



PROJETO BEM-ME-QUER

Rua Dr. João Rodrigues de Abreu, 352 - Perus
05202-090 - São Paulo-SP - Telefax: (11) 3917-1513
CNPJ: 02.045.930/0001-97

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PROJECT PROPOSAL - TROCAIRE 2016-2017

1. INSTITUTIONAL DATA

SOCIAL REASON: BEM ME WANT PROJECT

CNPJ: 02045930 / 0001-97

ADDRESS: Rua Dr. João Rodrigues de Abreu, 352 - Perus

CITY: São Paulo STATE: SP CEP: 05202-090

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DATE OF FOUNDATION: 09/05/1997 by Sister Sarah Helen Regan, SL

SERVICE MUNICIPAL COUNCIL SOCIAL - Number. 1185/2014

PUBLIC UTILITY STATE - Law No. 15,970

PUBLIC UTILITY MUNICIPAL- Decree No. 56151

2. DATA RESPONSIBLE FOR THE INSTITUTION:

NAME: Maria de Lourdes Romualdo: President

NUMBER RG: 22141884 CPF 113201018-79

PROJECT RESPONSIBLE: José Roberto Pereira - Vice President

3. EXECUTIVE OFFICERS

PRESIDENT: MARIA LOURDES ROMUALDO

VICE PRESIDENT: JOSÉ ROBERTO PEREIRA

SECRETARY FIRST: VILMA PEREIRA DA SILVA

SECOND SECRETARY: LUCIA APARECIDA TAVARES FELÍCIO

TREASURER FIRST: SUELI APARECIDA DA SILVA

SECOND TREASURER: JUDITE BARBOSA MATTOS OLIVEIRA

4. MEMBERSHIP TO PUBLIC FORUMS AND NETWORKS

FORUM NGO AIDS THE STATE OF SÃO PAULO

THE PASTORAL AIDS - CNBB

AGAINST AIDS FIGHT PAULISTANO MOVEMENT

NATIONAL NETWORK OF PEOPLE LIVING WITH HIV / AIDS



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5. DESCRIPTION OF THE INSTITUTION:

The Project Well-Me-Not, started on December 1, 1996, and legally established on May 9, 1997 in 2016 is 20 years old. Founded by the Irish missionary Sarah Helen Regan, in memoriam, is a civil entity, nonprofit, philanthropic, the Beneficent, Informative, protection and social development, human rights and care of people living with HIV / AIDS and their families in socioeconomic vulnerability.

It works in the areas of social welfare, education and prevention, home visits, hospital visits, therapeutic support, workshops, income generation and entertainment. Develops actions to combat exclusion and discrimination aimed at the recovery of self-esteem and dignity of the human person, creating conditions for the exercise of citizenship, social promotion and health and social reinsertion.

They are assisted about 210 people directly with the following profile: poor people in socio / economic vulnerability, living with HIV / AIDS and family, with 70% of women with low / no education, prevailing public from migratory regions exodus northeast Brazil, living in substandard housing (slums) in the northwestern region of São Paulo and neighboring municipalities. Some patients are afflicted with either primary or secondary diseases related to AIDS and / or sequelae of opportunistic infections, and low self-esteem, depressive disorders, family breakdown, drug addiction and alcoholism.

To minimize the impact of poverty and AIDS Good to Me Want Project partners with the Reference Centres for STD / AIDS and the Government Programs Social Protection and Health region. Exerts important role in social control with services and contributes to the performance of their duties in the community. Partners with agencies International Cooperation for overcoming poverty and promoting human rights.

In Education and Prevention area meets Perus and adjacent neighborhoods, through lectures, workshops, prevention campaigns, testing campaigns and counseling, seminars and distribution of prevention commodities accessing public up to 10,000 people indirectly.

Although devoid of religious attachment, and no moral connotation that violates Human Rights, in its statutes, Projeto Bem-Me-Quer bases its actions on the Christian perspective of solidarity, hospitality and service.

Contributes to welcome and promote decisively its users, safeguarding, above all, respect for confidentiality, individuality and indivisibility of the human person.

The Look Good to Me Want project is premised on the lesson of God without pity or prejudgments.

6. MISSION:

Practicing God's love through actions of solidarity with those infected and affected by HIV, AIDS patients and their families.

General objective

- Contribute to expansion of primary and secondary prevention, as part of STD / AIDS, with an emphasis on HIV / AIDS and Syphilis.



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Specific objectives:

1. Develop field interventions to disseminate information on the prevention of STD / AIDS, with an emphasis on Syphilis for the general population;
2. To promote actions for secondary prevention and adherence to anti-AIDS drugs to minimize the risk of co-morbidities in HIV-positive to HIV, reinfection by STD / HIV and cases of death, through workshops and workshops of social promotion.

7. BACKGROUND:

The HIV / AIDS in Brazil perpetuates a very complex scenario and difficult confrontation, from the point of view of assistance are infected increasingly poorer people and the dual AIDS and poverty reflects a perverse and dangerous reality since most impoverished groups have greater difficulty in accessing health services.

Equity in Brazil is constantly violated and poor people's rights denied by the state, although the Unified Health System (free government health system) is said integral, universal and equitable, it is common to see the poorest people do not have the same access services and social benefits that the population in better socio / economic conditions of the poor people with AIDS in Brazil are potentially more vulnerable to infection diseases.

No education, little ability to defend their social rights, violence and lack of government protection network, makes them at increased risk because these factors act synergistically and perpetuate the vicious cycle of misery and suffering of the poor.

"This is especially true with regard to the relationship between AIDS and poverty of speech using increasingly expanded - almost a rod - but relatively restricted conceptualiser (...). The discussion of these topics lacks theoretical and conceptual design direct and precise in its discussion of social differentiation "(Castells, 1998).

As says the City Department of Health¹, the city of São Paulo with 11.3 million inhabitants has recorded 60,659 cases of HIV and AIDS by June 2013. This equates to approximately 37% of the total disease notifications in the state and 12 % across the country. In 2015 it was recorded 2.4032 new infections and 870 deaths due to HIV (estimate). The richest city in the country with the best health facilities also records average of more than two deaths as a result of AIDS each day. The African descent are more vulnerable. For every 100 000 inhabitants. They were diagnosed 39.7 cases among black people in 2010 against 18 cases in whites. The poor die more than AIDS and if poor and black the chance of dying is 35% higher.

The coverage area served by PBMQ located where the major pockets of poverty and violence in the city. Just like cut, we quote Brasilândia / Parish that, according to the city live 392 000 people and about 30% in extreme poverty and about 20,000 are attended by non-governmental non-profit organizations. It is estimated that the population coverage of PBMQ is about 3 million people, of whom 60% live at or below the poverty line. In these places forgotten by the government dropout factors increase vulnerability levels may also increase the number of people infected and affected by HIV.

In the year 2015 it has reported 14 deaths from AIDS only users PBMQ, a number that causes us much concern since this number has grown compared to previous years and should now reduce the available Antiretroviral drugs are increasingly powerful.



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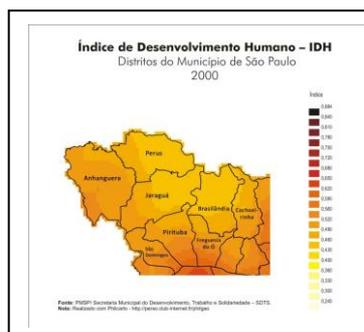
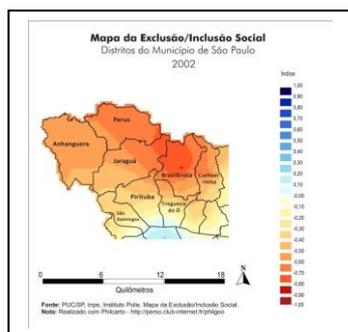
Such a scenario requires urgent interventions that contribute to the promotion of their health and a membership culture treatment.

Users are referred by dept. social health services and epidemiological data illustrate such demand. To minimize this gap this project aims to find an alternative to such difficulties, focusing on social promotion and promoting health.

¹Boletim epidemiológico município de São Paulo – Ano XVII – Nº 16 – Junho de 2013
http://issuu.com/pm.dstajds.sp/docs/boletim_2013_2104

² <http://portal.prefeitura.sp.gov.br/subprefeituras/spfo/organizacao/0001>

The Map of Social Exclusion / Inclusion proposed by Sposati (2002), which takes into consideration a number of indicators that measure autonomy, quality of life, human development and equity, shows that much of the coverage area has a high degree of social exclusion. On a scale from -1.0 (maximum social exclusion) to +1.0 (maximum social inclusion), most of the region, a wide range in the northwest end of the city, the Anhanguera district until the district Brasilândia presents index varies between -0.90 and -0.60, indicating a high degree of social exclusion.



Paulista Social Vulnerability Index (IPVS), represented on the map above shows that the region has several points considered high and / or very high social vulnerability, despite the fact that much of the territory to be unrated. On the map, there are wide areas classified as high and / or very high vulnerability in all districts of the coverage area. The Human Development Index (HDI) of the region shows values considered low. Virtually the entire territory has index below 0.50, and a large area, comprising the Turkey districts, Jaragua and Brasilândia presents content in the range of 0.43, which equals the HDI of many African countries in extreme situation poverty. The Youth Vulnerability Index allows the assessment on a scale of 0 to 100 points, the young man's vulnerability degree to situations of social risk, transgression and violence. This index, which takes into account factors such as homicide mortality rate, percentage of young people not in school, participation of teenage mothers in total born, among others, shows that almost all the area coverage has high degree of vulnerability to young people, which favors the use and abuse of alcohol and other drugs.



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8. PROJECT INFORMATION

Project title:

Projeto partilhar o pão em Cristo!
Project Bread shared in Christ!

Thematic areas:

Social promotion
Defense of Human Rights

Target population:

People living with HIV / AIDS and their families in poverty and community.

Number of beneficiaries:

People living with HIV / AIDS - 180
Family - 600

Geographical area:

Districts of the northwest region (extreme north of the city of São Paulo) and adjacent municipalities, namely: Turkeys, Taipas, Morro Doce, Brasilândia Jaragua, Pirituba, Lemon, Morro Grande, VN Cachoeirinha, Vista Alegre, etc., adjacent cities: Francisco Morato, Franco da Rocha, Caieiras.

Project Financing:

Amount requested Trocaire:



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9. ACTIVITIES:

| Nº | OBJECTIVE | GOAL | justifications |
|-----------|--|---|---|
| 01 | Technical coordination | 120 hours / month to meet the demands | Coordinate teams, organize planning, hold workshops, producing activity reports, invite users and speakers for the actions and support in technical areas if necessary.. |
| 02 | Disseminate information on primary and secondary prevention | 12 Lectures / month Education and Prevention | The PBMQ engaged in dissemination of information on prevention, especially for young people in school age. Develop positive prevention activity within the PBMQ for assisted PLWHA. Food fanpage and other web tools At the time there are no lectures, (idle time) reporting and / or make visits. |
| 03 | Contribute to social promotion | 15 baskets food / month to meet demand | About 90% of users live in extreme poverty situation with no conditions or buying food in these cases we will ensure at least the basic food of these families, especially those with small children. |
| 04 | Promoting internal workshops for health promotion and social. | 16 workshops / month | The workshops: crafts, citizenship, confectionery, young, yoga, among others are important living spaces and exchange of experiences among people living with HIV / AIDS. |
| 05 | Offer thematic workshops in order to bring information on various topics | 11 Workshops / year | Workshops bring broader and complex discussions that require skilled professionals who dominate the theme. They occur on Saturdays and are open to the community. On this day they are also passed on some items of food and personal hygiene supplies for the poor. |
| 06 | Conduct home visits in the homes of the neediest families | 200 visits / year | Home visits are important to assess the needs from the reality of users, participate in them visitors and social workers, |



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| 10. BUDGET – ORÇAMENTO DISPONIVEL NA ENTIDADE | | | | | |
|--|------------------------------------|---|-----------------|--------------|-------------|
| | DESCRIPTION | INPUTS | TRÔCAIRE | | EURO |
| 01 | Education and Prevention | | Memória | TOTAL | |
| | Education and Prevention Workshops | technical coordination | | | |
| | | Office material | | | |
| | | Snacks for Workshops | | | |
| 02 | workshops | | | | |
| | social promotion activities | snacks celebrations - (Masses, Fight against AIDS Day, Christmas) | | | |
| | | Food baskets | | | |
| | | Blender and Industrial Cutter | | | |
| | | Materials for weekly yoga workshops, crafts, etc. | | | |
| 03 | Home visits | | | | |
| | External activities with families | bus tickets Visitors | | | |
| | | TOTAL | | | |

Maria de Lourdes Romualdo
 Presidente

José Roberto Pereira
 vice-presidente
 Coordenador de projetos