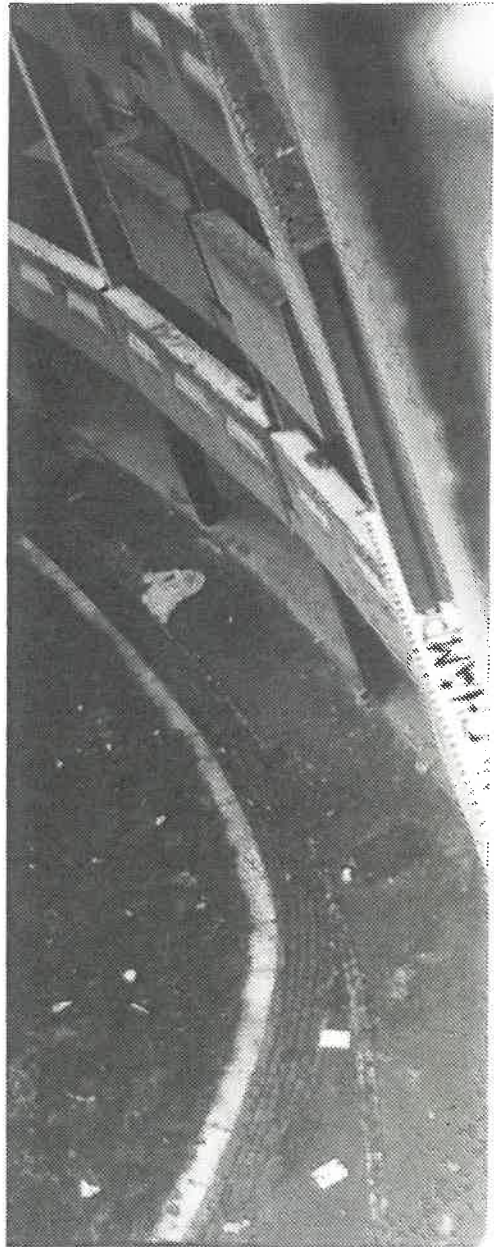


# amidst the change

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## annual report

of zion community  
health & resource centre

1 9 9 3 - 4

registered charity no.

1 0 1 8 6 3 7

## facts

Central Manchester has the highest death rate from self inflicted injury and suicide in England.

58.4% of the residents in Hulme and Moss Side claim Housing Benefit.

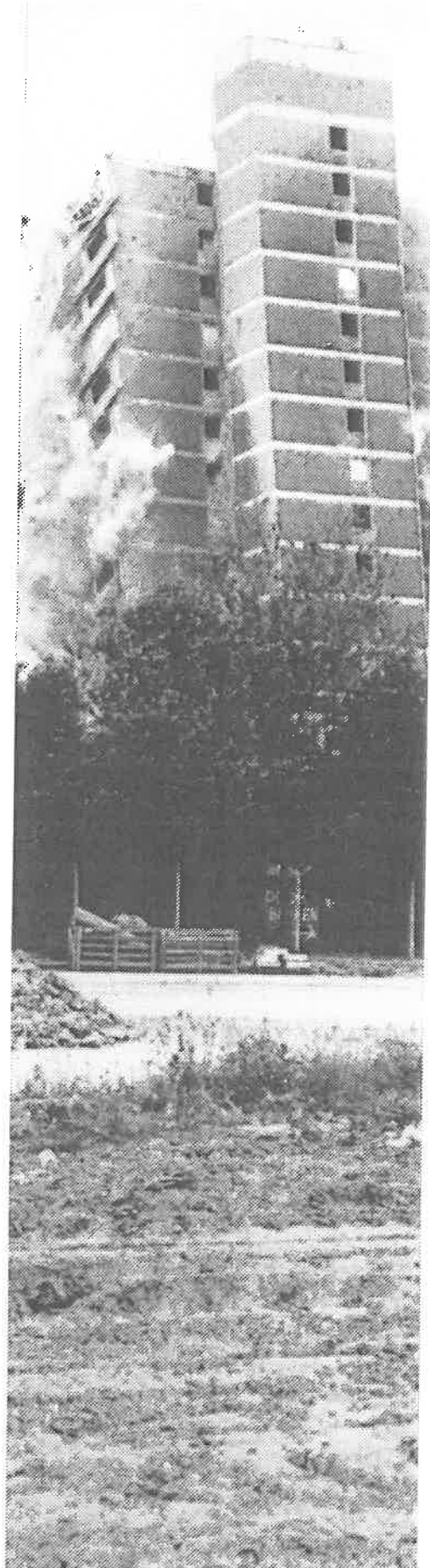
31.2% of Hulme residents are unemployed.

People over age 65 in Central Manchester are 2.5 times more likely to die prematurely from lung cancer and twice as likely to die prematurely from strokes than people living elsewhere in England.

81.5% of households in Hulme do not own a car compared to 56.6% in Manchester.

12.9% of households in Hulme and Moss Side are lone parents, compared to 3.7% in England and Wales.

31% of the population in Hulme is non white, compared to 12.7% in Manchester.



# welcome

This is the third annual report of the Centre and has been one of the hardest to put together. We wanted this report to reflect the speed and amount of change that has taken place in the last year and how this has affected our work here. We wanted to be able to brag about the positive things we have achieved and to highlight the difficulties and constraints also. We hope that this report conveys to you all of this.

This year can be most easily reflected in the work we have undertaken with drug users who are pregnant or who have children. This emerged from the tragic death of a three year old child whose mother used the centre. It has involved a whole range of statutory and non statutory agencies and has achieved major changes in the way services are targetted including the setting up of an ante natal clinic in the community with midwives sensitive to the needs of drug users. This work which is now only at the beginning stages, demonstrates our ability to take on the failures of our health and social services and make positive changes. Some day it may even be obligatory for Pharmacists to put child safe lids on methodone scripts.

The report is divided into the four main areas of work undertaken here at the centre:

**HIV/AIDs and Drugs**  
**Mental Health**  
**Women and Children**  
**Training and Liaison**

We would like to acknowledge the help of Vik Young who took the photographs for this report.

Finally we would like to remember the contribution of Devon Malcolm who died earlier this year. He gave his time and energy to BHAF, as a committee member and volunteer. Without people in our community like him with both the vision and the committment to build it we would not have a non statutory sector.

**Folasade Agbalaya (chair)**  
**Fay Selvan (Co-ordinator)**

# amidst the change 1990's

**Childrens Act**

**NHS Reform Act**

**Local Government Act**

**Urban Programme  
abolished**

**Merging of Manches-  
ter Health Authorities**

**Introduction of per-  
capita funding by  
NWRHA**

**Emergence of two  
Trusts : CMHT, Man-  
cunian Trust**

**City Challenge**

**Demolition of 3000  
homes in Hulme**



**There is an increasing trend for HIV transmission through heterosexual sex. 'Thirty percent of Aids cases and 38 percent of HIV-1 infected people reported in the last 12 months were herterosexual men and women'.**

**The Aids Letter, No.41. Feb 94**

**'In 1992, sex became the leading cause of AIDS in American women. In Scotland a significant proportion of new HIV infections in some cities are acquired through sex between men and women. Drug injecting is the background to many of these infections, acquired through sex with a male drug user.'**

**The Aids Letter, No.41. Feb '94.**

The location of four major projects working in this field in the Centre has given us a great opportunity to develop and co-ordinate joint work. The Linx post was funded early in 1993 and has been based here since April. The worker has been successful in picking up users of the syringe exchanges and outreach work undertaken by DASH and MASH, and linking them into other services. This new post has meant that in the last year we have been able to improve on the quality and accessibility of services to this client group.

Following the tragic death of a three year old child of a user of the Centre, we were able to establish a multi agency Steering Group involving Social Services, Probation, Housing, DASH, MASH, Linx, Midwives, Health Visitors, Central HIV Team, Hulme Supported Housing Forum, to look at the way we presently offer our services and ways of making them more appropriate. This Steering Group successfully bid for a small amount of funding and has to date:

- held a seminar in St. Mary's which attracted over 150 people from a range of professions including: Paediatricians, Obstetricians, Midwives, Health Visitors, Social Services, Drugs and Housing workers amongst others. The seminar has contributed to the review of protocol presently being undertaken by St. Marys hospital. This review includes reconsideration of the present policy of automatically sending all newborn babies of drug users to the Special Care Unit, where they are effectively separated from their mothers.
- The production of a directory of services for drug using women, which was identified as a need by both service users and providers.
- The production of a report based on a six month student placement who carried out face to face support work with pregnant women or women with children who used drugs. This report reflects service users views and difficulties of accessing services and makes specific recommendations for the future.
- Securing funding for training for workers and volunteers, as well as for information posters and leaflets aimed at women drug users, about pregnancy and drug use.



The need to develop services for women prostitutes in the Moss Side, Hulme and Whalley Range area has long been identified. To this end we helped co-ordinate a series of meetings bringing together local agencies and people with MASH who presently run a City Centre service. These meetings successfully produced a number of additional volunteers who are able to contribute to the operation of this new service, some of whom are from local services and projects and will subsequently be able to refer women to support in the local area.

MASH are hoping to launch this new initiative in the autumn, and are presently operating a skeleton service to build up contacts in the area. Sadly due to the expansion of the project MASH have had to relocate from the Centre into new premises in the City Centre. However, we have and will continue to maintain close links with them.

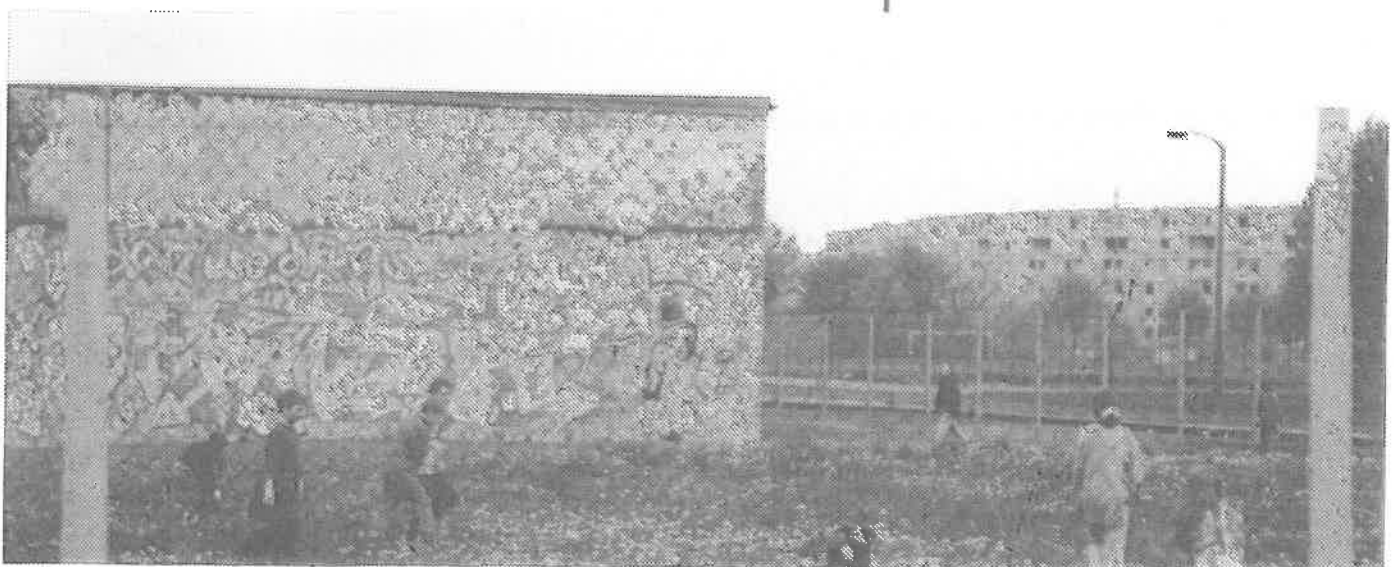
BHAF have held training days and their AGM at the Centre and have successfully secured funding to consolidate their services in the following year. They will be investigating the development of direct services for black people with HIV to be run from the Centre.

**In 1989 - 1990 there were an average of 10 births per year to drug dependent women in St. Marys Hospital, Manchester. By 1992-93 this had increased to an average of 34 per year.**

**Research by Faye Macrory, St. Marys Midwife.**

**In the UK the number of female cases of Aids reported annually doubled from 7% to 14%. This signifies a growing trend.**

**The Aids Letter. No.32.**





**DASH needle exchange gave out more than double the number of needles in 1993-4, than it distributed in 1992-3:**

**95,357 needles given out '93-'94**

**41,512 needles given out '92-'93**

**DASH had 1,892 visitors to the exchange in 1993-4.**

One area of concern that has been highlighted by a range of agencies and users alike has been the need for support in the community for women drug users with children. Through the Steering Group it became clear that there were few opportunities for women with children to make use of detox units due to the lack of funding for child places. There is even less support for women who continue to use drugs but require support to enable their families to stay together. In light of this the Steering Group has worked with the Hulme Supported Housing Forum, Turning Point and the Drugs Forum to develop up to six supported houses in the Hulme area.

Over the past year DASH have extended the opening hours of the syringe exchange whilst at the same time expanding the services available from it. This includes welfare rights advice and access to the community midwives and other services. In order to further consolidate this work DASH are relocating the exchange into the Zion Centre, where they will be working to further extend the services they offer.

## **Future Developments**

- **continue work with the Steering Group and gather responses to the seminar and placements Students report from all agencies**
- **help set up training for midwives, health visitors and syringe exchange volunteers**
- **help produce range of information for drug using women re: pregnancy**
- **further develop supported housing scheme for drug using women**
- **support the development of services for prostitutes in Moss side, Hulme and Whalley Range.**
- **support the development of accessible services for drug users here at the Zion through the addition of a new entrance, and seconding of staff from other agencies.**

We have made great strides in the services we have been able to offer to women and children in the last year. In particular we have been able to carry out extensive improvements to the creche facilities which bring them up to registration standards for full time day care. This has included the building of an outside area which provides safe open space for up to fifteen children to play, provision of childrens toilets accessible from the creche, and improvements to the creche room itself.

This work has enabled the Aisha Childcaring Group to further develop their services. They now offer afterschool club, playschemes and sessional creche care. In the past year this has meant that the creche has been open to provide child care every week for the womens health drop in and the womens art class. Aisha volunteers have also been developing training packages and policies to help them cope with issues such as difficult and challenging behaviour, as well as policies on assertive discipline, and equal opportunities.

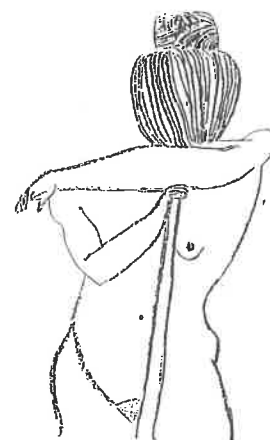
The ZCHRC directly supports the work of the Aisha Childcaring group by the provision of accomodation, administrative support and developmental support. Aisha has been successful in obtaining funding for the afterschool club and for a five day holdiday for 20 children from the redevelopment area. This together with access to a minibus donated to Hulme Community Groups by Sainsburys has led to a big improvement in the quality of care that Aisha can offer.

Aisha, Homestart and Childrens Services (Manchester City Council) have worked together trthrough the Hulme Health Forum to establish a Toy Library and an Accident Prevention Home Loan Scheme, which we hope will be running from the Centre early in the new year.



**In the last year Aisha has provided childcare for a total of 1,706 children. 76% of which were non - white.**

**12.9% of households in Hulme and Moss Side are lone parent, compared to 3.7% in England and Wales. this is higher than anywhere else in Manchester. Health Inequalities in Manchester 1993. HFA.**





**Central Manchester has over three times the national average post neonatal mortality rate (deaths in the first year of birth).**

**Health Inequalities in Manchester 1993. HFA.**

**'If babies and infants in Manchester had the same experience as the average for England and Wales the total number of still births and deaths in the first year of life would be 75 instead of 104 - nearly 30 fewer deaths.'**

**P9 Health in Manchester, Public Health Annual Report 1994.**

Central Manchester Homestart has continued to operate throughout the year despite lack of secure or adequate funding. The need to secure funding for long term projects which are established with additional pump priming resources will continue to be a priority for a lot of voluntary sector projects. Homestart has demonstrated its ability to provide support in the community to vulnerable families and has proven its cost effectiveness, and yet it continues to struggle for funding. Given the neo-natal mortality rates in Central Manchester it is illogical that their work has not attracted mainstream funding.

Developing supported housing for young mothers has been identified as a priority in the Central Manchester area, and the redevelopment of Hulme has provided the opportunity to achieve this. We have worked closely with Homestart, Youth Support Project and the Supported Housing Forum to develop this scheme, which we hope will go ahead in 1994.

The range of day-care and support offered by the Centre to women over the past year has also grown. We have now developed a women only sports drop in at the YMCA, and a womens art class. These are targetted at women using the Centre who are suffering from stress and anxiety or who have mental health problems. They provide a socially supportive environment and encourage women to develop their skills. The womens health drop in has also maintained its services in the Centre over the past year and offers a half day a week information and advice service.



The Zion Community Health and Resource Centre has provided a voluntary sector representative on the Community Health Council for the past two years. Part of this work has been with the womens group. The CHC womens group has continued working to ensure that womens health needs are a high priority for the purchasers and providers, particularly at this time with the merging of the three Manchester Health Authorities who all have different levels of existing provision.

The CHC womens group organised a one day networking meeting of womens health groups across the city and are now actively promoting the establishment of a formal network in order to encourage service purchasers and providers to acknowledge the need for more womens services in Central Manchester.

## Future Developments

- **Aisha will work towards providing full time day care, offering a drop in service for parents using the Centre**
- **We aim to ensure that Homestart services secure long term funding**
- **We will continue to work towards the targetting of resources to meet the special needs of women.**



**Central Manchester has 1.5 times more conceptions by under 16 year olds than England and Wales.**

**Health inequalities in Manchester 1993. HFA.**





Over the past twelve months the mental health groups based at the Centre have supported over 480 people on a regular basis.

'however good the care in the community ...however all embracing, there will always remain a small group of seriously mentally ill people who are at risk of falling through the net of care.... We consider that if the needs of that small group are not properly met, care in the community will be discredited and may be perceived as a policy which has failed. We do not think that as a society we can afford to let that happen'.

**P115 The Report of the Inquiry into the Care and Treatment of Christopher Clunis. HMSO Feb 1994.**

At the beginning of this year we made a break through in the relationship between the voluntary and statutory sectors in Central Manchester when the first statutory project (Continuing Support Services) moved into the the Zion Centre. This development both demonstrated the level of commitment and also the opportunities for furthering the close work between the statutory and non statutory sectors in the mental health field.

There are now five mental health groups based in the Centre offering a comprehensive range of services. Joint case work has been facilitated by the easy proximity and communication between the services. Service users also have more access to, and choice about which services they wish to use and joint work to provide new services has also been developed.

We have worked jointly as a sub group of the Hulme Health Forum and have achieved some major changes in this year;

- we have begun to establish an easily accessible counselling service, which is person centred and free of charge. We presently have two female counsellors for one day a week and a third female Clinical Psychologist for half a day a week. We have been particularly concerned to ensure that we can offer a choice of counsellors including people of different race and gender and will be continuing to work on this in the future.
- we have jointly worked on bids for funding specific pieces of work, which has helped develop a joint vision for the development of mental health services in the future.
- we are presently working with CMHT to develop their services from hospital to community provision. In particular we will be aiming to ensure that this transfer of resources is done in consultation with users of the service and brings about a closer working between statutory and voluntary sectors. We also hope to ensure that services are developed to reflect the needs of the different localities in Central



The activities we are able to provide at the centre for people with mental health needs have also developed. Funding was secured for some building works to improve the art room and provide a cafe area. The following activities are now offered at the centre:

- three art drop ins, (one for women, one for black people and one general). Funding from Kelloggs helps with the revenue costs of these projects
- The Harp cafe drop in now operates three days a week and provides work experience, as well as cheap nutritious food for people using the Centre. It is run by Harp and people with mental health needs.
- AfroCaribbean Mental Health Project run a one day a week drop in at the the Centre which attracts between 10 and 20 people each week.
- two sports drop ins (one women only) each week.

The art groups have undertaken some major pieces of work in the past year including the production of a mobile exhibition which will be used to inform local people about the work of the Centre and the art groups in particular. ZAP have also bid to Rowntrees to carry out a three month project which will reflect users experience of one year of community care. It is hoped that this will be able to feed into purchasers plans towards to the end of 1994.



**Although the Afro-Caribbean population numbers less than 2% of the whole population of Central Manchester, the in-patient population in Psychiatric services remains at 25% and often reaches 40%.**

**Dr. Pete Thomas et al. 1988.**



Providing information to service users has been a main priority and will continue to be in the forthcoming year. This year we undertook a contract to produce a 'user guide to mental health services in Central Manchester'. This user guide has now been circulated widely throughout the Central Manchester area and is helping users to make informed decisions about the services they want to use and how to access them.

We have continued to work with the Hulme Supported Housing Forum to develop schemes for people with mental health needs in the Hulme area. This has involved extensive discussions within the mental health group to determine what gaps in provision there presently are and how best they could be met. The group also arranged informal discussion groups for users to feed into the Supported Housing Strategy their views and ideas.

We have worked with Tranxaid to further develop support services for people using tranquilisers and have held training days within the Centre and for other groups around stress management and effects of tranquilisers. We have found funding to set up an aromatherapy and massage room within the centre and are planning to run training in this field.

## Future developments

- **develop the counselling service by extending the range of counsellors and times they are available.**
- **extend the opening hours and scope of the Cafe in order to provide a more comprehensive service and increase opportunities for people with mental health needs to develop their skills in a supportive environment.**
- **Harp to facilitate development of more drop ins for people with mental health needs.**
- **produce information regarding psychiatric drugs, their use and effects.**
- **to secure funding for Tranxaid.**
- **to establish the aromatherapy and massage room.**
- **to continue to work with CMHT Directorate of Psychiatry to contribute to a change in the way mental health services are provided in Central Manchester.**



Training which is open to volunteers, staff and users of the Centre has remained a high priority over this year. The training that we undertake helps to ensure that we are able to offer a quality service and can repay volunteers for their time and energy. This year we offered free training in the following areas:

**Parenting  
Assertiveness  
Basic Counselling Skills**

In addition we took up numerous training opportunities provided by other agencies including Health Promotion and GMCVS. Each project who use volunteers also held training programmes including BHAFF, DASH, Homestart, ACMHP and MASH.

Throughout the year we have also been working to develop the type of training opportunities that we can offer here at the centre. In particular we have been looking at accrediting our volunteers through use of National Vocational Qualifications. To this end we have had one of our volunteers trained as an NVQ assessor. In partnership with City College Manchester we have been able to develop a range of training courses which will be available from September 1994:

**Aromatherapy and massage  
Counselling Certificate  
NVQ in Childcare  
African History  
Parenting skills**

We worked jointly with Childrens Services, Hulme Adult Education Service and City College to run a one day Adult Learner event which promoted opportunities of learning through training linked to volunteering. This attracted over 200 people on a Sunday afternoon and demonstrated the potential for this area of work.



**There were 139 volunteers for projects at centre this year, of which 52% were non-white.**

**'I have volunteered here for three years and have done four training courses. I feel more confident about what I'm doing. Next year I'm doing the NVQ in childcare.'**  
**Cindy Clarke, Volunteer.**



**'Zion plays an important role in Hulme and the area around. Many local initiatives wouldn't have been possible without the commitment of the Zion staff and the good working relations at the Zion Centre. I hope these 'healthy alliances' can continue to develop.'**  
**Dr. Di Chisholm, Public Health Consultant and Chair HHF**

Throughout this report we have talked about working in partnership with other agencies and this has been a central feature of the way we work. We are firmly committed to working with other agencies to tackle the health problems of our area. We have worked within the structures of City Challenge including the Hulme Health Forum and the Hulme Supported Housing Forum. Through these we have been able to positively work with other agencies to bring about real change in the appropriateness, quality and accessibility of services in Central Manchester.

**We have also worked with the following agencies:**

**Community Health Council  
Hulme and Moss side Voluntary Organisations Group  
Task Force  
Central Manchester Healthcare Trust  
Hulme and Moss Side Community Development Trust  
Claremont Resource Centre  
Manchester TEC  
City College  
Childrens Services**

## **Future Developments**

- **to run a comprehensive training programme in September 1994**
- **to further develop training opportunities by in particular looking at assessing volunteers for a qualification in care**
- **to continue to carry out the administrative support work for the Hulme Health Forum and act as a contact point for people interested in its work**
- **to continue to work in partnership with other agencies**

**Afro Caribbean Mental Health Project (ACMHP)**  
**Aisha childcaring Group**  
**Black HIV and Aids Forum (BHAF)**  
**Continuing Support Services (CSS)**  
**Creative Support**  
**Drug Advice and Support in Hulme (DASH)**  
**Hulme Action Resource Project (HARP)**  
**Homestart**  
**Linx**  
**Manchester Action on Street Health (MASH)**  
**Tranxaid**  
**Womens Health Drop in**  
**Zion Art Painbox**

**Ian Mello - ACMHP**  
**Karen Wilson - Aisha**  
**Folasade Agbalaya - Aisha**  
**Evelyn Asante Mensah - BHAF**  
**Joy Wales - CSS**  
**Andrew Cresswell - CSS**  
**Lindsey Cook - Creative Support**  
**Sarah Higson - DASH**  
**Keith Reynolds - Harp**  
**Caroline Freedman - Harp**  
**Margaret Fielding - Homestart**  
**Josie De valda - Homestart**  
**Denise Williams - Linx**  
**Sarah Crosby - Mash**  
**Dave McLeod - Tranxaid**  
**Fiona Hutton - Womens Room**  
**Jill Anderson - Womens Room**  
**Julia Horne - ZAP**  
**Dave Rodgers - ZAP**  
**Cllr. P. Dungey - Manchester City Council**  
**Libby Graham - Manchester City Council**  
**John Riley - Central Manchester Healthcare Trust**

**Projects based at  
Centre**

**ZCHRC management  
Committee members**

## **Funding**

**Funding was recieved from:**  
Urban Programme  
Central Manchester Healthcare Trust  
City Challenge  
Hulme Health Forum  
Kelloggs Co. UK  
Aids Support Grant  
Hulme and Moss Side Task Force  
Manchester City Council

## **Other information available**

**Audited accounts  
Equal Opps Policy  
Health and Safety Policy  
Security guidelines  
Service Principles  
Comments and Complaints procedure  
How the ZCHRC works  
Monitoring statiststics 1993-4**

## **Thanks**

**thanks to the following outside agencies and individuals who supported us in the last year**

**Libby Graham  
Sue Pollitt  
Viveen, Pauline, Tracey, Mary Killroy  
Louise Dacacodia  
Chris Woodcock  
Elles Belles**

**thanks particularly to the volunteers:**

**Mary Murphy  
Dave McLeod  
Karen Wilson  
Cath Hunter  
Cindy Clarke  
Shirley McNaught  
Jo Blackburn  
Fiona Hutton  
Vik Young  
Jill Anderson  
Francia  
Paul Butler  
Paul Goddard**

**and to the placement students...**

**Jayne Forsdike  
Bridgit and Linda**