪ Increased awareness of project among MSM, businesses and NGOs ▪ MSM access 'safer' businesses ▪ Increased no's of people can do HIV Prevention/sexual health promotion using Manual 	<ul style="list-style-type: none"> ▪ Increased communication between relevant sectors
Long-term Outcomes	<ul style="list-style-type: none"> ▪ Increased no of businesses engaged in HIV Prevention Activities 	<ul style="list-style-type: none"> ▪ MSM less likely to engage in risky behaviour 	<ul style="list-style-type: none"> ▪ Multi-sector commitment and/ or partnerships cooperation around HIV/sexual health issues
	<ul style="list-style-type: none"> ▪ Reduction in levels of HIV /STI transmission 		

2.2 Evaluation Framework

Using the logic model above, the project evaluation answers a series of questions around project activities, target groups, and project outcomes. The table below details the questions that were answered as well as the groups of people consulted in the evaluation.

Table 2. Everywhere evaluation questions

1.Activities	Who was Consulted?		
	Coordinators	Partners	Target Groups
Were activities implemented as planned?	X		N/A
Were required resources in place and sufficient (i.e. within budget)	X	X	N/A
Did partners think they were well prepared to implement the activities?		X	N/A
What activities worked well? What activities did not work so well?	X	X	X
What were the contextual factors that influenced implementation?	X	X	X
Which if any activities are sustainable?	X	X	N/A
2.Target groups (Businesses, MSM, NGOs and PHAs) (partners and non partners)			
Did the program reach the intended target groups?	X	X	X
3.Outcomes			
Have the short term outcomes been reached? <ul style="list-style-type: none"> • Increased no's of trained SMs • Increased no of businesses commit to HIV prevention activities • NGOs support businesses in HIV prevention activities • Increased awareness of project among MSM, businesses and NGOs • Increased communication between relevant sectors 	X	X	N/A
Have the long term outcomes been reached? <ul style="list-style-type: none"> ▪ Increased no of businesses engaged in HIV Prevention Activities ▪ MSM less likely to engage in risky behaviour as safer businesses ▪ Multi-sector commitment and or partnerships around HIV/sexual health issues ▪ Reduction in levels of HIV /STI transmission 	X	N/A	N/A

SECTION 3 - EVALUATION OF ACTIVITIES

This section focuses on the largest part of the evaluation which is around Everywhere Project activities. Evaluation data in this section has been taken from a range of sources including: regular project interviews, focus groups, email communication and questionnaires with partners, SMs and other stakeholders.

In the sub sections below, the evaluation data has been integrated around the relevant activity component headings and activities described in Section 2 above. The following questions have been answered for each activity:

- A. Were the activities implemented as planned?
- B. Were the required resources in place to do those activities?
- C. Did partners think they were well prepared to implement activities relevant to them?
- D. What activities worked well and why?
- E. What activities worked less well and why?
- F. Which if any activities have led to something sustainable?

3.1 SOCIAL MEDIATION

A. Table 3 indicates whether or not key social mediation activities were implemented as planned as well as detailing when they were completed and where documentation can be found to support their implementation.

Table 3. Details of key social mediation activities

Activities	Who responsible for activity	Date completed	Work Package (WP)	Documentation to support
Train SMs (2 dimensions - Formal training event and then training conducted by partners/SM's in own countries)	THT (but all partners actively involved)	September 2009	5	Evaluation of training (appendix D) Action point minutes from the training
Develop Training Materials	THT	September 2009	5	Training workbooks (D7) on project, EAHC, and Aids Action Europe websites in all partner languages
Facilitate SM Network	THT	ongoing until - September 2010	5	Email, communication in project files, active facilitation at Project Steering Committee (PSC), conferences, and other project meetings
Audit of European 'Gay' Businesses	THT (but all partners actively involved)	November 2009	5	Interview transcripts in project files Final report available on the project website (D10)
Assess and Certify Approved 'Gay' Businesses using Social Mediation	UoB/All Partners	July 2010	8	Assessment checklists in project records (D10, D13). Certified businesses listed on the Project website

Completed activities will now be explored individually to answer questions B-F.

▪ Train Social Mediators

B. Due partly to the delays in the project as a result of the change in main beneficiary, the Everywhere Standards were developed later than initially planned and so were not available at the time of the SM training (September, 2009). WP 5&6 leader and SM trainer Ben Tunstall (BT) felt that he could have delivered a better training programme if the Everywhere Standards had been developed prior to the training. In effect, he did not have the necessary tools to deliver the best training at that time.

C. Apart from the lack of finalised Standards, BT reported that he felt prepared to conduct the SM training.

D. The SM training was a key activity within the Social Mediation component and this was well received by participants. Evaluation questionnaires were completed by SMs at the end of the training and the UoB team analysed this data (the SM evaluation data is summarised in Appendix D). Specifically, the results indicated that the training was particularly useful in relation to: how well the course topics were covered; the usefulness of the group exercises; the relevance of the course, course administration and; how the trainer worked with the groups – the large majority of responses were in the good to excellent categories.

E. As mentioned above, due to the delay with the development of the Everywhere Standards, the SM training had to be conducted before they were completed. Following an unscheduled but crucial progress meeting in Paris, partners from SNEG, DGAP, THT and UoB agreed upon the Everywhere Minimum Standards in principle so as to provide a foundation for delivery of the SM training. BT felt that if the Standards had been finalised, he would have done a more 'gritty', applied training session focusing on the object that was being mediated around i.e. the Standards.

BT also highlighted the issue of language difficulties and noted that delivering the Social Mediation training in English benefitted mostly those who were good English speakers and thus may have potentially excluded others with less well developed language skills. Training materials therefore had to be simple to keep it accessible to everyone reducing nuance and types of subtlety in conversations. Ideally he would have had face to face contact with partners before the training as he explains below:

"Today everything has come together for me. I've been struggling for the last 5 or 6 months to devise the training and to set up the social network but now that I've met you all and just the subtleties of our conversation and the information you've given me and everything has fallen into place and it's only the first day so it's really informed the work that I'm doing powerfully and that hasn't happened by email yet. Maybe it will but face to face seems to be incredibly powerful." (BT, Everywhere Associated Partner and Social Mediation Trainer, September 2009).

In the evaluation questionnaire, some participants suggested that the training could have been improved by providing more time to discuss experiences with each other, to network and to get a clearer idea about their different contexts. One partner said:

"I'd like to know more about partners and what they are really doing and how this could help to understand better the obstacles we are likely to face." (Social Mediator, September 2009)

Before the training, BT identified that partners had vastly different levels of social mediation skill and experience so Everywhere partners decided that the training should be pitched at a basic level to ensure all participants share the same foundation in social mediation skill.

However, this meant that some more experienced mediators were being taught basic mediator skills that they already knew. This was reflected in some of the training evaluation questionnaires:

“There were some subjects not necessary for me but I understand other organisations may find it useful.” (Social Mediator, September 2009)

If Everywhere II is eventually successful (i.e. re-submitted), the project may benefit from differentiating any future training depending on the SM skills of those attending.

F. 46 SMs are now trained to work with businesses around HIV Prevention issues and these skills can continue to be utilised in the future. Both Hungary and Spain particularly, have trained large numbers of SMs who are willing to continue working with businesses and the Italian partner, ANLAIDS plan to use the same SMs for their next project. All SM were trained within a Training The Trainer (TTT) model meaning that they are now able to train others both from their own and other organisations; such a way of working helps to build capacity in these organisations.

▪ **Develop Training Materials**

B. The training materials were produced by BT (see Tunstall, 2009) and a small budget was allocated for external parties to do translation if required. All partners reported that the workbook was a relatively easy book to translate; however most partners were overdue with their translation by approximately two months.

C. BT felt that designing the SM training materials was a challenging task as previously the UK have focused on outreach workers and so had no history of social mediation. Therefore, he felt that another country with more experience with social mediation may have been better equipped to develop the training materials although there would have been issues with translation. Nevertheless he learnt a lot from doing it and would now like to change the UK's focus from outreach workers to social mediation using the experience he has gained from Everywhere.

D. BT reported that he was 'proud' of the materials he developed for the SM Training including the Training Workbooks. In the end of Pilot Action interviews (See appendix H for summary of pilot action interviews) partners and final dissemination focus group partners reported that the materials had been very useful when training more SMs in their countries.

E. Despite the challenges faced by BT when designing the training materials they received no negative feedback from partners.

F. Social Mediation Training Workbooks were developed in eight languages; these resources can be used in the future and can be easily updated or adapted if changes are made to the project (see Tunstall, 2009; see also www.everywhereproject.eu). HTM in Hungary reported that using the training workbook has added value in terms of training NGO employees (voluntary and paid) to do outreach for Everywhere as well as other similar projects. One of the Italian partners, ANLAIDS reported that they will be using the SM training material for their next HIV prevention project.

▪ **Facilitate SM Network**

B. The SM network was facilitated mainly through e-mail but also through the social networking site 'Facebook'. These routes of communication were used effectively to organise the training and to help SMs to keep in touch and work together.

C. BT felt prepared to facilitate the SM network. He reported that meeting other SMs at the September 2009 Project Steering Committee (PSC) meeting was crucial and led to communication through Facebook and e-mail which continued throughout the project.

D. The results of the questionnaire from the January 2010 PSC meeting indicated that partners were happy with the SM network. They rated highly when asked how well they thought the members of the SM network shared ideas (mean score = 8.1/10), recognised and respected cultural differences (8.4/10), supported each other's work (7.9/10) and added value to each other's work (8.4/10). BT reported that communication was ongoing throughout the project and that strong relationships had been formed.

E. There was no negative feedback about the SM network.

F. BT believed that the strong relationships formed through the SM network will be maintained and utilised again for future HIV prevention work.

▪ **Audit of European 'Gay' Businesses**

B. Both the sub-contractor and work package leader for this work (BT) reported that they the required resources were in place to do this. The audit deliverable (D.10; see Bogen-Johnston, 2010) was completed in February 2010.

C. The SMs all had the required experience and training to conduct the interviews with 'gay' businesses. With supervision from the UoB, the researcher also felt prepared to work on the business audit.

D. The audit document was well-received by all partners, and specifically, SNEG reported that it had been useful for increasing their awareness of the current HIV prevention situations in each country. The UoB used the business audit as a springboard to talk about the project in academic contexts, for example the audit comprised a large part of a formal presentation at the CHAPS conference in Sheffield (Tunstall, McDonnell, and Sherriff, 2010), and further conferences in Madrid (McDonnell, & Sherriff, 2010), Geneva (Sherriff, 2010) and Vienna (Sherriff, Tunstall, and Malkuszewski 2010).

E. There was no negative feedback concerning the actual audit itself, however there were problems related to the delay in its completion. SNEG reported that an earlier finalised document would have permitted them to work out more precisely how to implement the Everywhere Standards in each partner country.

The delay in completing the audit was caused by a necessary change in sub-contractor. Originally, a research consultancy company was contracted by the THT to complete the work. However after the company presented their proposed research plan at the SM training in September 2009, it was clear that they had misunderstood the brief. Concerns were raised by the UoB and other partners' about the ability of the consultancy company to complete the works satisfactorily. Consequently, following discussions between UoB, THT, and SNEG, it was decided to cancel the contract and look for a more suitable replacement. An alternative researcher was subsequently found who conducted the analysis of the interviews under supervision by the UoB. As a result of the inevitable delays, the report was completed two months behind schedule and also affected the budget as the original research company still had to be paid for the preliminary work they completed.

F. This is a document that is likely be used again in the future to help with the progression of this and/or other similar projects. It will also form the basis of a peer reviewed publication led by UoB in collaboration with other project partners.

- **Assess and Certify Approved 'Gay' Businesses using Social Mediation**

B. Partners reported that the required resources were available to assess and certify approved businesses using social mediation. In the Pilot Action interviews positive feedback was given regarding the assessment tools (see Friboulet *et al.*, 2010) used by SMs to certify businesses:

“The assessment tool is great. Clear and simple.” (Everywhere Associated Partner, April 2010)

“This is working very well and is clear, unambiguous and logical” (Everywhere Associated Partner, April 2010)

C. Evaluation data indicated that partners felt prepared to assess and certify businesses through social mediation. In the questionnaire at the January 2010 PSC meeting, partners rated highly when asked how clear they were about what they needed to do in preparation for the Pilot Action (mean score 8.3/10) and how confident they were that they would be able to sign up businesses during the Pilot Action (mean score 8/10). During the pilot interviews, partners also indicated that they felt prepared and supported by the coordination team to approach and certify businesses:

“The support levels are perfect and the businesses signed up are very happy to be involved” (Everywhere Associated Partner, April 2010)

D. General feedback indicated that SMs have been accepted by businesses and that most support and welcome the Everywhere Project. When SMs initially approached businesses their response differed depending on their experience of HIV prevention. Businesses who had been involved in HIV prevention projects in the past were happy to be part of a European initiative whereas businesses in countries which had not previously conducted such a project were initially more reluctant to be involved. For example, at the end of Pilot Action interviews, the Hungarian partner explained that the business owners and customers in Hungary were concerned that the venue was a place for entertainment and they didn't want to be reminded of the 'bad issues'. Nevertheless, the SMs continued to work with them and they have since been accepted by both owners and clients as they now understand that it is their responsibility to help. Similarly, the Slovenian partner reported at the end of Pilot Action interviews that some businesses were initially unwilling to sign up to the project but the SMs convinced them of the benefits and promised them free condoms and lubricant which acted as a strong incentive.

The professional or personal experience of the SMs appeared to influence their relationship with 'gay' businesses. For example, the UK partner reported the success he had observed with the engagement of gay male SMs as it showed businesses that potential customers support the concept. Conversely, the Cypriot partner explained that using SMs with experience of working within the 'gay' tourist business had been very valuable in forming relationships with reluctant businesses. This demonstrates the importance of taking the cultural situation into account when recruiting SMs.

Businesses have reacted positively to being awarded the Everywhere Seal of Approval and many have requested to be more involved in the Everywhere II project. A UK business representative, who attended the final dissemination seminar in Madrid, expressed the importance of being involved in such a project to provide a safer environment for their clients as it has both social and financial benefits for the business. Consequently, many of the certified businesses have been promoting their Seal of Approval. For example one business

in Cyprus reported that they were planning to use the fact that they are Everywhere approved as a mark of their social contribution and will advertise this through T-shirts. Additionally, a business in Slovenia promoted their Seal of Approval by framing the Everywhere certificate on their wall and the Hungarian partner held an award ceremony when certifying the businesses which led to a lot of positive publicity for them.

E. Although most of the SMs were welcomed by businesses, there were some contextual factors that caused difficulties. One such factor was the differing laws across the European countries regarding sex venues. For instance sex venues are illegal in Cyprus and Italian law states that sex in public venues is illegal but sex in private venues is legal if they are members of ARCIGAY. Nevertheless, if the police or local health authorities 'visit' the private sex venues they are empowered to close them for prostitution. Consequently, some businesses have been reluctant to provide condoms and lubricant in case this was seen as promoting sex at their venue. Businesses were also disinclined to sign up to the project in fear that involvement with a HIV prevention scheme would spoil or taint their reputation as the Slovenian partner states:

“Overall, travel agents and hotels don't want to make their gay couples/customers visible but are happy to have them as customers and Everywhere steps up that potential issue of making a business a 'gay' business rather than a family business- there doesn't seem to be a middle ground. They don't want to offer condoms as this acknowledges that sex is going on.” (Everywhere Associated Partner, April 2010)

Additionally, some businesses were hesitant to be associated with HIV prevention because of broader ignorance and prejudice, especially in countries where there is much stigma around the subject. The Cypriot partner had experienced this problem as some businesses refused to display the Everywhere certificate and sticker in fear of discrimination or of deterring customers. Nevertheless, the SMs continued to work with five of the 'gay' businesses that could not be certified and provided them with leaflets which they agreed to distribute.

Contextual factors also limited some businesses to only achieve the Everywhere Minimum Standards. These factors included a lack of free condoms and difficulties in training staff. In countries such as Poland, the UK, France, and Spain partners receive funding from their Governments to supply condoms; however other partners did not have this funding and the lack of free condoms acted as a barrier to businesses signing up or reaching the Premium Standards. In Hungary, this was a particular problem as business owners understood the importance of social responsibility and wanted the publicity connected to being awarded the Premium Seal but they argued that they were not in a financial position to supply free condoms and lubricant. Furthermore, although HTM (Hungarian Everywhere Partner) were flexible regarding the time of staff training, the business owners said that they could not make staff go to training outside of work hours but did not want them to miss work to attend training. Staff training was also an issue for some Slovenian businesses due to the high turnover of employees.

An issue which affected the Spanish partner was their need to rely on volunteer SMs. The change in main beneficiary also involved two Spanish NGOs (FT and COGAM) to change their status from associated partners to become collaborative partners. This meant FT and COGAM were no longer entitled to funding and the only associated partner from Spain was DGAP, a Public Health Authority (PHA). Consequently as DGAP were not in a position to train any SMs themselves, they initially felt that they would not be able to participate actively in the Pilot Action. However, following discussions with FT and COGAM, both NGOs agreed to provide SM support to DGAP on a volunteer basis in Madrid. Although this allowed the pilot to be conducted in Spain, certifying 17 businesses, DGAP reported that relying on

volunteer SMs had been difficult especially in terms of the sustainability of the project as the volunteers required supervision by a coordinator.

In the final dissemination focus group with partners, the most often cited weakness was the uncertain sustainability of the project:

“No clear perspective for the future” (Everywhere Associated Partner, September 2010)

“A lack of sense of direction” (Everywhere Associated Partner, September 2010)

Without confirmation that the Everywhere II project will be funded (at that time), SMs could not assure businesses about the future of the project and the amount of support and monitoring they could provide after September 2010. Also, some of the partners were reluctant to publicise the project too much across businesses, MSM and the general population in case Everywhere II was not funded.

F. As the certified businesses have registered their interest in being involved with HIV prevention, it is hoped that the relationships between the NGOs and businesses will be sustainable after the pilot even if funding for the project does not continue.

3.2 HIV PREVENTION AND SEXUAL HEALTH PROMOTION

A. Table 4 indicates whether or not key Everywhere HIV prevention and sexual health promotion activities were implemented as planned, as well as detailing when they were completed and where documentation can be found to support their implementation.

Table 4. Details of key HIV prevention and sexual health promotion activities

Activities	Who responsible for activity	Date completed	Work Package (WP)	Documentation to support
Design and Produce Everywhere Leaflets for MSM and Businesses	THT & UoB	March 2010	6	Leaflets (D9), Everywhere records, project, and Aids Action Europe websites
Design and Market Promotional Tools - stickers, certificates condoms and lubricant	All partners	February and December 2010	2 & 8	Everywhere records and website. Email communications and partner final reports.
Develop Culturally Adaptable HIV Prevention Standards	SNEG	March 2010	7	Everywhere records and final report (D11)
Monitor Standards and certification process during Pilot Action	UoB	July 2010	8	Project website for details of certified businesses and Everywhere records - checklist and excel database (D12).
Develop Database of Businesses Certified with the Everywhere Seal	UoB	Sept 2010	8	Everywhere records and excel database (D12)
Disseminate Information about the Project	All Partners	ongoing until Sept 2010	2	Project website and Everywhere records, press releases and news articles. Conference presentations and scientific articles (D15)

Publish and Disseminate the Everywhere Manual	UoB	Sept 2010	9	Project, EAHC, and Aids Action Europe websites
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The activities will now be explored individually to answer questions B-F.

▪ **Design and Produce Everywhere Leaflets for MSM and Businesses**

B. The Everywhere leaflets were designed and printed in the UK and then sent to the participating countries; however the cost of courioring the leaflets was much higher than expected which impacted on the number of leaflets that could be produced. Originally, coordinators planned to produce 16,000 leaflets for businesses and 32,000 for MSM but the restricted budget after courier costs meant that only 14,000 were produced for businesses and 16,000 for MSM.

C. There was a delay in the production of both the MSM and Business leaflets as the Everywhere Standards were developed later than initially scheduled. Final versions of the business leaflets were printed and distributed to partners during November 2009 (delayed from July, 2009). At this point, a strategic decision was made by THT and UoB to delay further the content and production of the MSM leaflets until the Everywhere Standards had been finalised by SNEG. Consequently, the MSM leaflets were printed and distributed to partners during March 2010 to coincide with the start of the Pilot Action. THT confirmed that they were prepared to implement the production of the leaflets but the original timescale for them was unrealistic.

D. When designing the leaflets, questions were raised over the cultural appropriateness of the words used for certain countries. To resolve this issue project partners were consulted throughout the design process and were able to make changes to the wording when translating the leaflets to ensure they were culturally acceptable. These final leaflets were received positively by all partners and proved to be especially useful in countries where there is very little HIV prevention for MSM as they instigated discussion and increased awareness about the subject. For example, the Cypriot partner distributed the Everywhere leaflets at many key events to the general public. Although it is positive that the leaflets are being used to publicise the project, they do not give much information about HIV and so a member of the coordination team suggested that a more informative leaflet could be given as well as the Everywhere leaflet.

E. As explained above, the main problem with designing and producing the leaflets was the high cost of sending them to other countries which meant that fewer leaflets were produced than planned. To overcome this issue in the Everywhere II project, if funded in the future, leaflets will instead be printed by individual partners to save money on couriers. Another issue that one partner reported during the end of pilot interviews was that the leaflets were too big and not eye-catching enough:

“The leaflets did not get people’s attention they got a way to big printing format for the people to be willing to take them. In Spain, the Sex Places are usually small places and do not count with big physical space for leaflets, and even the owners and workers express to us that these leaflets were way too big.” (Everywhere associated partner, August 2010)

The size of the leaflet was also discussed in the final dissemination focus group and partners agreed that the leaflets were too big and contained too much information:

“Too big [the leaflets] to take away, too much information” (Everywhere associated partner, September 2010)

They suggested that smaller, simpler Everywhere cards which could fit into a person’s wallet or back pocket would be beneficial as MSM would be more likely to take them away. If the Everywhere II project is funded the different options for leaflets will be explored.

An issue regarding the Everywhere leaflets that had not been anticipated was the need for leaflets in a selection of languages in each country due to the high number of foreign customers. For example in the final dissemination focus group the Polish and Hungarian partners both reported that up to 30% of the customers at ‘gay’ businesses had come from abroad so did not understand the Hungarian and Polish leaflets. As this had not been an expected issue, there was not enough money in the budget to produce and send more leaflets in different languages during the pilot.

All of the issues discussed above highlight the importance of conducting a pilot as problems relating to the budget were identified and improvements can be made to the leaflet design, production and distribution if the Everywhere II project is funded.

F. The partners can continue utilising the Everywhere leaflets to increase awareness of HIV particularly in those countries where less HIV prevention material is less available. Moreover, each partner holds an editable electronic version of the leaflet allowing them to make changes as necessary and re-print if required.

▪ **Design and Market Promotional Tools**

B. The Everywhere promotional tools were produced in the UK and sent to participating countries. Thus, high couriering costs were incurred meaning fewer tools could be produced. Thus, given the relatively small numbers of wallets that could be produced, they were intended primarily as marketing tools for Social Mediators and partners (alongside the Everywhere leaflets, bookmarks, posters, and project website) to use when making first contact with businesses, as well as for supporting businesses once certified with the Everywhere Seal of Approval. Condom wallets were also used by partners for dissemination at conferences, seminars, and other events.

In total, 71, 812 condom-lubricant wallets were produced and distributed to. The wallets were designed using the Everywhere logo (and country partner information), translated into eight languages, and distributed strategically in two batches to partners. The first batch were designed and translated by UOB and produced and distributed by SNEG during February, 2010 - a total of 30,000 condoms were sent to partners (in two languages; English and other). On the advice of SNEG, countries with fewer prevention activities (namely, Poland, Slovenia, Cyprus, and Hungary) received a greater proportion of the condom wallets than other partners (namely, the UK, Spain, Italy, and France) as this was deemed to provide a greater degree of ‘added-value’ for the Consortium. For example in the first batch, 5,500 packs were sent to Hungary, Cyprus, Poland and Slovenia where funding for HIV prevention materials was less available and only 2,000 were distributed to the UK, France, Italy and Spain who had more funding allocated to HIV prevention services. In the second batch, 41, 812 condom wallets were produced and similar proportions again allocated to make best use and maximise impact of the resource.

Nevertheless, the Hungarian partner was concerned that promotional condoms and lubricant were being used quickly. As there was not enough money in the budget to supply any more condom wallets businesses had to either finance their own supply, which they were reluctant

to do, or were restricted to only signing up to the Minimum Standards. The lack of a free (or subsidised) supply of condoms will continue to be an issue in the Everywhere II or similar projects in the future and therefore it is important for the NGOs to explore other routes to funding. Countries such as the UK, Poland, France and Spain receive funding from their Governments to supply free condoms and this acted as an incentive for many businesses to sign up to this project. Although this is something that the other partners are exploring, the cultural differences may prevent this from being a priority of their respective Governments.

C. The UoB team felt prepared to design and market the promotional tools and were well supported by the other partners especially the French partner (SNEG) who played an important role in producing the promotional condom wallets including both condoms and lubricant.

D. There was a lot of consultation on the promotional tools (principally the condoms and lubricant wallets but also including the certificates, stickers, bookmarks etc). Similar to the Everywhere leaflets; there were some issues around the cultural appropriateness of the words and images used. The UoB team ultimately used the same images but the partners were able to adapt the language to suit a context where MSM were not an openly acknowledged group and sexuality was more fluid and around practice rather than identity.

The culturally adapted Everywhere promotional tools were received well by most businesses and partners. The Cypriot partner also distributed the Everywhere condom wallets at key well attended events and in public toilets to reach young people as well as increasing general awareness of HIV.

E. As mentioned above, the main issue with the promotional tools was the cost of sending them to other countries. This meant that there was less money in the budget to fund the production of the materials and so less were manufactured. If the Everywhere II project is funded in the future, the promotional tools and leaflets will all be produced by the participating countries to reduce courier costs.

Another concern with the promotional tools, as discussed above, was the limited number of condoms and lubricant, especially in countries where sexual health promotion services are less developed. The lack of funding for NGOs to supply free condoms is an issue which partners will need to continue to address once the funding for the Everywhere Project has ended.

During the final dissemination seminar held in Madrid, there was debate amongst attendees regarding the location of free condoms at 'gay' business venues. All agreed that placing condoms in a discreet corner or in the dark rooms would encourage MSM to pick one up and use it; however there was also the issue that when condoms were located in discreet places some customers would take a large amount home or to sell on. This is an important issue for businesses with a limited supply of condoms as they are less inclined to place them out of clear view. One suggested solution was to use a tube that only dispensed a limited number of condoms at a time; however there is the concern for the cost of such devices. This suggestion and other ideas will need addressing in the future.

One suggestion made during the final dissemination focus group conducted with Everywhere Partners, was to use more long-term functional promotional tools such as a container for the condoms or even a dispenser as described above which could have the Everywhere logo on as well as information about the project and HIV prevention. Although costly, this idea may be appropriate for Everywhere II as the project will be long term and will require more sustainable promotional tools.

F. N/A

▪ **Develop Culturally Adaptable HIV Prevention Standards**

B. SNEG reported that they had enough money to perform this activity; however they had issues with the limited time allocated for the development of the Standards. David Friboulet (DF) from SNEG felt that they would have benefitted from more time to analyse the business audit in order to understand better businesses' opinions regarding future Standards. Additionally SNEG believed that the time granted for discussion about the Standards in the January 2010 PSC meeting held in Cyprus, was too short and that a full day was necessary to find a consensus and to interrogate each and every Standard. Unfortunately, however, this was not possible within the constraints of the project budget. SNEG also felt disappointed in the lack of support they received from other Everywhere partners when they asked for feedback on the Everywhere Standards. They reported that they had tried to consult all partners but there was little or no response from some countries.

C. As leaders of WP7, SNEG in France were responsible for developing the Everywhere Standards and associated Everywhere Seal, as well as collecting data on similar existing Standards in other European countries (see Friboulet *et al.*, 2010). However, there were a number of associated delays in this process, mostly because of the business audit not being completed on-time. To try and minimise the impact of the business audit detail, 'raw' interview transcripts from the audit were sent to SNEG during November and December 2009 (and final ones in early January, 2010) to help inform the development of the Standards. Furthermore, SNEG and UoB spent a considerable amount of time via teleconference to attempt to define Minimum Standards to present to partners for discussion at the Cyprus PSC meeting. Following this meeting, SNEG and UoB once again engaged to finalise the Standards and associated Everywhere Seal of Approval in preparation for the Pilot Action. Once developed, the Standards and Seal received approval from all project partners (see Friboulet *et al.*, 2010; see also Sherriff *et al.*, 2010).

D. Although developing culturally adaptable HIV prevention Standards was a challenging process, feedback from partners regarding the Standards was positive. Data collected from the questionnaire at the January 2010 PSC meeting indicated that partners thought the Standards (developed at that point), to a large extent, met the needs of businesses in their countries (mean response 8.1/10). Furthermore, Pilot Action data and feedback from partners suggests that the Standards were one of the main strengths of the project as they worked across very different cultural contexts in an unproblematic way. Thus demonstrating that it is possible for European wide HIV Prevention models to work:

"They were very clear and simple" (Everywhere Associated Partner, August, 2010)

"We believe that Everywhere Minimum and Premium Standards are based on appropriate and feasible indicators. We are pleased and congratulate your intention to include between indicators the commitment to nondiscrimination against people with HIV." (Everywhere Associated Partner, August, 2010)

It is important that the success of the Everywhere Project in each country is not solely judged on the number of businesses being certified as achieving the Standards and being awarded the Everywhere Seal of Approval. Rather, cultural differences between partner countries also need to be taken into account. These differences include views on HIV, MSM and sexual health promotion, and the HIV prevention resources and services available in each country at the start of this project. In countries where MSM and HIV are often not acknowledged, the pilot was seen as a success with the Everywhere concept acting as a metaphorical 'hook' upon which people can legitimate conversations and prevent stigmatisation about HIV and

distribute condoms and lubricant. For example, in Cyprus, awareness of HIV prevention was increased not only within 'gay' businesses but also within the general population as leaflets and condoms were distributed at events and in public places. In countries which have not previously conducted a HIV prevention project with 'gay' businesses, Everywhere has been a starting block for such work and will hopefully lead on to further projects. For instance the Italian partner (ANLAIDS) reported that following on from the Everywhere Pilot Action they will be starting their own initiative in September 2010 using the same Everywhere framework:

"Without Everywhere we would not have started this initiative. Thanks to Everywhere we started this collaboration with [gay] clubs" (Everywhere Associated Partner, August, 2010)

Conversely, in France where they have an existing HIV prevention order - the Charte de Responsabilité - they certified 28 businesses but the project has been much quieter due to its uncertain future. In the UK, Everywhere has helped to rejuvenate a pre-existing and flagging system (Playzone) that is suffering from a lack of funding and enthusiasm. Therefore, for all countries success should measure not only the number of businesses certified but (*inter alia*) also the impact of the project on the existing HIV prevention systems as well as the countries' attitude towards and awareness of HIV.

E. Developing a 'one size fits all' model of HIV prevention (with the possibility of cultural adaptation) was an ambitious aim of the project and some of partners expressed that this was a major challenge during the focus groups held with partners at the project PSC in Brighton (September 2009):

"A culturally adapted European model may be a problem in terms of cultural differences. If one model can be adopted unless we can agree that is going to be a different shape for countries and businesses. One consistent model could be difficult."(Everywhere Associated Partner, September 2009)

"[a challenge is] that the model is culturally adapted and specific and meaningful and at the same time European." (Everywhere Associated Partner, September 2009)

However, evidence from the Pilot Action indicated that 'cultural differences' were not a key problem in terms of the actual content of the Standards themselves. Nevertheless, cultural differences did have an impact on the number of businesses certified in each country. In countries where the gay community is less prominent and HIV prevention is not seen as a priority, the SMs encountered extra cultural barriers to certifying businesses. Firstly, relationships with 'gay' businesses were much harder to form, for example the Cypriot partner relied on a mutual friend to gain access to a business and the Hungarian SMs had to persuade business owners and customers that the project would not reduce the entertainment value of the venue. Other issues included a lack of funding for NGOs to supply free condoms, which prevented businesses from reaching the Premium Standards. Also, high stigma around HIV and sexual health promotion discouraged businesses in Cyprus from displaying the Everywhere certificates and stickers in fear that it would deter customers. It is important to account for these barriers when comparing the number of businesses certified in each country.

There were also differences within the Consortium around attitudes to harm minimisation/risk reduction and particularly how these should inform the Everywhere Standards. One such issue was whether sex venues should be awarded the Minimum Seal of Approval. The French partner believed that providing condoms and lubricant should be the 'bottom-line' of the project and that it was a mistake to grant a Minimum Seal of Approval to a sex venue as they were not obliged to supply free condoms and lubricant. However, in some countries sex

venues wanted to be involved in the project but could not secure a free supply of prevention materials so it was decided that SMs could grant these businesses the Minimum Seal of Approval so that at least there was some risk reduction occurring. Nevertheless, this is a situation that is likely to need revisiting again if the Everywhere II project is funded.

Additionally, during the project a controversial issue was raised regarding what to do about businesses that show bareback porn and/or offer, provide or promote bareback spaces. While some partners felt that any businesses promoting bare-backing should be excluded from the project due to the sexual risk-taking that they endorse, other partners raised concerns about the potential cost of excluding businesses. Questions were also raised regarding how much should SMs be the judge of this and how far can they deviate from the Everywhere Standards without de-valuing the European nature of the Seal.

After numerous discussions a much needed project statement was released by the coordinators to provide clarity on the issue:

“We propose that any business (or part of a business) that advertises publicly its promotion of bare backing, should be excluded from achieving the Everywhere Seal. In other words, they cannot be certified with either the Minimum or Premium Seal. However, it is of course important to note that Everywhere NGOs can still work with these businesses around HIV Prevention and towards the achievement of the Seal in due course. Moreover, by excluding bareback businesses from the Everywhere Seal, we are not rejecting risk-reduction approaches to HIV prevention that many Consortium members currently work with.” (Everywhere Project Manager, email communication to all partners, 6th May 2010)

Another issue with the Everywhere Standards was highlighted at the final dissemination seminar in Madrid concerning the name of the Everywhere Seal. A representative from a Hungarian Everywhere certified business expressed his objection to the use of the term ‘Minimum Seal’. It was argued that the name implies that businesses are only doing the ‘Minimum’ amount of HIV prevention, which he felt was inaccurate for many of the businesses in Budapest. He reported that his business (verified by the Everywhere associated partner in Hungary), was very active in HIV prevention and even offered HIV testing at their venue; however they were not in a financial position to provide free condoms and so were only awarded the Minimum Seal. During the final dissemination workshops, alternative suggestions were made about the name of the Everywhere Seals including using ‘Gold’ and ‘Silver’ or a star rating. This issue and the suggestions will be addressed if the Everywhere II project is funded.

F. This a sustainable model in the sense that NGOs can run it in their own countries. Indeed, many of the associated partners are planning on using the Everywhere framework in future projects. However, there are many questions around quality and uniformity in the absence of a European central coordinating office for Everywhere.

▪ **Monitor Standards and Certification Process during Pilot Action**

B. A couple of partners raised the issue of a lack of resources to monitor and support businesses. For example, an Everywhere certified Italian business only agreed to sign up if they received continuing NGO support past the end of the project. Similarly, THT reported concern that they could not monitor the Seal of Approval in London as they do not currently have a THT outreach team in this location. Therefore, a key concern for the Everywhere II project, if funded, will be to ensure the NGOs have the required resources to continue working with the businesses long-term.

C. Apart from the issues detailed above, all partners were prepared to monitor Standards and the certification process during the Pilot Action.

D. At the end of Pilot Action interviews, Everywhere associated partners emphasised the importance of their working relationships with the 'gay' businesses and all reported that they would try to maintain and develop these relationships in the future even if the Everywhere II project is not funded. Partners reported that they would continue working with the businesses through their own project or even without any funding.

E. As mentioned above, partners have raised concerns about not having the resources or time to monitor and support businesses once they have been approved. As this lack of resources may act as a barrier to partners working with more businesses, this issue will need to be addressed in the Everywhere II if funded.

F. Partners are all keen to maintain and build on their working relationships with approved businesses to make sure that the Everywhere Standards are being maintained, and to support them to increase further their HIV prevention work.

▪ **Develop Database of Businesses Certified with Everywhere Seal**

B. The database of certified businesses was developed by the UoB team and was updated by the project administrator (Fiona Sutton; FS). FS felt that the required resources were in place to develop and maintain the database and the required information was sent to her promptly by Everywhere partners.

C. The UoB team reported that they were prepared to develop and maintain the database of businesses with the Everywhere Seal.

D. The UoB team regularly updated the database throughout the Pilot when completed assessment tools were received from Everywhere partners. The Everywhere website was then updated with the name of the certified business, their address, the seal they were awarded and if available their website address and logo. Final figures were easily extracted from the database soon after the Pilot was completed.

E. Generally the development and maintenance of the database resulted in very few problems. One small issue was that some businesses were concerned about how much information was made public. In consultation with partners, UoB decided that only the name of the certified business, their address, website address (if available) and the level of seal they were awarded would be made public.

Another small problem concerned categorising the type of business in the database. For example, venues such as bars, clubs and saunas were originally categorised as 'gay friendly social spaces'; however, during the Pilot Action it became apparent that some of these businesses also had 'darkrooms' specifically for sexual activity between MSM. Therefore there was confusion over whether these venues should be classified as sex venues especially as some bar/club owners resisted being categorised as a sex venue due to licensing problems. SMs were advised to include as much information as possible about the venue on the assessment form when there was confusion about the categorisation; however this advice was not always followed. Therefore for future projects SMs will need clearer guidelines and more training in defining the type of business they are certifying. For this report the businesses have been categorised into the following: 'sex venue', 'bars/clubs', 'sauna', 'hotel', 'website', 'restaurant' and 'other'.

F. This database will last beyond the project although without continuing to monitor and support the businesses, it is not known whether or not the businesses included within it are maintaining Everywhere Standards. Depending on Everywhere II funding, UoB are committed in the first instance to maintaining this database for 12 months following the end of the Pilot Action. During this time, the coordination team will look to develop a new mechanism that enables Everywhere partners to take over this ongoing function.

- **Disseminate Information about the Project**

B. Each associated partner was allocated 1,000 Euros for project dissemination. Partners reported that they were happy with their level of dissemination and although the Everywhere dissemination budget did not always cover all travel and registration costs for conferences, they were able to source funding elsewhere, such as from their own organisation.

C. Feedback indicates that partners felt prepared to disseminate information about the project. The questionnaire from the January 2010 PSC meeting indicated that before the Pilot Action partners were fairly confident in their ability to disseminate information about the Everywhere Project (mean score 7.8/10).

D. Everywhere partners disseminated information about Everywhere at various conferences and through press releases and radio interviews during the project; however certain countries were more active in their press dissemination than others (See Appendix C for details of project dissemination; see also Sherriff, 2011). The UoB have also submitted two articles for publication which are currently under review. Dissemination was successful in raising the profile of the project and led to increased involvement from key stakeholders within and outside of Europe. This success was demonstrated at the final dissemination seminar which was attended by around 70 people from NGOs, businesses, PHAs and academic institutions across 17 different countries, many of whom had not originally been involved in the project.

E. One issue with disseminating information about the project is the fact that it was hard to disseminate something that only existed and was only going to exist in pilot form. Although press releases at the start of the project were useful in increasing publicity, during the pilot there was little to report until the final outcomes, such as the number of certified businesses, were available. Also, as there was no confirmation that the Everywhere II project would be funded, some partners were reluctant to conduct too much dissemination:

“We have been very conscious of dissemination...as long as we don't know anything about sustainability of Everywhere we will not disseminate very loudly” (Everywhere Associated Partner, September 2010)

“Our plans were very restricted for disseminating information in England in case it wasn't funded past a certain date; we couldn't set up false expectations.” (Everywhere Associated Partner, September 2010).

If the Everywhere II project is funded, dissemination will be a much larger priority and will form a key component for expanding the project across Europe. Specifically, plans have been made to market the project actively to project stakeholders, particularly MSM.

F. N/A

- **Publish and Disseminate the Everywhere Manual**

B. In terms of developing and translating the Everywhere manual, the required resources were available; however there were issues with the timeframe. The majority of the manual could not be produced until the end of the pilot action and during August many partners were away on holiday. Therefore there was not enough time to develop a full draft version to be shown to partners at the final dissemination seminar to gain their feedback. Another issue was that the money originally allocated to print hard copies of the manual had to be reallocated to fund the expenses caused by the change in beneficiary and so only a very small number of hard copies were distributed to partners (270).

C. Nigel Sherriff (NS) felt he had the required skills and experience to develop the Everywhere manual. He reported that by producing the manual at the end of the project he was able to draw on everything that had happened to create an informed and useful document.

D. NS was very pleased with the final design and content of the manual. He felt that the document was very readable and accessible to the target audience – NGOs and PHAs – but would also be useful for any businesses interested in the project.

E. Although NS was satisfied with the final document, the development of the manual was very difficult, because of the uncertain future of the project. During the development of the manual there was no confirmation that the Everywhere II project would be funded and so NS could not include information about sustainability in the document. The French partner (SNEG) were concerned that the manual implied that certified businesses would be monitored for 12 months as SNEG were not in a position to do this without funding for the Everywhere II project:

“Concerning the part “reviewing the seal”, SNEG cannot take the involvement today as a Consortium Partner to monitor on the French territory the Seal without any guarantee of the future of EW [Everywhere], as we are playing the credibility of the Charter of responsibility, we need to be sure to get a minimum of funding for at least the core group. So we disagree with the fact to officialise in the manual a monitoring period of 12 months without any penny. It is like proving the Commission right, as far as SNEG is concerned we are not able to monitor without any supplement coordination means. We would suggest formally to suppress this part.” (Associated French Partner, September 2010).

Another issue reported during the development of the manual was the lack of feedback from project partners. NS distributed the document to partners via e-mail with request for feedback; however only three partners, UK, Spain, and France provided any contribution.

F. The Everywhere Manual is available to download from the Everywhere website and Aids Action Europe Clearing House. The Executive Summary is also available to download in eight languages and so can be used again in the future across Europe.

3.3. BUILDING INTERSECTORAL NETWORK

A. Table 5 indicates whether or not key building intersectoral network activities were implemented as planned as well as detailing when they were completed and where documentation can be found to support their implementation.

Table 5. Details of key activities for building intersectoral networks

Activities	Who responsible for activity	Date completed	Work Package (WP)	Documentation to support
Project Meetings (e.g. PSC meetings)	UoB/ all partners	ongoing until Sept 2010	1	See Everywhere records including minutes of project meetings
Website Management	UoB	September 2012	2	See Everywhere records (D5)
Scoping Report on HIV Prevention in Partner Countries	DGAP	June 2008	4	Final report (D4) on Project, EAHC, and Aids Action Europe websites
Coordination of Consortium	UoB	ongoing until September 2010	1	Minutes of Project meetings, Conferences, List of invitations to meetings
Final Dissemination Seminar	UoB/ all partners	September 2010	1	See Everywhere records including minutes of seminar

The activities will now be explored individually to answer questions B-F.

▪ Project Meetings

B. A summary of the meetings held throughout the project is shown in Appendix F. The initial kick-off meeting in Madrid was organised by the DGAP as they were currently coordinating the project. The purpose of the following three meetings in Madrid, Paris and Brighton were to organise the change in coordination from DGAP to UoB (Sherriff, 2009). These meetings were not originally budgeted for but were financed through the Everywhere contingency fund as they were essential for the continuation of the project. The other three PSC meetings were organised by UoB along with the host country and were successful and within budget.

C. The UoB team were prepared to organise the meetings with help from the host countries and all PSC meetings went ahead successfully and as planned.

D. The questionnaire from the January 2010 PSC meeting indicated high approval for the way in which UoB had organised project meetings (9.6/10 mean response) and for the content of project meetings (the mean response was 9.1/10).

E. The feedback about the project meetings was generally positive; however many partners would have liked more time for face to face contact with Consortium members to discuss the complex project issues. It was also recognised that there was little time for networking opportunities that arise in less formal contexts, for example through socialising:

“We are from different countries and we don’t have so many opportunities to see each other. I think this is the main point. Emails are not enough. You asked me today about the friend who was from the first committee meeting. This is important to meet up face to face and even to go to party in the evening, to socialise, this is always crossing the borders personally and I think it’s one by one or meeting by meeting we could become closer. Emails are not enough.” (Everywhere Associated Partner, September 2009)

“I think it would have been good if everyone had more time – maybe in the kick off meeting to present to share some experiences so we each know what is happening in

each other's countries but when and how?" (Everywhere Associated Partner, September 2009)

Consequently, as there was limited time available in project meetings, decisions (due to funding limitations) had to be made promptly, which restricted time for reflection on some issues. The lack of time to reflect and consult is of particular concern for this project due to the language differences across the Consortium. However, time pressures were inevitable and resulted mainly from the nine month delay at the start of the project and subsequently chance in project coordination. Despite this, lack of time at PSC meetings is an important concern which will be addressed in the Everywhere II project (if funded), by allowing more time at project meetings for discussion.

F. N/A

▪ **Website Management**

B. All the required resources were in place to develop and host a suitable and relevant project website in English (see www.everywhereproject.eu). However, many partners reported that they would have preferred websites in their own languages particularly for MSM and businesses. Following a long period of consultations and scoping, it transpired that translation of website information and the related issue of needing separate sites for each country, were significantly costly options and therefore could not be pursued in the project both for budgetary and time reasons. This issue is discussed further in question E.

C. The UoB team were prepared to manage the website. Nevertheless, as the coordinators are not experts in this field, many unexpected challenges were encountered throughout the project and so IT experts from both within UoB and externally were sought to help with these issues.

D. Throughout the development of the website partners were consulted and asked for their feedback. Any suggestions were considered by coordinators and relevant changes were made before the final construction of the website. An example of partner feedback is shown below:

"Both the pages are very appealing! Well done! They are very clear although there is a lot of information!" (Everywhere Associated Partner, January 2010)

Following the high level of consultation, the completed website design was well received by partners.

E. Although partners reported being pleased with the final design and content of the website, there were various comments throughout the project relating to translation issues. When the website was first set up, and in consultation with partners, it used 'Google translate', a free application which translated all website content into the relevant partner languages. Whilst UoB recognised that not all translations were accurate, because of budget limitations it was felt that it was important to at least offer some translation (albeit poorly) rather than none at all. However, partners soon raised concerns that the application was not functional enough particularly for the businesses and customer sites. The UoB thus explored various alternatives but with the budget constraints, were not able to progress these alternatives and thus proceeded with a Consortium vote on whether to continue using the Google translate or to remove the application and keep all content in English. The majority vote from partners was to remove the application which was executed immediately by the UoB. However, it is likely that the lack of translation on the website has restricted the level of dissemination

across the network and is therefore an issue that be addressed again if Everywhere II is funded.

F. The UoB have committed to keep the Everywhere website live for two years after the project has finished, however after this time point the website will only continue live if funding becomes available or another Consortium partner is able to take over its management. If the Everywhere II project is not commissioned, then the UoB will explore other routes to gain funding and if none are obtainable then the website will be archived so that it is available to view but cannot be updated.

▪ **Coordination of Consortium**

B. The Everywhere Project Manager (Nigel Sherriff; NS) reported a lack of funding available to cover all the staff time required to coordinate the project. NS was only funded to work on the project for two days a week; however the demand for organising meetings, dealing with project issues, and generally coordinating the project development required a great deal more management and researcher time. If the Everywhere II project is commissioned, more funds would be allocated to increase the amount of time available for coordinators' time.

C. The UoB adopts a multidisciplinary approach to research which cuts across all schools & faculties with researchers making significant contributions to social, cultural, economic and environmental wellbeing across a broad range of work. UoB has a number of world-class research centres including the International Health Development Research Centre (IHDR) where the Everywhere Project was coordinated. IHDR is established within the Faculty of Health and Social Science to provide a focus for research, development, and consultancy related to knowledge development and dissemination in salutogenic and socio-ecological aspects of health and well-being. Projects undertaken relate to public health; health promotion; health education; healthy public policy; socio-ecological approaches to health development. The IHDR's work traditionally adopts a European/International dimension and has successfully managed, coordinated, and led other DG SANCO co-funded projects since 1998. Therefore the IHDR team were prepared to coordinate the Consortium and had the staff, experience, skills, and material resources to do the job.

D. There was strong communication between partners and the coordination team throughout the project and if partners were unclear about any aspect of the activities they would contact the coordination team by email or phone. In any of the regular phone conversation with the coordination team, partners were encouraged to raise issues of concern about the activities or subjects for clarification.

The questionnaire data from the January 2010 PSC meeting, suggested very high levels of partner satisfaction (see Appendix E) with UoB's support and guidance on the Everywhere Project issues (9.6/10), clearness of UoB communications around Everywhere Project issues (9.5/10), and flow of information between UoB and partners (9.1/10). The questionnaires also indicated high levels of approval for responsiveness to feedback (9.7/10) and that members of the Consortium recognised and respected cultural differences to a large extent (mean response 9/10).

Focus group data from September 2009 and the Pilot Action interviews also indicated satisfaction with UoB project coordination, for example, "good technical management at UoB" was seen as a strength of the Consortium. Examples of positive feedback from partners include:

"I strongly believe that all three of you are doing a great job regarding the overall coordination of the Everywhere Project. It certainly has flourished since the University

*of Brighton has taken over and I thank you for all your continuous support and help.”
(Everywhere Associated Partner, June 2009)*

*“We were very satisfied with the collaboration with the University of Brighton”
(Everywhere Associated Partner, August 2010)*

“Support was perfect” (Everywhere Associated Partner, August 2010)

It should be said that there has been very little negative feedback about the coordination although partners have had many opportunities to give feedback and this has been actively sought.

E. The feedback relating to the coordination of the Consortium was generally very positive. The only issue was that the time available and method for communication were felt to be less than optimal by some partners. It was reported that more time and resources for face to face contact between Consortium members was needed to help develop a common approach across vastly different linguistic and cultural contexts. Outside of meetings partners generally communicated through e-mail, telephone, and Skype. Whilst these are effective means of communication, partners suggested that this may have not always been the most appropriate system. For example, messages through e-mail can often be confusing and misconstrued especially for people less advanced with their English skills and partners were aware that group e-mails can fill up inboxes, lead to slow replies and a lack of input from some partners. In the final dissemination focus group partners suggested that the project may have benefitted from using other forms of communication, such as the forums on the Everywhere website, and more use of webcams (including Skype). However, it should also be noted that the Everywhere forum was marketed to partners at each PSC and via email but was used very little during the project. Similarly, Skype was offered to partners as one of the preferred methods of communication by the coordinators (particularly for virtual progress meetings), but many preferred instead to use phone or email.

F. The Consortium will continue to be coordinated by the UoB for another three years if the Everywhere II project is funded. One of the main aims of Everywhere II is to increase & strengthen intersectoral collaboration within the Project network at local, national and international levels. Nevertheless, even if the Everywhere II project is not funded UoB foresee that relationships with and between PHAs, Businesses, Civil Society and NGOs facilitated or supported by Everywhere Project will be potentially sustainable. It is also hoped that the relationships within Consortium will be maintained as partners made a formal commitment at the January 2010 PSC meeting to continue with Everywhere Project and support certified businesses for at least one year following the end of the project.

▪ **Scoping Report**

B. The required resources were in place to do the Scoping Report (D4; see Hernandez et al., 2008) and it was completed in July 2008. The scoping report was distributed to all partners via email and available to download from the Everywhere website.

C. All partners had extensive experience and skills in HIV prevention activities and writing reports and so were prepared to conduct the scoping report for the Everywhere project.

D. BT described the report as “crucial” and extremely helpful for the development of the SM training materials as well as the delivery of the training. Although the report was quite dense, BT was able to provide a simpler summary of the report in the training workbook (see Tunstall, 2009).

E. The main problem with the scoping report was that it was completed a year before the business audit. By this time, some of the information was out of date and not as relevant to the current project. With hindsight, it would have been beneficial to combine the scoping report with the audit of businesses and the proposed report on Standards in different countries.

F. Yes, in terms of status as a document that may be used in the future.

▪ **Final Dissemination Seminar**

B. Financial resources in the project budget to organise the final dissemination seminar were inadequate. Although partners had money in their budget for travel and subsistence for themselves and to invite relevant stakeholders, little funding was actually available for the UoB in terms of hosting the seminar, and no funds at all to invite wider stakeholders not directly linked to the project. However, the Ministerio de Sanidad y Política Social (MSPS; one of the collaborating partners) based in Madrid, made available approximately 50,000 Euros to host the seminar. This included flights and subsistence costs of stakeholders not funded by the project, venue hire, an Everywhere celebratory dinner, catering, marketing materials, webcasting resources, and so on. Consequently this funding was essential in helping to make the seminar a success.

C. Following on from point B above, the UoB were not prepared to organise the final dissemination seminar without the contribution of MSPS. Not only did MSPS offer the funding required to host a successful seminar but they also provided much staff time to help organise and prepare for the event.

D. As shown in Appendix F, the final dissemination seminar was attended by people from a variety of relevant organisations including public health administrations, 'gay' businesses, academic institutions, NGOs, and a condom company. All associated partners were represented as well as attendees from nine other countries. Feedback from project coordinators and the seminar questionnaire (see appendix K for a summary) indicated that it was very successful and when asked to grade the seminar out of ten, the average rating by attendees was 8.4. Networking and sharing ideas were reported as the best or most useful part of the seminar and most respondents answered 'very much so' when asked whether their attendance at the seminar had facilitated new partnerships with people within their own sector or in different sectors relevant to their work. Respondents also highlighted the usefulness of the workshops and the 'Everywhere Experience' presentation as it helped them to understand the diverse experiences amongst the different countries.

E. There was very little negative feedback about the seminar. One comment was made about the possible language difficulties for attendees without a strong understanding of English and that translators may be useful for any future meetings. Generally those with weaker English skills attended the seminar with a colleague who had a better understanding of the language so they could relay the information.

Another issue raised by partners was the lack of representation from the European Commission at the seminar. Partners were disappointed that the Commission were not able to attend due to other commitments as they felt their presence was required to understand the full impact of the project, and contribute to discussions about the possible future funding for Everywhere II.

F. N/A

SECTION 4 - EVALUATION OF TARGET GROUPS

The Everywhere Target Groups were:

- NGOs working in HIV Prevention and Sexual Health Promotion
- Businesses directly engaged with MSM (e.g. saunas, 'gay' pubs, clubs and cafes, travel agents, hotels and gay internet dating sites),
- Public Health Administrations (PHAs) ;
- (indirectly)Men who have Sex with Men (MSM)

4.1 Did the Program Reach the Intended Target Groups?

NGOs:

The project aimed to involve many other NGOs as well as those already involved in the project to encourage sharing of ideas and to promote expansion of the project. The main method for reaching this target group was through presentations and networking at national and international conferences, as well as the final dissemination seminar in Madrid where representatives from 15 NGOs (who were not originally involved in the project) attended. Some of these organisations had already agreed to be part of the Everywhere II project and others were interested in finding out more, and potentially implementing Everywhere (e.g. Queer Bulgaria in Sofia).

Businesses:

During the development of the Everywhere Project businesses were represented by one of the associated partners, SNEG, which is a union of 'gay' businesses. Also the business audit was conducted which included interviews with 54 'gay' business owners, managers and/or employees. Some of these businesses were then accredited with the Everywhere Seal of Approval during the Pilot Action. In addition, David Novak, the Senior Public Health Strategist at Online Buddies was present at the January 2010 PSC meeting as well as at the final dissemination seminar in September 2010. Furthermore, the seminar was also attended by representatives from 'gay' businesses in the UK, Hungary and Italy as well as a condom company. Such input from businesses regarding their views, needs, concerns, and thoughts about HIV prevention work provided useful learning for the Consortium and informed the development of the Everywhere Standards. However, the voices of 'gay' businesses in key decision making for the project were absent and David Novak, the Senior Public Health Strategist at Online Buddies expressed his concern that industry leaders were not involved at the start of the project. The coordination team agreed to some extent but felt that earlier involvement may not have been appropriate as all the processes, procedures, Standards etc were not developed far enough at that point to be released publically. In future work, business should be represented more formally on the project steering committees at all stages of the technical work.

PHAs:

Although one PHA was an associated partner (DGAP) and one a collaborating partner (MSPS), further formal involvement of PHAs from other partner countries would have been useful. Indeed, PHAs in Poland, France, and the UK were engaged with during the project and supportive of partners' involvement in the Everywhere Project. Additionally, representatives from PHAs in the UK, France, Hungary, Sweden and Poland attended the final dissemination seminar.

MSM:

The Everywhere Project was not designed to engage with MSM directly. Instead, MSM were reached innovatively through collaborating with 'gay' businesses in each of the partner countries. By working intersectorally the Consortium developed a networking methodology that provides cohesion amongst partners and led to the creation of a trained European network of Social Mediators specialised in identifying, accessing, and achieving the commitment of the businesses sector in the prevention of HIV and STIs; and thus ultimately, also reaching MSMs. Consequently, the evaluation was not designed to monitor the numbers of MSM 'reached' by the project. However, some estimated figures are available to give an indication of potential impact and/or 'reach'. For example, it was estimated that approximately 69,580 (data was not available for 8 certified businesses) customers visited the certified businesses each week and a large majority of these will be MSM. Therefore a high number of MSM will be exposed to the Everywhere leaflets and promotional tools (see tables 6 and 7 for summary of customers visiting businesses) If the Everywhere II project is funded consulting with and promoting the project and Everywhere logo amongst MSM are planned to be a key priority.

SECTION 5 - EVALUATION OF OUTCOMES

5.1 Have the Short Term Outcomes been Reached?

A. Increased numbers of trained Social Mediators

In total 46 SMs were trained throughout the Everywhere Project. The breakdown of SMs trained in each country is shown in Appendix G.

B. Increased number of businesses commit to HIV prevention activities -

At the end of the Everywhere Pilot on the 30th July, 83 businesses were certified (15 to Minimum Seal and 68 to Premium Seal of Approval). This number greatly exceeds the target of signing up 30 businesses. A breakdown of the number and type of businesses certified in each country is shown in tables 6 and 7 and figures 2 and 3.

Table 6. Details of all businesses certified to the Minimum Standards

Organisation	Country	Number of Businesses Certified to Minimum Standards	Type of Business	Approx number of customers per week
SKUC	Slovenia	3	gay friendly bar, student organisation, gay sauna	1250-1850
SKA	Poland	0	-	-
THT	UK	1	Gay friendly hotel	Not available
SNEG	France	0	-	-
ANLAIDS	Italy	2	Sex clubs	200+
DGAP	Spain	3	Gay friendly social space	4,300
HTM	Hungary	3	Cruising bar, sauna	1800-2000
RUBSI	Cyprus	3	Restaurant, event organiser, shopping mall	700 (data not available for 2 businesses) ³
Total		15		8,250 – 9,050 (data not available for 3 businesses)

³ Data missing for other 2 businesses as number of customers at shopping mall too broad and events not organised on a regular basis.

Table 7. Details of all businesses certified to the Premium Standards

Organisation	Country	Number of Businesses Certified to Premium Standards	Type of Businesses	Approx number of customers per week
SKUC	Slovenia	1	Gay friendly cafe	Not available
SKA	Poland	9	disco & bar, VIP-room and chill out area, sauna, bar, darkrooms, cafe, hostel, disco	4,150-4,250
THT	UK	16	Saunas, gay friendly hotel, bar & nightclub, gay and gay friendly social space, sex party organiser, gay dating website.	9,450-10,250 (data not available for 3 businesses)
SNEG	France	27	Bars, sauna, sex clubs, association	35,800
ANLAIDS	Italy	0	-	-
DGAP	Spain	14	Sex venues and Gay friendly social space	11,430 (data not available for 1 business)
HTM	Hungary	1	Sauna	500-800
RUBSI	Cyprus	0	-	-
Total		68		61, 330 - 62,530 (data not available for 5 businesses)

Figure 2. Everywhere Certified Businesses by Country

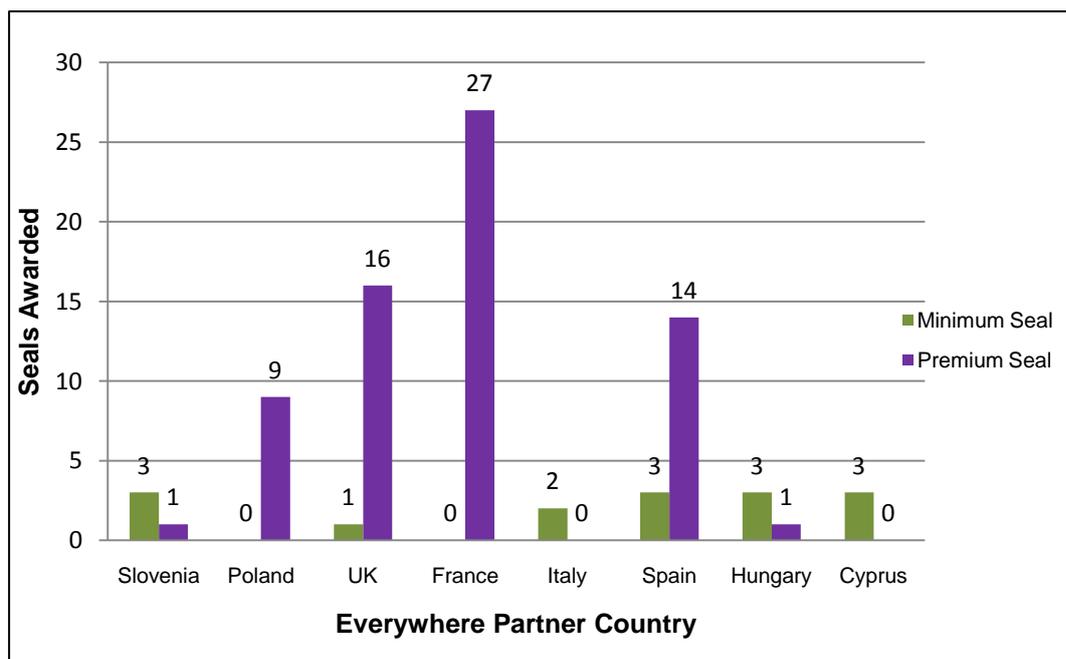
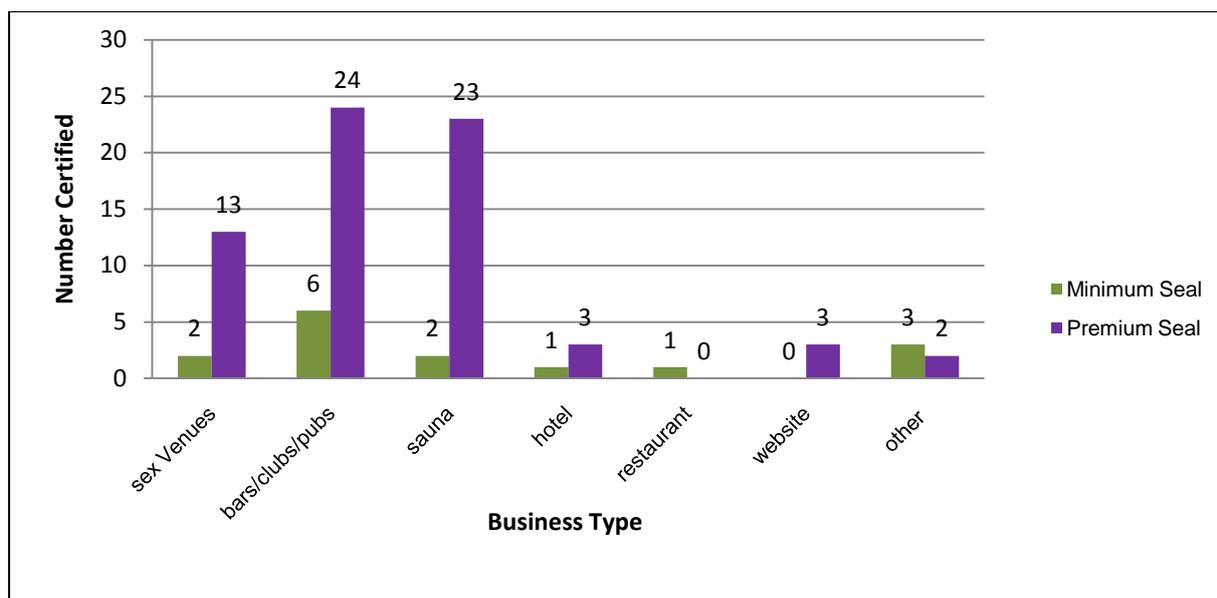


Figure 3. Everywhere Seal's Awarded by Business Type



C. NGOs support businesses in HIV prevention activities -

One of the main successes of this project was that it enhanced existing and developed new working relationships between NGOs and 'gay' businesses in HIV prevention. Most of the NGOs involved with this project as well some new organisations have signed up to support the funding of Everywhere II. Nevertheless, even if the project is not funded it is hoped that Everywhere has provided NGOs with the tools and collaborations to continue supporting businesses in HIV prevention activities.

D. Increased awareness of the project among MSM, businesses and NGOs

As shown in appendix C, there were high levels of dissemination about the Everywhere Project through press releases, conferences, invited presentations, radio interview(s), newspaper articles, and publications. These activities are likely to have reached the target stakeholders albeit in different ways and with varying degrees. For example, many of the conference presentations were aimed primarily at NGOs and academic audiences whereas newspaper articles, press releases and the radio interview were intended to reach MSM and businesses more directly.

Based on data provided by businesses, it is estimated that approximately 69,580 customers attend the Everywhere certified businesses each week including many MSM who would also have been exposed to the Everywhere certificates, stickers, and leaflets displayed at the venues or on the websites.

Specific promotion of the project among MSM and the general population differed across partner countries. For example, the Cypriot partner distributed Everywhere leaflets and condoms at community events and in public toilets as well as presenting at local schools. Conversely other countries were less active in promoting the project outside of 'gay' businesses as they were reluctant to publicise the project widely without confirmation of funding for Everywhere II. Therefore if the Everywhere II project is commissioned a key aim will be to increase awareness of the project and recognition of the Everywhere logo or 'brand' across MSM communities, smaller 'gay' businesses and the broader population.

E. Increased communication between relevant sectors

Focus Groups held with partners at the PSC meeting held in Brighton during September 2009 suggested that motivations for being involved in the Everywhere Project included opportunities for inter and intra sector networking:

“Networking, meeting people from the field, sharing experience, making contacts for other work, getting project experience” (Everywhere Associated Partner, September 2009)

This included being part of a broader European Network of NGOs. Some partners thought Everywhere might help them to communicate and put pressure on their National Public Health Authorities to engage with HIV Prevention as being part of a European initiative had added weight and status. It was also argued that Everywhere might increase the potential for broader dialogue around the rights of LGBT individuals as well as rights to sexual health more broadly:

“If we manage to give visibility to the willingness of a few business owners to be responsible citizens we should push through the EC some official recommendations for LGBT rights – especially sexual health rights to make pressure on national governments.” (Everywhere Associated Partner, September 2009)

The logic here is that if HIV Prevention for MSM becomes legitimated, so too do issues around MSM more broadly e.g. around legalisation of businesses and other rights. One partner wanted Everywhere to enable his organisation to work with new types of businesses, such as straight businesses, and around broader sexual health issues. European Commission-funded, Europe-wide initiatives such as Everywhere, were perceived to be ‘pull factors’ for dialogue with and commitment from both PHAs as well as businesses.

One partner thought that public health initiatives most usefully had an international dimension and that Everywhere could provide a platform for communications between different national PHAs. It was clear from the September 2009 focus groups that partners felt that an intersectoral network of people had already been formed within the Project Consortium and this was a major strength of the project thus far.

Questionnaire data from the PSC meeting held in January 2010 also indicated that partners thought that within the Consortium, partners shared ideas (mean 8.4/10), recognised and respected cultural differences (mean 9.1/10) supported each other’s work (mean 8.9/10) and added value to each other’s work to a large degree (mean 8.9/10) (see Appendix F).

The expectations regarding communication between relevant sectors have been reached to an extent. Working relationships between the partners have been strong and this network was identified as one of the main strengths of the project by partners at the final dissemination focus group. They also hope and intend to continue these relationships in the future and possibly collaborate again on a similar project if Everywhere II is not funded.

As well as building a network within the Consortium, the final dissemination seminar had a large impact on widening relations to more European countries with attendees from various organisations across 17 different countries. The seminar questionnaire indicated that networking and sharing ideas with people from within the field was the most useful part of the seminar. Nevertheless, to continue these working relationships without the funding for Everywhere II will be very challenging.

In terms of the benefits of being part of a European initiative in encouraging PHAs to engage with HIV Prevention, this has also been relatively successful. In Poland, UK and France where they were already doing much HIV prevention work with 'gay' businesses, the project demonstrated the positive progress they had already achieved and has rejuvenated flagging systems to boost HIV prevention work in the future. For countries that were less advanced in their HIV prevention work with 'gay' businesses, the project has instigated an increase in awareness and decrease in stigmatisation of HIV and sexual health promotion and has acted as a starting block for continuing work. Partners have been looking for funding to start their own projects using the Everywhere framework and in Italy they have secured this funding and will be launching their own initiative in September 2010. The Italian partner reported that this initiative would not have been commissioned if they had not of been part of the Everywhere Project.

Nevertheless, there are concerns over the quality and uniformity of using the Everywhere framework without some form of European level mechanism such as a European Office for Everywhere implementation and monitoring. Additionally, although the pilot has had a large impact on the HIV prevention in certain countries, the partners report being concerned that continuing to progress this work without the backing of a European initiative, and most crucially funding will be very challenging.

5.2 Have the Long Term Outcomes been Reached?

A. Increased number of businesses engaged in HIV Prevention Activities

The project has been successful in engaging an increased number of 'gay' businesses in HIV prevention with partners in Cyprus, Poland, Slovenia, UK and Italy all working with new businesses. However, not all partners were able to form new collaborations due to a lack of resources or a limited number of suitable businesses to work with. For example, France only had two SMs and were already working with a high number of businesses so did not have the time or resources to sufficiently support and monitor any new businesses. Additionally, in Hungary there are only a small number of 'gay' businesses and the NGO were already doing HIV prevention work with all of these. Nevertheless, partners all reported that any existing collaborations with 'gay' businesses had been enhanced by the project and had deepened their engagement with HIV prevention.

B. MSM less likely to engage in risky behaviour as safer businesses

As MSM using Everywhere accredited businesses have not been monitored, it is not known whether their sexual behaviour became safer as a consequence of going to an Everywhere accredited business. However, the project is based on the rationale that making condoms, lubricant, and information about HIV/STIs available to MSM at 'gay' tourist businesses will increase the likelihood that MSM will engage in safer behaviour. Once again this outcome will be considered in more detail if Everywhere II is funded. It may be useful to consider working with other research projects that are reaching MSM across Europe such as the European MSM Internet Survey (EMIS).

C. Multi-sector commitment and or partnerships around HIV/sexual health issues

During the project a large multi-sector network was formed in support of HIV prevention work with 'gay' businesses and the continuation of the Everywhere Project. However, without the funding for the Everywhere II project and regular meetings to allow collaboration within this network, the multi-sector commitment may not be maintained long-term. Nevertheless, one example of the multi-sector commitment that was brought about by the Everywhere Project

was between the French partner and their PHA who wrote a letter at the end of the project for the European Commission to advocate the continuation of the Everywhere II project.

D. Reduction in levels of HIV /STI transmission

Following on from point B above, it is difficult to know whether Everywhere will have a long-term impact on reducing the numbers of new HIV/STI infections. Such reductions can often only be seen over a number of years and thus require careful monitoring. Even then, without appropriate research to do this it is difficult to establish any cause and effect. Nevertheless, in Everywhere II, plans have been developed to look at the impact of the current phase of Everywhere as well as longer-term monitoring in partnership with other organisations and EU funded projects.

SECTION 6 – FINAL CONCLUSION

This process evaluation was based on the Everywhere Logic Model and relied on relevant tools adapted from the Program Evaluation Tool Kit (PHAC, 2008). Key questions were asked about project activities as well as exploring the short and long-term outcomes. This has helped to identify the strengths and weaknesses of the project and make recommendations for either the Everywhere II project, if funded, or a similar project in the future. Evaluation data was collected throughout the project from associated partners, SMEs, and 'gay' businesses using a variety of methods including interviews, focus groups and questionnaires as well as general correspondence within Consortium partners.

Overall, Everywhere has successfully overcome challenges to develop a culturally adaptive framework for HIV prevention in Europe. From the start, the project has experienced timeframe issues due to change of beneficiary from DGAP to UoB as a result of political changes in Spain. Although these delays led to tight deadlines and a lack of flow between work packages, the tasks were all successfully completed and the Pilot Action was implemented as planned. The outcomes of the Pilot Action were very positive with the number of certified businesses well exceeding the initial aim of 30. Additionally, the impact of the project on the countries involved, especially those who were less advanced with their HIV prevention activities, has been very encouraging and will hopefully lead to further HIV prevention work with 'gay' businesses in the future.

Nevertheless, as expected, developing and piloting a new culturally adaptive initiative across Europe encountered various challenges. Although some of these issues were envisaged, other problems were unexpected and related to both the project processes and contextual and cultural factors. Due to conducting an internal process evaluation, coordinators were able to overcome many of these problems during the project but there are still important issues that will need addressing in the future, for example relating to sustainability and preventative material development and distribution. This report has helped to identify these issues and make recommendations for either the Everywhere II project or similar future work. Some key recommendations include:

- A need to broaden the implementation, sustainability, and scope of the Everywhere HIV intervention by including additional cities & business types in existing partner countries and additional Member States (MS) and European neighbouring countries (ENC). If the Everywhere II project is funded this expansion is much more likely as the associated and collaborating partners will include eight countries involved in Everywhere I as well as representatives for 11 other European or neighbouring countries.
- Although two 'gay' dating websites were certified during the pilot, due to the fast changing nature of new technologies, future work is likely to be required to develop further the Everywhere Standards for virtual businesses & develop appropriate sustainable monitoring & assessment procedures.
- Data show that the Everywhere Social Mediator (SM) network is valuable and that the Training The Trainer model of working is appropriate for such European interventions. However, it is clear that in order to move forward the network will need to be supported, expanded and scaled up to include representatives from all MS (and if possible, ENCs). This achievement will rely further on the development and delivery of training events and ongoing 'Training The Trainer' delivery to facilitate the spread and implementation of the Everywhere intervention.
- This pilot phase of Everywhere did not market the Seal of Approval actively to project stakeholders (including MSM) for various reasons. However, it is likely that for

Everywhere to have the greatest impact a specific marketing campaign across Europe and ENC's will be needed to launch the implementation of the intervention across Member States. Amongst other things, such a campaign would promote recognition and knowledge of the Seal among MSM and businesses.

- Increased representation from key stakeholder groups (businesses, NGOs, and PHAs) would be valuable in order to provide better opportunities for stakeholder analysis, collaboration and problem-solving around HIV prevention strategies concerning Everywhere in the local, national, and European contexts.
- As this phase of Everywhere was only a pilot, the project did not aim to consult with MSM but instead NGO partners with either personal or professional MSM knowledge were solely relied upon to represent the MSM stakeholders. To facilitate progression of the Everywhere concept, the future work of Everywhere should involve direct collaboration with MSM.
- It is clear that greater funding is required to sustain and expand the Everywhere Consortium. Ensuring the sustainability of Everywhere must be seen as a priority. Part of these activities will need to include a focus on developing capacities to work in a coordinated & sustainable way to make sure that Everywhere can be supported long-term. If the European Commission does not fund the project, partners must explore other routes for funding and to continue the network of organisations that has been formed.

References

Bogen-Johnston, L. (2009). Baseline Audit and Process of Outreach with the Business Sector Report on Behalf of Work Package 6, Brighton.

Friboulet, D., Alexandre, A., McDonnell, L., Sherriff, N.S., and Tunstall, B. (2010). *Everywhere Assessment Tool for Minimum and Premium Seal of Approval*. Final report on behalf of the Everywhere Project Consortium, Brighton; University of Brighton.

Hernandez, T., Rojas, D., Santaolaya, M., Gil, S., Aguirre, R., and Martin-Perez, A. (2008). Operative scoping report on HIV prevention: methodology targeting MSM in eight European countries. Final report on behalf of the Everywhere Project. Madrid: Direccion General de Atencion Primaria (DGAP).

McDonnell, L., & Sherriff, N.S. (2010). The Everywhere Project: HIV Prevention with Men who have sex with men (MSM) in business locations across Europe, Oral presentation at the Vulnerability and HIV in Europe Conference, 13th April 2010, Madrid.

Sherriff, N.S. (2010). *Engaging 'gay' businesses in HIV Prevention focusing on Men who have Sex with Men (MSM): The Everywhere Project*. Invited lecture to the Dalla Lana School of Public Health, University of Toronto, Toronto, Ontario, 1st November 2010.

Sherriff, N.S. (2010). Building Capacity and commitment of the business sector Everywhere: HIV Prevention targeting men who have sex with men (MSM) in 8 European countries. Poster presented at the IUHPE World Conference on Health Promotion, 11th-15th July 2010, Geneva.

Sherriff, N.S., Tunstall, B., and Malkuszewski, T. (2010). *Engaging the business sector across Europe in HIV prevention that targets Men who have sex with men (MSM)*. Poster presented at the XVIII International AIDS Conference, 18-23 July 2010, Vienna, Austria.

Sherriff, N.S. (2009). *A methodological model of HIV prevention in men who have sex with men (MSM). The Everywhere Project*. Interim report to the European Commission: Brighton, University of Brighton.

Sherriff, N.S. (2011). *A methodological model of HIV prevention in men who have sex with men (MSM). The Everywhere Project*. Final report to the European Commission: Brighton, University of Brighton.

Sherriff, N.S., McDonnell, L., Sutton, F., Tunstall, B., Alexandre, A., Friboulet, D., Martín-Pérez, A., Hernández-Fernández, T on behalf of the Everywhere Consortium (2010). *Everywhere: A European Seal of Approval in HIV Prevention for 'gay' and MSM businesses*. Brighton; University of Brighton.

Tunstall, B. (2009). Social Mediator Training Workbook, Final Report on Behalf of Work Package 5, THT, London.

Tunstall, B., McDonnell, L., and Sherriff, N.S. (2010). Building Social Responsibility in Gay Venues. Plenary session presented at the 13th Annual CHAPS Conference, 2nd-3rd March 2010, Sheffield.

APPENDICES

Appendices

- Appendix A. Everywhere Associated and Collaborative Partners
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Appendix A. Everywhere Associated and Collaborative Partners

Associated Partners			
Organisation	Town / City	Country	Type of Organisation
University of Brighton (UoB)	Brighton	UK	Academic Institution
Research Unit in Behaviour & Social Issues (RUBSI)	Nicosia	Cyprus	NGO
Društvo študentski kulturni center (SKUC MANGUS)	Ljubljana	Slovenia	NGO
Spółeczny Komitet ds. AIDS (SKA)	Warsaw	Poland	NGO
Associazione Nazionale Per La Lotta Contro L'aids - Sezione Lombarda (ANLAIDS)	Milan	Italy	NGO
Syndicate National Des Enterprises Gaies (SNEG)	Paris	France	NGO
Società Ricerca e Formazione (SRF)	Turin	Italy	NGO
Terrence Higgins Trust (THT)	London/ Brighton	UK	NGO
Háttér Társaság a Melegekért (HTM)	Budapest	Hungary	NGO
Dirección General de Atención Primaria (DGAP)	Madrid	Spain	PHA

Collaborating Partners			
	Town / City	Country	Type of Organisation
Ministerio de Sanidad. Dirección general de Salud Pública. Plan nacional sobre el sida (Ministry of Health and Social Politics)	Madrid	Spain	PHA
StopSida	Barcelona	Spain	NGO
Federación Española de Lesbianas, Gays y Transexuales	Madrid	Spain	NGO
AIDES	Paris	France	NGO
Colectivo de Lesbianas, Gays, Transexuales y Bisexuales de Madrid (COGAM)	Madrid	Spain	NGO
Fundación Triángulo (FT)	Madrid	Spain	NGO
Universidad Complutense de Madrid	Madrid	Spain	Academic Institution

Appendix B. Everywhere Minimum and Premium Seal of Approval Certificates

Businesses that display this sign have reached the standards required by the European Everywhere **Minimum** Seal as indicated below



The Minimum Standards

Condoms and lubricant provision*

Information about:

- Where to get tested for HIV and other STIs
- Where to get treated for HIV and other STIs

Staff knowledge about the Everywhere Project

* Or information on where to get them for websites

This is to certify that:

This business has reached the Minimum standards indicated above

Signed _____ on behalf of the Everywhere representative in the UK

Signed _____ on behalf of the business

Signed _____ On behalf of the UoB, the Everywhere European co-ordinator





Businesses that display this sign have reached the standards required by the European Everywhere **Premium** Seal as indicated below



The Premium Standards

Free condoms and lubricant

Information about:

- Where to get tested for HIV and other STIs
- Where to get treated for HIV and other STIs
- How to protect yourself and your partners from HIV and other STIs

A safer environment for your sexual health

Welcome of sexual health outreach workers*

Regular staff updates about HIV/STI issues and the Everywhere Project

Commitment to anti-discrimination in relation to HIV positive staff and customers

* Except for travel agents and hotels

This is to certify that:

This business has reached the Premium standards indicated above

Signed _____ on behalf of the Everywhere representative in the UK

Signed _____ on behalf of the business

Signed _____ On behalf of the UoB, the Everywhere European co-ordinator





Appendix C. Details of Dissemination about the Project

Presentations of Everywhere at local, European, & international conferences, events, lectures, workshops, & meetings

1	WHO expert and additional NGO meeting (Ljubljana, Slovenia)	May, 2008	Oral presentation (SKA)
2	Co-operation meeting with Meleg Hatter Helpline and HIV line, as well as NGO including Anonymous AIDS Association, PLUSS, Hungarian Civil Liberties Union (Budapest, Hungary)	May, 2008	Oral presentation & discussion (HTM)
3	Presentation of Everywhere in a local seminar (Madrid, Spain)	June, 2008	Oral presentation (DGAP)
4	HIV/AIDS workshop of the 13 th LGBT festival (Budapest, Hungary)	July, 2008	Oral presentation & discussion (HTM)
5	IUHPE Conference on Health Promotion (Turin, Italy)	September 2008	Oral presentation (DGAP)
6	(SEISIDA) National conference (Madrid, Spain)	October 2008	Two poster presentations (DGAP)
7	Invited presentation to the MSM Prevention Campaign at Deutsche AIDS-Hilfe (Berlin, Germany)	November, 2008	Oral presentation (UoB, SNEG)
8	WAD, national AIDS conference (Ljubljana, Slovenia)	December 2008	Oral presentation (SKUC)
9	5 th European Conference on Clinical & Social Research on AIDS & Drugs (Vilnius, Lithuania)	April 2009	Oral presentation (UoB) Poster presentation (UoB)
10	The Society for Sexual Health Advisers (SSHA) Conference (Brighton, England)	April 2009	Poster discussion (THT)
11	Italian Conference on Aids and Retroviruses (ICAR) (Milan, Italy)	May 2009	Oral presentation (ANLAIDS)
12	Meeting with Parasol (NGO based in Krakow) on HIV prevention and health education (Warsaw, Poland)	June 2009	Oral presentation of Everywhere Pilot Action (SKA)
13	International Aids society: 2009 World Aids Conference (Cape Town, South Africa)	July 2009	Poster presentation (UoB)
14	Brighton Gay Pride (Brighton, England)	August 2009	Oral discussions (UoB)
15	National AIDS Centre meeting with LGBT organisations during the "MSM platform": a forum for MSM NGO's and "gay" business and media owners (Warsaw, Poland)	October 2009	Oral discussions (SKA)
16	XXIII National Congress on AIDS and related Syndromes; 1st International meeting of Alpe Adria on Migration and HIV (Venice, Italy)	November 2009	Oral & poster presentation (ANLAIDS)
17	EUPHA (European Public Health Association) Conference (Lodz, Poland)	November 2009	Poster presentation (UoB & DGAP)
18	Third National Meeting on HIV/STI prevention targeting Men who have Sex with Men (Madrid, Spain)	November 2009	Workshop (DGAP)
19	XXIII Convegno Nazionale ANLAIDS (Milan, Italy)	November 2009	Oral and poster presentation (ANLAIDS)
20	Deutsche Aids Hilfe (Berlin, Germany)	November 2009	Workshop on community approaches including poster (SNEG)
21	WAD, national conference (Ljubljana, Slovenia)	December 2009	Oral presentation (SKUC)
22	XIV International AIDS Conference People Living with HIV in family and society (Warsaw, Poland)	December 2009	Oral presentation (SKA)
23	H-Cube/AIDS Action Europe Seminar (Budapest, Hungary)	January – May 2010	Oral presentation (DGAP)
24	Internapa College Health Programme (Ayia Napa/Protaras, Cyprus)	January – May 2010	Oral presentation (RUBSI)
25	Seishincan Karate School (Paralimni, Cyprus)	January – May 2010	Oral presentation (RUBSI)
26	CHAPS Conference (Sheffield, England)	March 2010	Plenary presentation & discussion (UoB/THT)
27	First Italian workshop on HIV/AIDS emergency: AFRICA and EUROPE, a comparison of the continents situations (Milan, Italy)	March 2010	Oral & poster presentation (ANLAIDS)
28	Vulnerability and HIV in Europe (Madrid, Spain)	April 2010	Oral presentation (UoB)

29	AIDS candlelight memorial (Ljubljana, Slovenia)	May 2010	Oral and poster presentation (SKUC)
30	SEISIDA National conference (Santiago de Compostela, Spain)	June 2010	Poster presentation (DGAP, MSPS, UoB)
31	International Aids society: 2010 World Aids Conference (Vienna, Austria)	July 2010	Poster presentation (UoB, THT, SKA, SKUC)
32	IUHPE World Conference on Health Promotion (Geneva, Switzerland)	July 2010	Poster presentation (UoB)
33	Summer Course AIDS in the XXI Century hosted by Universidad Complutense de Madrid (Madrid, Spain)	July 2010	Oral presentation (DGAP)
34	Final International dissemination seminar (Everywhere) (Madrid, Spain)	September 2010	Oral presentations (All Everywhere partners)
35	Sziget festival, magic mirror tent (Budapest, Hungary)	October 2010	Oral presentation (HTM)
36	Guest lecture to the Dalla Lana School of Public Health, University of Toronto (Toronto, Canada)	November 2010	Oral presentation (UoB)
37	WAD, national AIDS conference (Ljubljana, Slovenia)	December 2010	Oral presentation (SKUC)
38	French Risk-Reduction Meeting (Paris, France)	December 2010	Oral presentation (SNEG)

Everywhere media coverage

Press coverage, articles, newspapers, radio etc			
1	Description	Date	Comment
2	Xaravgi (Cyprus national newspaper)	January 2009	To raise profile of Everywhere in Cyprus (RUBSI)
3	The Argus (Brighton, England)	August 2009	To raise profile of Everywhere presented locally at Brighton Gay Pride (UoB)
4	eChannel, University of Brighton (Brighton, England)	August 2009	To raise profile of Everywhere in the University and to introduce Everywhere Partners to Brighton in the PSC and SM training event. (UoB)
5	Pinkpaper.com (England)	September 2009	To raise profile of Everywhere presented locally at Brighton Gay Pride (UoB)
6	Internet press release on Webmail_musei (Italy)	October 2009	To raise profile of Everywhere in Italy (ANLAIDS)
7	News paper article (Cyprus)	November 2009	To raise profile of Everywhere in Cyprus (RUBSI)
8	Brighton and Hove News (Brighton, England)	December 2009	To coincide with World Aids Day 2009 (UoB)
9	The Argus (Brighton, England)	December 2009	To coincide with World Aids Day 2009 (UoB)
10	University of Brighton website (Brighton, England)	December 2009	To coincide with World Aids Day 2009 (UoB)
11	Xaravgi online (Nationally, Cyprus)	December 2009	To raise profile of Everywhere in Cyprus (RUBSI)
12	Company LGBT magazine: New approaches to HIV prevention: Új utakon a HIV-prevenció	March 2010	To raise profile of Everywhere in Budapest (HTM)
13	City newspaper (Milan, Italy)	March 2010	To raise profile of Everywhere in Milan (ANLAIDS)
14	Medical news today (England)	April 2010	Joint press release to mark the beginning of the Everywhere Pilot Action (THT/UoB)
15	Pinkpaper.com (Nationally, England)	May 2010	Joint press release to mark the beginning of the Everywhere Pilot Action (THT/UoB)
16	Company LGBT magazine: AIDS prevention in all the bars? AIDS-prevenció minden bárpultban?	July 2010	To raise profile of Everywhere in Budapest (HTM)
17	"MR1 Kossuth" (Hungarian Radio: Történetek újrakezdésről)	July 2010	Radio interview with Laszlo Mocsonaki about Everywhere
18	SNEG website	July 2010	Press release to raise profile of Everywhere in Paris (SNEG)
19	Company LGBT magazine: Everywhere-díjat kaptak (Everywhere awards ceremony (Budapest, Hungary)	September 2010	Everywhere approved businesses awarded publically with the Seal of Approval (HTM)

20	Article in GLBT magazine	September 2010	Information about Everywhere (SKUC)
21	Uckfield FM radio interview local radio station (Uckfield, England)	September 2010	Radio interview with Dr Nigel Sherriff (UoB)
22	Brighton and Hove News (Brighton, England)	December 2010	To coincide with World Aids Day 2010
23	The Argus (Brighton, England)	December 2010	To coincide with World Aids Day 2010
24	Times Higher Education Supplement (Nationally, England)	December 2010	To coincide with World Aids Day 2010
25	University of Brighton website (Brighton, England)	December 2010	To coincide with World Aids Day 2010
26	Research article: Engaging 'gay' businesses in HIV prevention: A qualitative study amongst European involving business owners in eight European Countries.	September 2010	Submitted to <i>Sexually Transmitted Infections</i> - under review
27	Webcast of final international dissemination seminar (Everywhere) (Madrid, Spain)	September 2010	Webcast (MSPS)
28	News article in Têtu magazine (Paris, France)	September 2010	The Everywhere Project and Pilot Action with possible continuation in 2011/12 have been cited (SNEG)
29	Joining Together to tackle HIV/AIDS in Europe (EAHC, DG Health and Consumers)	October 2010	Article on Everywhere (UoB)
30	Research article: Everywhere: A European Model of in HIV prevention for 'gay' businesses	January 2011	Completed. In preparation for submission to <i>Aids and Prevention</i> (UoB)

Appendix D. Evaluation of SM Training:

1. Summary of Participants SM Training evaluation forms

Ben Tunstall (Social Mediation Trainer) designed and administered the self-administered questionnaire. Thirteen SMs responded and their answers are summarised below:

	Excellent	Good	Average	Poor	Very Poor
1. How well were the following course topics covered?					
Social mediation and HIV/AIDS	6	6	1		
Social mediation promising practice	5	6	2		
Working with MSM business	3	9	1		
Social mediation case studies	NA	NA	NA		
2. How useful were the group exercises?	5	8			
3. How well were the questions dealt with?	5	8			
4. How relevant was the course for your work?	6	6	1		
5. How would you rate the:					
Timing of course (1 missing response)	1	9	2		
Administration (2 missing responses)	4	6	1		
6. How would you rate the way the trainer worked with the group?	7	6			
7. What would you like to see added to the course programme?					
<ul style="list-style-type: none"> - "All was interesting but maybe we need a day more." - "maybe also how to focus prevention on customers so business owners notice that people is concerned about HIV prevention and they want to get the seal." - "more time to network with the social mediators." - "I'd like to know more about the role of the collaborative partners." - "a focus on STIs and more detailed evaluation of the MSM businesses situation at present in every country would allow to better grasp the different geographical realities." - "I'd like to know more about partners and what they are really doing and how this could help to understand better the obstacles." - "more exercises" - "more practical examples." - "it was okay" 					
8. What would you like to see left out of the course programme?					
<ul style="list-style-type: none"> - "Less introduction of the structure of the programme and more content would be more useful." - "There were some subjects not necessary for me but I understand other organisations may find it useful." - "I would change the partner country summary and maybe leave out homosexuality when legalised etc - more time get to social mediating." 					
9. How much has the course helped to increase your:	A lot	Some	A little	Not at all	
Understanding of social mediation history	4	6	3		
Understanding of HIV/AIDS, symptoms and prevention	3	6			4
Understanding of SM techniques	5	7			1
Awareness of the obstacles to SM	1	11			1
Strategies for overcoming obstacles	1	12			
Partner country profiles	7	5			
Knowledge of Everywhere HIV Prevention methodology	7	3	2		1
Other comments					
<ul style="list-style-type: none"> - "I have learnt a lot and I had a very good time. I hope we keep working together" - "I think it would be quite important to deepen the SM's skills." - "All the organisation and materials prior coming to Brighton were excellent." - "Thank you." - "Would have been good to have a contact sheet with everyone's email addresses." - "Meetings that were not part of the course like dinners and evening meetings were very useful and productive. Thank you." - "The training was very useful thanks." 					

2. Feedback from STOPSIDA in Madrid received (19/10/09)

“[The training] has helped me get a broader picture of existing projects in Europe, with an opportunity to share experiences with other organizations. The knowledge I have learned will be shared with my Stop Sida mates. Being on a network of organizations at European level can enrich the methodology we are using so far. STOP SIDA has a structure of SMs and a network of companies that actively collaborate with the organization. Being involved in this project would be a boost to activities that are already underway, from a European projection.

We can contribute to the Everywhere Project with actions and experiences that Stop Sida has made in recent years:

- Group of outreach street educators: training of volunteers from the focus of peer education and risk reduction (information on HIV / AIDS and other STIs, communication skills) creating ‘gay’ business network supporting information campaigns on Sexual Health, coordinating volunteer group.
- Network of ‘gay’ businesses (AGRADO) to collaborate on various campaigns that are made from Stop Sida (distribution of prevention, condom placement of tubes)
- Network of gay Internet companies: operations in chat rooms, Messenger, emails, profiles on gay sites, sections on Sexual Health, promoting collaboration in prevention campaigns for HIV / AIDS and other STIs
- SM responsible for relationships with companies, specific training, reference person, liaison with the various projects of the organization,
- We agree with Jose from CESIDA: we do not understand why some organizations that joined at the start of the project, now they are not in. We should work this issue. It seems important to create a promotional campaign on the value of shares Everywhere Project (the added value that has the stamp on the ‘gay’ venues). We found primary basic methodology is consensus among all members of the project, and flexible to adapt to the reality of each country and city.
- The communication between the organizations can help implement the methodologies agreed: Project Everywhere portal is a good start, but would rather add more features such as:
 - Wiki (a Wikipedia; easy to install if we own the server): to create the protocol of treatment with local products.
 - Mailing lists: To communicate with all organizations.
 - Virtual directory of resources: for hanging documents, photographs, campaigns ...
- This space could also serve to inform and evaluate the methodologies in the different cities and countries (development of indicators):
 - Number and type of premises
 - Level of satisfaction of local
 - Level of compliance with stamp
 - Difficulties that we have been finding and proposed solutions.
- This way we could use the experience of the adaptation process methodology in various organizations.”

3. Feedback from CESIDA (29/09/09)

“Dear colleagues,

Firstly, I want to say it was a great opportunity for me to attend the 17-18 training meeting in Brighton. The contact with everybody provided a better understanding of the project for me.

In my opinion, Everywhere is a very interesting project and I think it is possible to be implemented in Spain with several organisations support. My organisation is a federation of associations. Some of them are working on prevention targeting MSM and businesses. I think the good practice model on MSM prevention you are developing could be useful for these organizations targeting MSM in HIV prevention work. Consequently it can be useful for the businesses and their clients.

CESIDA could help creating a network of social mediators in Spain, as well as disseminating the project to NGOs so they can get involved. We could also organise discussion forums to adapt the project culturally, using a communication strategy through press notes, internet and social networks. We are also open to suggestions. I can't understand why the Spanish organisations who were involved in the first place are not in the project anymore. I think something needs to be done here. I think I'll ask them.

Also, I think it is important to introduce a difference of importance into risk behaviour psychosocial factors. I understand that mental health includes a wide span of elements and it is not the same to talk about schizophrenia with physical causes, than talking about depression which is usually caused by personal "facing/managing strategies". Recently, WHO has published the report SOCIAL DETERMINANTS OF HEALTH, which is in my opinion very interesting. The book lists 10 determinants. Some of them are in the training book (HIV/AIDS overview -psychosocial factors for sexual risk behaviour). But I think it is necessary to add stress into these Everywhere considerations for the social mediators training and work. Also, WHO includes employment/unemployment which in my opinion are also very important. Besides, I think the training should incorporate communication and social skills and techniques; counselling win-win approach, active listening, etc.

Finally, I think it would be interesting to organise a forum to discuss further some of the aspects that were discussed with different opinions at the meeting, such as risk reductions approaches and strategies.”

Appendix E. Questionnaire at January 2010 PSC Meeting

A total of 8 partners filled out the questionnaire below at the second PSC meeting in January 2010. We asked participants to score their responses on a scale of 1-10 with 1= most negative and 10=most positive. We have reported the mean score for each question.

1. Project Coordination

How well does the UoB consult with partners around key decisions?	9.6
How well does the UoB give support/guidance on Everywhere issues?	9.6
How clear are UoB communications around Everywhere issues?	9.5
How responsive is the UoB to feedback?	9.7
How well have UoB organised project meetings?	9.6
How satisfied have you been with the content of project meetings?	9.2
How satisfied have you been with the flow of information between UoB and partners?	9.1

2. Project Dissemination

How well do you think the current Everywhere website disseminates information about the project?	7.6
How well do you think you are disseminating information about the EP?	7.6
Comments: <i>"Waiting for first seal of Everywhere to be awarded and intensify dissemination."</i> <i>"Key translation issue for national dissemination."</i>	

3. Pilot Action:

After discussion of the Pilot Action at PSC, how clear are you about what you need to do?	8.3
How confident are you that you will be able to sign up businesses to the Protocols during the Pilot Action?	8

4. Protocols:

How well do you think the Protocols meet the needs of businesses in your country?	8
How satisfied are you with the consultation processes around the development of the Protocols?	7.6
Comments:	

"Not happy with the solution for anti-discrimination messages. I recognise this is very cultural and local though"

"A lot of critical issues were raised by partners during PSC but no additional feedback during the consultation period."

5. Consortium:

How well you think the members of the Everywhere Consortium -	
share ideas?	8.4
recognise and respect cultural differences?	9.1
support each other's work?	8.9
add value to each other's work?	8.9
Comments :	
<i>"A big work load is to blame that we don't have enough time for these activities."</i>	

6. Social Mediator Network

How well you think the members of the Social Mediator's Network -	
share ideas?	8.1
recognise and respect cultural differences?	8.4
support each other's work?	7.9
add value to each other's work?	8.4
Comments;	
<i>"Maybe there was no need for this so far."</i>	
<i>"Were no point of social mediator network, but those accessing Everywhere website are not very happy with the activity happening there, which seems to be very little."</i>	

7. Engagement of Business Sector:

How well do you think you (and/ or your Social Mediator) are engaging with the business sector in your country?	8.3
How well has the Everywhere as a whole engaged the Business Sector?	7.8

Appendix F. Details of Project Meetings

Type of Meeting	Meeting Location	Date of Meeting	Attendance
PSC	Madrid	September 2010	<p>UoB (Nigel Sherriff, Elizabeth Pottinger, Fiona Sutton), THT (Ben Tunstall, Lewes Husband, Ross Boseley), SNEG (Antonio Alexandre, David Friboulet, Gérard Siad), DGAP (Monica Moran Arribas, Alfonzo Lara), Aids Action Europe (Ferenc Bagyinszky) HTM (Andras Bodo, László Mocsonaki) ARCIGAY (Stefano Bucaioni) Centre for Communicable Diseases and AIDS (Saulius Caplinskas) HIV & Sexual Health Contracts Manager (Robbie Currie) Queer Bulgaria (Dim Dukov), AIDS Cologne (Franz-Josef Ehrle), Ceescat (Cinta Folch), Associazione ISES (Dolores Forgionne), Grupo Português de Ativistas sobre Tratamentos VIH/SIDA (GAT) (Ricardo Fuertes), National AIDS Centre (Katarzyna Gajewska), Maurice Association (Pier Luigi Gallucci), Swedish Institute for Infection Disease Control (Stefan Hallin), MSPS (Tomas Hernandez, Alberto Martín-Pérez, Raul Soriano), Gaydar (Jason Rosenbaum), Magnum (Janos Kerekes), Chariots Limehouse (Richard Kinchin), Thetiki Foni (Positive Voice) (Marianella Kloka), SKUC (Andrej Kohout, Miran Solinc), Fundacion Triangulo (Guillermo Lopez), SKA (Tomek Malkuszewski, Izabela Pazdan), COGAILES (Gabriel Martín), Online Buddies (David Novak), Queen Margarets University (Oonagh O'Brien), RUBSI (Constantinos Phellas), Hispano Sida (Ferran Pujol), SRF (Tania Re), Centre for Sexual Health Promotion (Joshua Rosenberger), FELGBT (Rubén Sancho), Deutsche AIDS-Hilfe (Dirk Sander), Sensoa (Mark Sargant), EMIS (Axel Schmidt), Vice director of National Institute for Health Development (Rita Simich), Safesex Bulgaria (Radosveta Stamenkova), Médecin Inspecteur de Santé Publique (Thierry Troussier), Laboratory of Immunology (Eszter Ujhelyi), Condomerie (Theodoor van Boven), STOPSIDA (Luis Villegas, Francisco Rodrijuez), Confederation Colegas (Johnathon Rizo)</p>
PSC	Cyprus	January 2010	<p>UoB (Nigel Sherriff, Liz McDonnell, Fiona Sutton), SKUC MANGUS (Miran Solinc), SNEG (David Friboulet), RUBSI (Constantinos Phellas), SKA (Izabela Pazdan, Tomak Malkuszewski), DGAP (Alberto Martín-Pérez), MSPS (Raul Soriano), THT (Ben Tunstall), HTM (László Mocsonaki), ANLAIDS (Carmine Falanga), Online Buddies (David Novak), EATG (Nikos Dedes).</p>
PSC	Brighton	September 2009	<p>UoB (Nigel Sherriff, Liz McDonnell, Gynnis Flood, Fiona Sutton), SKUC MANGUS (Miran Solinc),</p>

			SNEG (Antonio Alexandre, David Friboulet, Matthieu Follea), RUBSI (Constantinos Phellas, Damien Touche), SKA (Izabela Pazdan, Tomak Malkuszewski), DGAP (Alberto Martín-Pérez, Tomas Hernandez), THT (Ben Tunstall), HTM (László Mocsonaki, Istvan Cseke), ANLAIDS (Carmine Falanga), SRF (Tania Re), European Commission (Cinthia Menel-Lemos), STOP SIDA (Oscar Miras Ortiz),
Change of Coordination	Paris	June 2009	UoB (Nigel Sherriff, Liz McDonnell), SNEG (Antonio Alexandre, David Friboulet), THT (Ben Tunstall), DGAP (Alberto Martín-Pérez)
Change of Coordination	Brighton	May 2009	UoB (Nigel Sherriff, Liz McDonnell, John Kenneth Davies, Glynis Flood, Jonathon Roberts, Sarah Joslin, David Thom), THT (Ben Tunstall), DGAP (Tomas Hernandez)
Change of Coordination	Madrid	January 2009	UoB (Nigel Sherriff) DGAP (Tomas Hernandez)
Kick-off	Madrid	June 2008	ANLAIDS (Carmine Falanga), SKA (Michal Minalto), DGAP (Alberto Martín-Pérez, Ramón Aguirre Martín-Gil, Maria Santaolalla) RUBSI (Constantinos Phellas) SNEG (Antonio Alexandre), THT (Rod Watson), SKUC MANGUS (Miran Solinc), HTM (László Mocsonaki), UoB (Nigel Sherriff), SRF (Tania Re), Fundacion Triangulo (Javier Ultra), COGAM (Daniela Rojas), S.R.F. Torino (Ibrahim Osmani, Gian Luca Boggia), The Institute for Prevention and Social Research (Adam Philippe), StopSida (Kati Zaragoza), Y Bisexuales- FELGT (Toni Proveda), SKA (Michal Minalto, Aleksandra Skonieczna), MSC (Cristina Menoyo),

Appendix G. Details of Trained SMS

Country	Number	Name	Organisation
Italy	3	Silvia Negri Giovanna Branca Carmine Falanga	ANLAIDS Associazione ISES ANLAIDS
France	12	Matthieu Folléa Roberto Labuthie David Friboulet Antonio Alexandre Matthieu Panel Sylvain Guillet Eric Maniscalco Richard De Waever Jérôme Derrien Sébastien Cambau Cédric Péjou Julien Escolano	SNEG SNEG SNEG SNEG SNEG SNEG SNEG SNEG SNEG SNEG SNEG SNEG
Cyprus	4	Costas Constantinou Christiana Dipli Christina Loizou Constantinos Phellas	RUBS I RUBSI RUBSI RUBSI
Poland	5	Agnieszka Górska Anna Maciejewska Cezary Fidor Izabela Pazdan Tomasz Malkuszewski	LAMBDA Warsaw Social AIDS Committee "SKA Street" Project Social AIDS Committee "SKA Street" Project SKA SKA
Hungary	9	Attila Balázs János Breznyik István Jakab Márta Kis Sándor Oповszki Bertalan Sándor Richard Sziraki László Szegedi László Mocsonaki	HIV Hotline HIV Hotline and Int. Soc.Network II., CAIR; Milwaukee Company Magazine and University of Applied Sciences Kodolányi, Int. Soc.Network II., CAIR; Milwaukee www.pride.hu HIV Hotline ISN2 and a gay bar Netreach worker HIV Hotline HTM
Slovenia	4	Miran Šolinc Andrej Kohout Vlado Popovič Andrej Peranič	SKUC Magnus volunteer volunteer volunteer
United Kingdom	3	Ross Bosely Lewis Husband Jordan Callori	THT UoB student THT
Spain	6	Guillermo López Moisés Torrés Henry Escobar Gabriel Estuder Javier Ortega Alfredo Peinado	Fundación Triángulo Volunteer Volunteer Volunteer Volunteer Volunteer
TOTALS	46		

Appendix H. Pilot Action Interviews Report

Interviews Conducted by Liz McDonnell during Pilot Action in April/May 2010:

Practical Issues

- The Slovenian Partner would like clear rather than cloudy backing on the stickers so it's easy to see whether the stickers are for Premium or Minimum Seals
- The Hungarian partner would like leaflets in English as many of the customers using Hungarian businesses are not Hungarian and are more likely to speak English. He also said that the promotional condoms and lubricant are getting taken quickly by customers would be used in only a few weeks.
- Both the UK and Slovenian partners mentioned that the checklist and certificate repeat themselves and the UK partner added that parts of the assessment tool that need to be sent back to UoB require too much cutting and pasting.
- The Slovenian Partner likes the assessment tool as it is clear and straightforward.
- A few things have come up like The French and Polish partners wanted to know if they could go beyond their city's walls with Everywhere that suggests that partners are not necessarily clear about the tasks and parameters.

Substantive Issues

The key role of NGO support for businesses

- A business in Italy has insisted on continuing NGO support past the end of the project if they are to sign up to Everywhere and this has been agreed.
- UK hotels happy to work towards the Premium Seal with support from NGOs and all businesses approached positive as long as there is support around condoms and training issues.
- It is not easy to sell the Everywhere product when SMs can't necessarily offer either monitoring or long term support e.g. in London.

Unprotected Anal Intercourse/bare-backing

This issue has been floating around the project in various ways since its inception. The story until recently has been - SNEG are very pro condoms and want this to be the bottom line and they have concerns that some partners and UoB are not committed to this position. There is general agreement and support for risk reduction approaches among most partners - including SNEG but they are keen to set the lowest common denominator for an Everywhere seal as having condoms available. Most partners are happy with this; however it has always been said that countries need to apply the Standards in a way that fits their culture and they have been encouraged to exercise judgement about which businesses to include and exclude - it has been a slightly grey area about just how much deviation would be tolerated.

The interviews raised the issue of bare-backing and what the project's stance was on this issue. Discussions via e-mail followed the interviews and a project statement was made by the Coordination team.

Strategic engagement and use of Everywhere

There has been a lot of focus in the project on 'cultural adaptability' in terms of the Everywhere Standards themselves. In fact, there hasn't been much controversy over the

Standards themselves (bar bare-backing). The interviews highlighted how Everywhere gets deployed in different contexts to achieve culturally relevant aims - e.g. in Cyprus it the hook on which people can legitimate and stigmatise conversations about HIV and distributing condoms and lubricant. And in France it is much quieter, in order to protect the existing HIV prevention order - the Chartre although they have grand hopes for it as a hook on which to hang broader sexual health promotion with new types of businesses and even LGBT rights. In the UK, it usefully rejuvenates a flagging system (Playzone) that is suffering from lack of funding.

Grassroots SMs

In both the UK and Hungary volunteer SMs are doing some of the signing up of businesses. As MSM themselves, they implicitly and explicitly represent the customer's voice, sanctioning the Project for businesses.

Businesses doing it their own way

Businesses have their own way of working and running with Everywhere. Two things stand out - businesses linking SMs to new businesses in some countries e.g. Italy. In France this would be normal as SNEG is an association of businesses but in other places it is a way of getting on. Also, in Cyprus one business capitalised on being a socially responsible business and used this to gain more customers - there is this possibility in Everywhere.

Interviews conducted by Elizabeth Pottinger at the end of Pilot Action in August 2010:

How the Pilot went in their Country:

All partners reported that the pilot had gone well in their country:

- Cyprus- "taking into consideration the cultural barriers, the project went excellently"
- Italy- "Very satisfied with the collaboration"
- UK- "The pilot has gone really well"
- Poland- "the pilot went very well"
- France "it has gone quite well"
- Hungary- "felt the project went well"
- Spain- "The Pilot Action was pretty good"
- Slovenia- "The pilot went very smoothly"

Working with new businesses:

Some of the partners were able to work with new businesses but some did not. Reasons for not working with any new businesses included a lack of resources and not any more businesses to work with. For example, in France they only had two SMs working on the project due to restrictions in funding and as they were already working with a large number of 'gay' businesses they did not want to work with any new businesses as they would not be able to provide the support and monitor the businesses adequately. Our UK partner reported that in Brighton where they had two SMs they were able to work with new businesses but in London where they only had one SM they only worked with sex venues that had previously been involved in their own project. Whereas in Hungary there is only a small number of 'gay' businesses which the organisation was already working with and so there were no new businesses to approach. Nevertheless, partners in Cyprus, Poland, Slovenia, UK and Italy were able to work with businesses that they had previously not been in communication with.

Monitoring/Supporting businesses

There was a mixed response when asked how or if they would continue to support and monitor the businesses they had certified if the Everywhere II project was not funded. Some partners including Poland, France, Italy and the UK were confident that they would be able to continue working with these businesses for the foreseeable future either without funding or through their own projects such as the Chartre, Playzone or the new HIV project in Italy. However, some countries were concerned that they would not have the resources to continue to monitor the businesses if the Everywhere II project was not funded so they were currently looking for alternative funding as they did not want to lose the relationships they had built. Our Hungarian partner reported that their SMs were happy to continue working with the businesses for no money but only thought this would be worthwhile if they had a supply of condoms to give to the businesses and our Slovenia partner said they would continue working with the businesses with limited resources but would not be able to sign up any new businesses.

Everywhere Minimum and Premium Standards

Everyone was positive about the Everywhere Standards and felt they had worked well in their countries. For example:

“We believe that Everywhere Minimum and Premium Standards are based on appropriate and feasible indicators. We are pleased and congratulate your intention to include between indicators the commitment to nondiscrimination against people with HIV.”

There was however variation in how the Standards had been used with some countries only using the Premium Standards, some only being able to use the Minimum Standards (generally because of the cultural barriers) and some countries used the Standards depending on the type of businesses. For example in the UK they certified all sex venues to Premium standards but hotels to Minimum Standards as they felt this was more appropriate. Some of the Standards acted as barriers to businesses getting involved in the project. For example in Hungary businesses were reluctant to sign up to the Premium Standards as they felt they could not finance the supply of condoms and lubricant, in Cyprus, businesses could not be certified as they refused to display the certificates and stickers in fear that it would deter potential customers. In Slovenia their high staff turnaround meant that they were not able to train all staff and so could only meet the Minimum Standards.

Assessment tool:

Most partners were positive about the assessment tool; however Spain was not very happy with it. They said:

“We believe that sort of poorly. In fact to determinate and supervise most of the indicators, we used our own Foundation Tools (posters, collaboration in key events). We believe that for future supervision and maintenance of the indicators will also be needed the co-existence of other preventions projects from Fundación Triángulo, to reach the goals.”

Everywhere Leaflets and Promotional Tools

Most partners were happy with the promotional tools and leaflets but wished there were more of them. However, there were some negative comments including that they did not stand out enough or were too large.

Problems encountered:

- Cyprus:
 - Businesses were reluctant to sign up to the project as they refused to display the Everywhere certificate and stickers in fear that it would scare away their customers
 - Businesses thought that the sticker saying 'gay' people welcome was discriminatory as you wouldn't say "straight customers welcome".
 - They were using the condoms to raise awareness by offering them at events or putting them in public toilets but people were taking large amounts so they decided to attach a leaflet to each condom so that they would only take one.
- Italy:
 - Some businesses were reluctant to get involved in the project as they knew that it was coming to an end in September. Italy is now launching its own project so they hope that these businesses will be happier to get involved.
 - They initially did not have the budget to produce more promotional tools once they ran out but they used money from their own budget which was raised through a fete in June 2009.
- UK:
 - The main problem in the UK was the lack of outreach workers in London which meant that they were limited to only working with businesses they had worked with before.
 - They also had issues with businesses who were interested in the project but would not commit to signing up to it.
- Poland
 - No reported problems
- France:
 - They were limited in the number of businesses they could work with as they only had enough funding for two SMS.
 - They found it hard arranging meetings with managers to get their signature to be certified. This delayed the certification of some businesses.
- Hungary:
 - There were concerns by the businesses about the amount of time staff would commit to the training. Although Hatter were flexible regarding the time of the training, business owners argued that staff cannot be made to go to training outside of work hours and they did not want them to attend training when they should be working.
 - Many businesses could not be awarded the Premium Standards because although they were interested in the project and wanted to be socially responsible they were not in a financial position to supply free condoms.
 - There was also an issue with supplying free lubricant as this is very expensive in Hungary and neither customers nor businesses were prepared to pay for it and Hatter did not have the funds to supply it.
 - They were quickly running out of Everywhere condoms so could only hand them out when a social mediator was present.
 - They were looking into different routes to fund a supply of condoms, i.e. through the Government although as it is a new Government they are unsure

how much money will be put into HIV prevention. Also they are looking into buying a large amount of condoms at a reduced price but as all the NGOs receive funding at different time points this is difficult to coordinate.

- Spain:
 - They also ran out of Everywhere condoms and so had to supply them using their own funds but this was limited.
 - The businesses were not interested in the leaflets and wanted more advertising and publicity after becoming certified.
- Slovenia:
 - The businesses were initially reluctant to get involved but the SMs convinced them of the benefits and promised them a supply of free condoms and lubricant which acted as strong incentive to get involved.
 - There are very few 'gay' businesses in Slovenia and so there were not many to work with. They hope in the future to encourage more openly 'gay' businesses and to work with other countries including Austria.

Successes:

- Cyprus:
 - They have increased awareness of the project and of HIV prevention in a country where it is rarely addressed. This has been through handing out leaflets and condoms at events as well as doing presentations at schools.
 - They have continued to work with businesses who refused to display the Everywhere stickers and these businesses have kept leaflets at reception and through word of mouth they have been asked by customers for information
 - They managed to make contact with a local 'gay' business through a mutual friend and have since developed strong working relationships with a number of businesses they had not worked with before. They foresee that these relationships will continue even if the Everywhere II project is not commissioned.
- Italy:
 - The everywhere Project has allowed their organisation to make contact with businesses that they have not previously worked with.
 - They now have a project starting in September which is following the framework of the Everywhere model and they hope to continue the work they have been doing with businesses as well as working with even more businesses now that there is more longevity. They believe that this is the strongest reflection of how beneficial the Everywhere pilot has been
- UK:
 - The main success was that the model was simple was adaptable across Europe. Ben felt that the simplicity of the Standards and assessment tools was better than their own UK project which was very thorough and complicated and this simplicity will help it to be sustainable in the future.
- Poland:
 - The pilot confirmed the success in the work they have previously done with businesses as they were already reaching the Standards.
- France:

- The pilot has helped to confirm the effectiveness of their own project, the Chartre.
- They have also received much support from the Health ministry.
- Hungary:
 - The biggest success was the social mediators and the progress that they have made. At first they were met by sceptics both from business owners and the customers as they were saying that they went to the venues for entertainment and so don't want to be reminded of bad issues. However, the SMs have now been accepted by the businesses and their clients and they fit in very well with the daily operation of the bars.
 - They also succeeded in reaching MSM and educating them face to face at the bars and social areas of the venues about HIV prevention rather than just giving them leaflets. The SMs were trained to hold these discussions and they felt they went very well.
 - The 'gay' businesses and their clients are much more interested in HIV prevention as they are now involved in it and they see it as their responsibility to help
- Spain
 - They managed to get a large number of businesses certified
 - They trained between 8 and 10 SMs.
- Slovenia
 - They were happy that they got four businesses certified and hope to get double that amount in the future.
 - They had a very positive reaction from business managers/owners who were happy that the project was happening and that there were specific Standards for the businesses to meet.

Support for coordination team

All of the partners were very positive of the support they received from the coordination team. They reported that any issues were dealt with quickly and effectively:

“we were very satisfied with the collaboration with the University of Brighton”

“support was perfect”

“Yes absolutely, always very helpful”

Dissemination

All partners were happy with the dissemination that they achieved. The everywhere budget covered some of the partners, however some had to be funded by their organisations to attend conferences etc.

Appendix I. Questionnaire at final Dissemination Seminar

At the end of the Final Dissemination Seminar in September 2010 attendees were asked to complete a short questionnaire about the seminar and the Everywhere Project. Thirty Seven questionnaires were completed:

What country do you come from:	
Spain	5
Poland	1
France	3
UK	7
Sweeden	1
Belgium	1
Portugal	1
Italy	2
US	2
Hungary	4
Lithuania	1
Holland	1
Slovenia	2
Bulgaria	2
Germany	2
Greece	1

Job titles:	
Manager of StopSida	Business owner, manager
HIV prevention programme coordinator	Director
Outreach worker/sexual health advisor	Project manager
SNEG prevention director	Counsellor
SNEG project manager	Sexual health & HIV contracts manager
Programme manager	Lecturer
Exeutive Director	Founding director condomerie
Senior Programme manager	Volunteer
Marketing manager	Coordinator
Programme director MSM	Project manager
Social Mediator	Chairman of the board
Counsellor and project coordinator	Managing director, Executive director
Health promotion co-ordinator, Social mediator	Epidemiologist
Executive board member	Chariots- Operations Manager
Technical STOPSIDA	Head of HIV/ Aids
Senior health strategist	Aids coordinator
Research Associate	Director

What organisation/sector do you come from?	
Public Health Authority	8
'gay' business	5
Charity/voluntary	3
Academic Institution	5
NGO	18
Other	2
Other, please specify:	
<ul style="list-style-type: none"> • Condom speciality shop and wholesale • Network of NGOs 	

	1 Not Confident	2	3	4	5 Very Confident
How confident do you feel that Everywhere could be implemented in your own country as a result of this workshop?	1		11	16	8
How confident do you feel about using the Everywhere model as part of your organisation's HIV prevention work or strategy?		3	7	16	10

What problems (if any) do you think there may be in implementing Everywhere in your own country?

"Gay business owners may not be interested in this project and be reluctant to participate if there are not more material and non-material benefits of free condoms and lubricant, business promotion or social prestige"

"sustainability for 2011"

"Need Everywhere II"

"none if the label is coordinated and assessed on the same basis in each country with the help of a core group"

"Funding cuts"

"lack of adequate funding"

"convincing owners of their gain"

"finding out how to combine Everywhere into the existing outreach work with gay businesses"

"funding and private/public sector provisions"

"Burocratic limitations (if there is no Everywhere II) and other limitations like deciding strategies, etc"

"Monitoring the correct application of the standards and keep the constant in time"

"Internet requirements are underdeveloped and do not apply to US national internet guidelines and other countries with guidelines"

"money"

"finances, public attitude to sexual life and MSM"

"lack of funds"

"sustainability funding"

"not really involved in prevention work- but could promote it to relevant organisations"

"Concerning content: none. Concerning participating parties: takes time"

"lack of gay businesses"

"financial, recognising the status of social mediation"

"Sex venues in Italy are illegal so business owners do not want to show a label advertising that in their venues people can have sex- they do not want to be controlled and deter the clients"

"I don't think there can be any problems"

"The 'mentality' issue and the 'traditional' attitudes of Bulgarian society- taboos, homophobia, 'not-in-my-backyard' approach"

"workshop group"

"Lack of motivation of business sector. Lack of efficacy monitoring"

"Practical/social climate in central Europe. Stigma, funding"

What was the best or most useful part of this Everywhere dissemination seminar?

- "Best- partnership working"*
- "sharing opinions and visions about HIV prevention among other organisations from different countries"*
- "discussion about the project, strengths, weaknesses and its future"*
- "brain storming during focus groups and discussion in workshop"*
- "Presentation five- action pilot"*
- "feasibility on Pilot Action"*
- "The discussions and workshops"*
- "workshop groups"*
- "all parts were very educational, group discussions were the best"*
- "new partnerships"*
- "Exchange with other prevention organisations, getting to know the people behind the project"*
- "exchanging viewpoints"*
- "Understanding the differences between 'experienced' and 'inexperienced' countries and know their solutions"*
- "seeing the cultural differences and how these impact on the implementation of Everywhere"*
- "to hear how the project was implemented in other countries"*
- "Hearing from businesses about their experience with Everywhere"*
- "networking with individuals who have good ideas"*
- "meeting people exchanging ideas"*
- "possibility for communication and idea exchange"*
- "Reinforce the cooperation among the sector. Reinforce the European level of Everywhere project"*
- "workshop"*
- "learning about the differences and similarities across countries/regions of the EU. Good to be reminded that were doing really good work in the UK and that we can do more"*
- "lots of bits- yesterday (Thursday) meeting, good facilitation, nice venue/food (possibly a bit formal), great presentations, good, nice people- well done"*
- "The exchange of thoughts, ideas and solutions"*
- "presentation of results in different countries"*
- "EMIS presentation, partners experiences presentation"*
- "the second part"*
- "the workshop was really fruitful- money ideas and starting point for future projects"*
- "I've learnt a lot of useful things I did not know"*
- "to learn about different implementation strategies of different partners, to see how businesses respond, the social mediators concept"*
- "networking"*
- "to understand the project importance"*
- "EMIS data"*
- "presentations by national partners"*
- "Examples from other countries and the pre final part of the workshop"*

	1 Not at all	2	3	4	5 Very much so
Has your attendance at this seminar facilitated new partnerships with people within your own sector or in different sectors – relevant to your work?	1	1	5	13	16
All things considered, how would you grade this Everywhere seminar, with one being the worst and ten being the best?	6, 9, 10, 10, 6, 9, 6, 10,9, 7, 9, 8, 9, 7, 6,7, 9, 10, 10,8, 9, 8, 10, 9, 8, 8, 9, 8, 10, 8, 9, 8				
	8.4/10				

Do you have any other comments you would like to make about today's seminar and/or about the Everywhere project?

"Some people do not speak English very well, if it's possible in next conference can you have a translator please"

"It's very difficult not understanding everything"

"to close Everywhere I with guarantees of sustainability"

"I hope were going to work together again"

"Many thanks to brighton"

"Perhaps setting the bar too low, does not encourage continuous development. Over emphasis on condom provision perhaps at expense of education?"

"I hope you will find time to make a useful publication on the first leg of the project. Best of luck in the realisation of a follow up"

"it would be great to gain a better understanding of each countries context"

"great day- very interesting and hope that all nations here have benefitted from it"

"the dinner should have been fixed seating to mix up people. The Everywhere goals are good, but the realities of MSM are very complex such as where and how they meet, why they force protection etc"

"will be good to continue and to have finances for country activity"

"We have to continue the work with NGOs, businesses and health authorities. The conference supported the Everywhere project at international level"

"we hope to have the possibility to participate in Everywhere II"

"would be good to have a letter/communication hat we would all sign up to and send to our commissioners/policy makers etc to publicise the project and lobby the EII to continue the good work and crucially the funding"

"well done, Thank you Nigel, Tomasz and team"

"really great seminar- very good presentations- no wafflers, everyone kept to time well- fascinating differences between different countries. Lots of networking opportunities."

"it should be repeated every one or two years. Partipants extra of the location owners- 1 per country"

"For the future this project should transform. With action from all the countries in the world. This project is the better action for this target people"

"I hope that very soon we will be able to start working on 2nd stage of Everywhere in bulgaria"

"we do my best to help Bulgarian partners to start Everywhere activities in Bulgaria"

"thank you for inviting me as a speaker"

"Condoms/lubricant/gloves should be given for free to all the clients"

"The SM approach is a good way to help implement the Everywhere project"

"safer places or safe place"

"we must not abandon if the EU will not fund the second phase but we must have alternatives and know if they work in the shortest possible time"