

GMHC

THE AIDS SERVICE AND
EDUCATION FOUNDATION

GAY MEN'S HEALTH CRISIS, INC.
ANNUAL REPORT
1986-1987

"Since its founding in 1981, GMHC has been a model nationwide for community-based organizations serving the critical needs created by the AIDS health crisis. The services provided by GMHC have been invaluable to many of my constituents and the community at large. I am truly grateful for the existence of GMHC as a place to refer constituents and concerned individuals who are in need of both a professional and compassionate environment during the crisis."

Congressman Ted Weiss
17th Congressional District
New York



THE AIDS SERVICE
AND EDUCATION
FOUNDATION

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GMHC has supplied
national leadership in
the fight against AIDS.
I applaud their effort for
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A WORD FROM GMHC'S PRESIDENT

Whether we are educating Congress, raising money for client services and education, or supporting national organizations such as the AIDS Action Council, the National AIDS Network, and the National Leadership Coalition on AIDS, the Board of Directors of Gay Men's Health Crisis must keep up with the constantly changing nature of the AIDS epidemic. Daily we see new legislation, medical developments, social implications, and political events. A primary function of the board is to foresee changes in order to continually create programs and policy that best serve our clients and the public.



The strength of GMHC emanates from the extraordinary commitment of a compassionate and well-trained force of volunteers. Among those volunteers are the Board of Directors. Board members represent divergent backgrounds and expertise, ranging from the law and business to social service delivery, education, and the arts. On a daily basis, board members help support and refine existing programs, as well as work with staff and other volunteers to develop new programs and policies to address the continuing challenge of AIDS.

One indication of institutional foresight and stability is the Board's extraordinary effort in overseeing the purchase, planning, renovation, and future relocation to our new facility on 20th Street. Working together with the Executive Director, we have maintained fiscal responsibility. The needs created by expansion in every program area have been met with thoughtful planning and active fundraising.

As President of GMHC, I understand that my role and that of all board members must remain diverse. It is sometimes necessary to be in the streets of Washington performing civil disobedience protesting the Federal government's slow and inadequate response to the AIDS crisis; it is also necessary to walk in the streets of New York to raise needed funds in our annual walkathon. I pledge that your Board of Directors will continue to provide leadership and fight effectively on the many fronts of the ongoing battle against AIDS.

A handwritten signature in cursive script that reads "Nathan K. Kolodner".

Nathan K. Kolodner, President

*Board of Directors
Gay Men's Health Crisis*

A WORD FROM GMHC'S EXECUTIVE DIRECTOR



In our nearly six-year history, Gay Men's Health Crisis has played a leading role in providing counseling, and legal, financial, and practical support for over 5,000 persons with AIDS, and AIDS-related complex and for their care partners, families, and friends. Our public information, education and training programs have reached millions of people around the country and saved countless lives. Our advocacy for funding for medical research, education programs, improved patient care, and fair and effective public health

policies makes GMHC a leader on the national front.

Yet the tragedy of AIDS continues. Barring one or more medical miracles, by the year 1991 there will be 270,000 cumulative cases of AIDS in the United States; 190,000 Americans will have died of AIDS by then. Eighty percent or more of these cases have already been diagnosed or are infected. AIDS is now the leading cause of death in New York City for men between the ages of 25 and 49 and for women between 25 and 34. As many as 500,000 New Yorkers may be infected with the human immunodeficiency virus.

The awful projections of more than a quarter of a million Americans dead or dying of AIDS by the year 1991 are based on sufficiently valid data that, while these projections might be low, they will not be high. There is a tendency in discussing these projections to assume that 1991 represents a peak year or even the end of the epidemic. Had this nation embarked immediately on a massive education campaign when the estimates were made in 1986, that hope might have had some chance of realization. With each month that passes without coordinated and effective prevention efforts at the national level, the number of infected people can be expected to increase inexorably and the "peak" year gets postponed farther and farther into the future.

All of these statistics have a numbing effect. We must remember that each number represents an individual, usually in the early bloom of adulthood, at a stage of life when training and talent are fully brought to bear in our roles in society.

We need your support more than ever. Please join us in our fight.

A handwritten signature in dark ink, appearing to read "Richard Dunne". The signature is fluid and cursive, written over a horizontal line.

Richard Dunne, Executive Director
Gay Men's Health Crisis

“What would New York City do without the unequalled community services of GMHC? They respond quickly with innovative programs and educational information. GMHC and AmFAR have complementary missions — patient care and biomedical research — and we are united in the fight to end discrimination, minimize suffering and find a cure for this devastating epidemic.”

*Mathilde Krim, Ph. D.
Founding Chair
American Foundation for
AIDS Research*

Between July 1986 and June 1987, the dedicated work of more than 1600 active volunteers and our professional staff allowed GMHC to reach out to a large and varied group. In that year, we at GMHC served more than 1600 persons with AIDS (Acquired Immune Deficiency Syndrome) or ARC (AIDS-Related Complex).

GMHC's volunteers and staff, together, successfully accomplished the agency's three basic missions: client services, public education, and advocacy. GMHC's volunteers performed a great variety of tasks, bringing a wealth of different skills to the organization, demonstrating a dedication that inspires organizations worldwide.

During this year the work of GMHC's volunteers extended into the areas of education and health care advocacy. The expansion of the Ombudsman's Department and its health care advocacy work, and our Education Department's safer sex outreach, enabled our organization to be more active advocates, more effective educators.

In 1986-1987, GMHC also reached out to build new coalitions with other organizations combatting AIDS and fighting for better care and education. Such coalition building has helped GMHC become more sensitive to the varied needs of its diverse clients. In turn, GMHC's resources and experience became more accessible to the groups with which we worked.

The combined strengths of GMHC's professional staff and volunteers, their success performing the

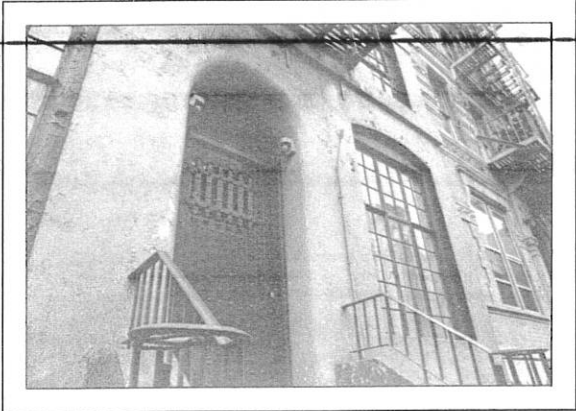
difficult work of serving a community with often desperate needs, have resulted in GMHC's often being cited as a model for volunteer organizations around the world. At the end of 1985, GMHC received the highest tribute New York State can offer a nonprofit organization, the Eleanor Roosevelt Community Service Award.

But even as GMHC has expanded in its service to its clients, in its organization of an increasing number of volunteers, and in its professional staff—even as our public fundraising events have received national attention—we at GMHC remain a community characterized by concern, devoted to individuals in need.

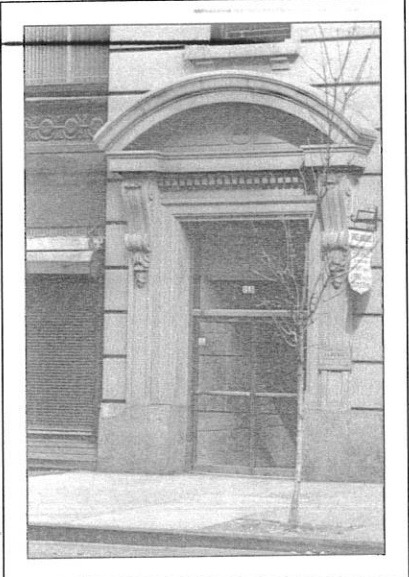
In August, 1981, when GMHC was founded by six men, it was the first—and it remained for a long time the only—group to confront the medical, psychological, and social implications of the AIDS epidemic. Since then, over 5,000 men and women have volunteered to help GMHC.

In the years since its founding, GMHC has played a leading role in serving over 5,000 clients, and in educating health professionals, the public, and the populations most at risk. When Gay Men's Health Crisis was founded, AIDS was thought to affect a relatively small group, primarily homosexual men. Now, GMHC serves a much wider group, including a large number of heterosexuals, bisexuals, women, hemophiliacs, intravenous drug users, and children with AIDS or ARC.

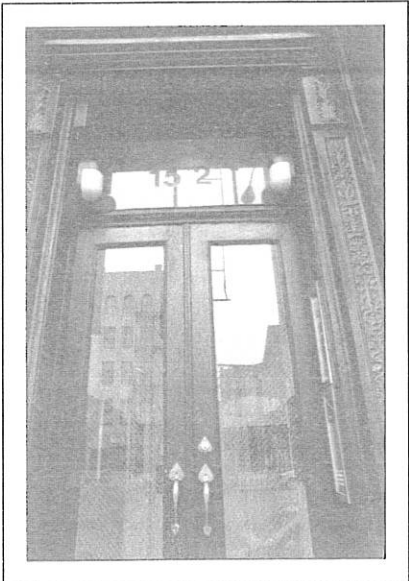
Today, GMHC mobilizes an ever growing number of volunteers in its service to a diverse community.



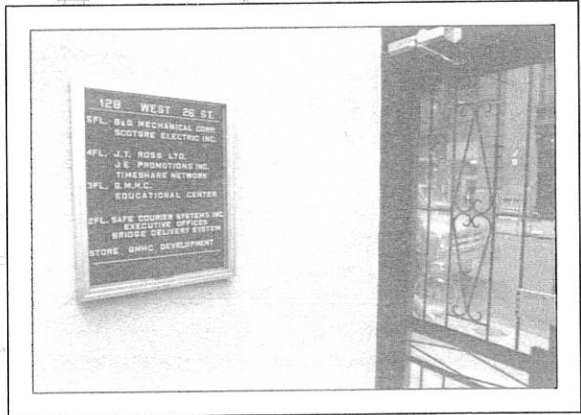
26 Perry Street
For a limited amount of time, Perry Street was the base of operation for Recreation Services. Programs quickly outgrew this location.



155 West 23rd Street
Present location of Recreation Services. Provides large meeting space, a kitchen, and all of the amenities necessary for a vital program.

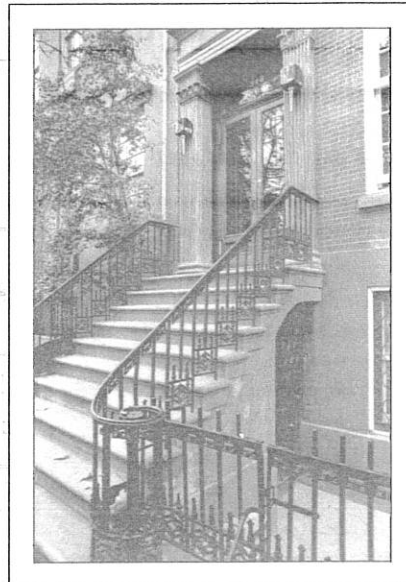


152 8th Avenue
The location of Legal Services and the offices where support groups are held.

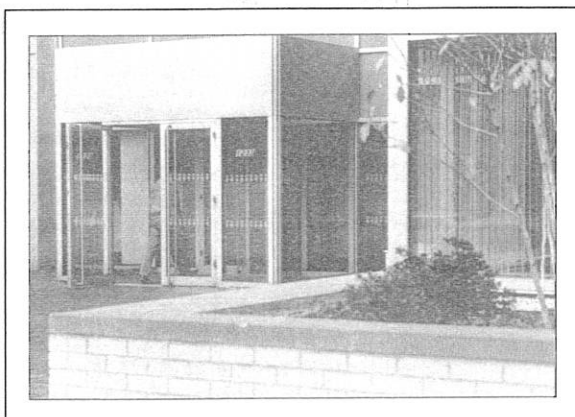


128 West 26th Street
The home of Education and Development, and Medical Information.

GMHC's staff has grown by 50% in the past year, reflecting an expansion of programs and services. Separated by our growth to five different locations, all departments will be reunited upon completion of GMHC's new building at 129 West 20th Street.



318 West 22nd Street
The first home of GMHC.

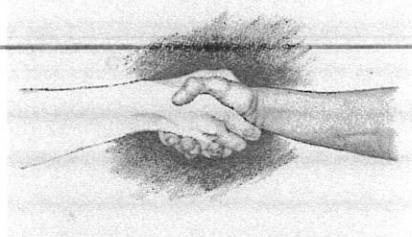


1233 York Avenue
This location houses the offices of the AIDS Professional Education Program.



254 West 18th Street
The central office of GMHC houses the Volunteer Office, Client Services, Administration, Public Policy, Public Information and Ombudsman's office.

CLIENT SERVICES



Learning that one has AIDS or ARC is a traumatic experience. GMHC's client service programs are committed to reducing the stress associated with such a diagnosis, and to increasing the emotional and practical resources necessary to cope with the illness. GMHC's five client service programs are designed to meet each individual client's needs in a supportive atmosphere.

Whether an intake volunteer serves as a sounding board for an older man newly diagnosed with AIDS, or a volunteer buddy visits an ill young woman twice a day in a fifth-floor walk-up, GMHC's client service volunteers bring a special caring to their work.

Such caring forms the foundation of the five client service programs — Intake, Crisis Intervention, Group Services, Recreation Services, and Financial Advocacy — described in the following pages.

In 1986-1987, GMHC's staff and more than 600 client service volunteers dedicated countless hours to providing care, support, and hope to

"People with AIDS Coalition is pleased to acknowledge GMHC's wide range of services, many available nowhere else, for people with AIDS and ARC. Swiftly organized to deal with a health emergency (even before the disease had an 'official' name), GMHC has, from its beginning, been in the forefront of providing legal, financial, and personal care assistance services to PWAs and PWArcs needing help."

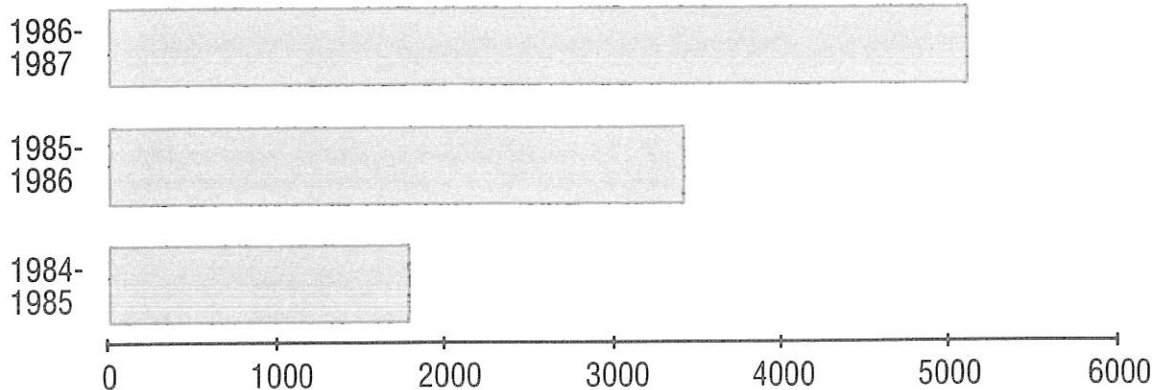
People With AIDS
Coalition

more than 1,500 clients — people with AIDS or ARC and their lovers, spouses, families, and friends in all five boroughs of New York City.

GMHC's intake volunteers, usually a client's first contact with the organization, play an important though different role at almost every intake. These frontline volunteers function as peer counselors, crisis workers, and advocates. They are often viewed by clients as "the person with all the answers" — and face a thousand questions and fears. Intake volunteers support and guide clients as they begin the process of dealing with AIDS.

When a person with AIDS or ARC calls GMHC, he or she is assigned to an intake volunteer. An intake may last from an hour and a half to four hours, depending on the client's needs. Following the first interview, the volunteer completes a report, a "picture in words" of the new client as an individual. An intake may occur at GMHC or in the new client's home or hospital room. Over the past year, intakes have been completed in almost every neighborhood in the five boroughs.

CUMULATIVE TOTAL OF CLIENTS SERVED SINCE PROGRAM INCEPTION



Intake volunteers are available to conduct interviews in seven languages — including Spanish and Chinese. Their various skills, backgrounds and personalities match the diversity of our clients.

The fifteen volunteer members of the Phone Team are PWAs who reach out by phone to other GMHC clients. Calls, which go out to about 20% of clients, serve to keep in touch, offer support, ascertain new needs, and describe upcoming events and new services.

CRISIS INTERVENTION

In addition to their roles as supportive listeners, as liaisons with the social service and medical systems, and as providers of assistance for the homebound person with AIDS, our volunteers have increasingly served as sources of information to our clients. This year attention has been given to persons with AIDS outside of Manhattan. And a new full-time Clinical Supervisor with the Crisis Inter-

GMHC's client service volunteers bring a special caring to their work.

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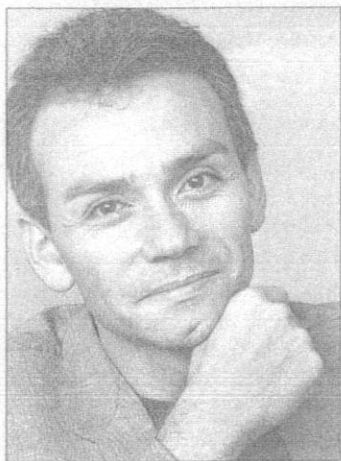
vention staff has provided extra guidance for volunteers dealing with difficult situations.

In one example, Steve, a crisis intervention worker, had been a GMHC volunteer buddy for over two years. Even so, when his client Derrick went into the hospital with a second bout of pneumonia, Steve wondered how he could offer effective support. Derrick was severely depressed, had few friends, and was almost penniless. How could Steve

help to raise his client's spirits in the midst of a medical and financial crisis?

The ingenious answer (after Derrick's medical condition had improved) — a hospital Tupperware party! Steve helped Derrick raise \$600 through a Tupperware sale that also helped to restore Derrick's sense of his own power and self-worth. A green Tupperware pitcher, a Christmas gift from Derrick, is a memento that Steve cherishes. It is this kind of creative intervention that GMHC buddies, crisis intervention volunteers, and crisis management partners bring to their work.

Our success in providing quality services to a diverse population means that GMHC continues to serve as a model for other agencies across the country and internationally. Our service provision model was presented and discussed at the 1987 Lesbian and Gay Health Conference in Los Angeles, as well as in other forums which included health workers and epidemiologists from Sweden, Great Britain, West Germany, Denmark, and the Netherlands.



GENE BAGNATO

CESAR CARRASCO

An artist, Cesar has volunteered for 3 years, both as a Crisis Management Partner and a member of the Speakers' Bureau.

"Especially when I first volunteered for GMHC three years ago, there was a lot of animosity toward homosexuals. I figured if we didn't help ourselves — who would?"

"It makes me feel good about myself to be helping people who have AIDS, even though the actual day-to-day work with PWAs is often very difficult for me."

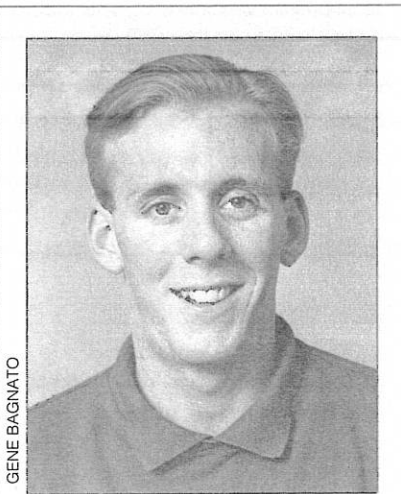
PEDIATRICS

One-half of all cases of AIDS in children reported in the United States are in New York City. One of the most difficult tasks of GMHC's crisis intervention volunteers is helping these children and their families. In 1985, GMHC began a program to reach children with AIDS, and we have now provided services to 25, ranging in age from six months to eight years. Pediatric volunteers provide emotional and practical support to these children, and to their families.

The pediatric volunteer is a source of affection — someone who holds, listens to, and laughs with the child. He or she also seeks to stimulate the child's intellectual and language skills. Depending on the needs of the child and family, the volunteer may serve as big sister (or brother), advocate, or peer counselor. The volunteer may provide emotional support to family members, as well as essential services, such as baby-sitting, that give the child's relatives a much-needed rest.

Advocacy is also a large part of the pediatric volunteer's work. Volunteers often help with applications for financial programs and housing, interceding when problems occur. They also advocate for the appropriate placement of children in early intervention programs, and in pre-school and school programs.

Often, pediatric volunteers are among the few adults the child sees on a continuous basis. The life of a child with AIDS is often restricted to a hospital room and to one family member or friend; volunteers help bring the world to a child, as well as a sense of continuity.



GENE BAGNATO

BRIAN STEWART

Brian has volunteered for 4 months on the PWA Telephone Team.

"I volunteered at GMHC to educate myself about AIDS. From working first hand with PWAs, I've learned that the 100% fatality rate that's reported in the press misrepresents the situation. PWAs live and they survive."

GROUP SERVICES

Each week, more than 450 clients take part in one of the group sessions offered by GMHC. These clients are striving to deal with the difficult social and emotional consequences of an AIDS diagnosis. Twenty-three groups are for people with AIDS, eleven groups are for care partners.

The pediatric volunteer
is a source
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listens to, and laughs
with the child.

The groups include two for parents of people with AIDS, one for intravenous drug users, six for spontaneous walk-ins, and a couples' workshop.

On a Thursday night, eight people sit in a circle — most are relaxed and calm, two are extremely anxious, one is in tears. This is one of GMHC's ongoing support groups for primary caregivers of people with AIDS. Two of those present are volunteer group leaders. Tonight's issues range from a parent's struggle to handle the pain she feels caring for a son in the terminal stage of AIDS, to a partner's difficulty dealing with the anger of an ill lover who is no longer able to leave the house.

Fifty-six therapists currently volunteer as group leaders. Most have participated in a special training group to hone their group leadership skills. A research project on the experience of therapists working with persons with AIDS is in its final stages, and will be a valuable training tool for GMHC and other organizations.

RECREATION SERVICES

GMHC's Recreation Services provide people with AIDS or ARC and their friends the opportunity to engage in both focused and informal recreational groups.

Focused groups include activities such as massage, aerobics, bowling, knitting, and crafts. Other events include workshops in stress management and theater and candlelight dinners. Such dinners provide clients the opportunity to utilize various abilities, giving them a chance to plan for a future event assert some control

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
3-6 pm Pisces Birthday Party 6 pm Movie "Down and Out In Beverly Hills"	2-4 pm Bingo	4-6 pm St. Peter's Stress Management	1-2 pm Stretch Class 2 pm Lunch 1-6 pm Drop-in	1:30 pm Bowling at the Bowlmor Lunch follows	1-3 pm Massage 4 pm "Cocoon" 7 pm Candlelight Dinner	1-8 pm Drop-in Games by Sage
4-9 pm Drop-in 6 pm Movie "A Letter to Three Wives"	2-4 pm Bingo 4-5 pm Advisory Meeting	4-6 pm St. Peter's Stress Management	1-2 pm Stretch Class 2 pm Lunch 1-6 pm Drop-in	4-5 pm Yoga	1-3 pm Massage 4 pm "Nightmare on Elm Street" 7 pm Candlelight Dinner	1-8 pm Drop-in 10:30 am New York Botanical Gardens
4-9 pm Drop-in 6 pm Movie "Back to School"	2-4 pm Bingo	4-6 pm St. Peter's Stress Management	1-2 pm Stretch Class 2 pm Lunch 1-6 pm Drop-in	1:30 pm Bowling at the Bowlmor Lunch follows	1-3 pm Massage 4 pm Lily Tomlin Films 7 pm Corned Beef and Cabbage	1-8 pm Drop-in 1:30 pm Museum Trip
4-9 pm Drop-in 6 pm Movie "The Best of Comic Relief"	2-4 pm Bingo	4-6 pm St. Peter's Stress Management	1-2 pm Stretch Class 2 pm Lunch 1-6 pm Drop-in	4-5 pm Yoga	1-3 pm Massage 4 pm "Alice in Wonderland" 7 pm Candlelight Dinner	1-8 pm Drop-in 3 pm RSVP Eggs Benedict Brunch
4-9 pm Drop-in 6 pm Movie "Gung Ho"	2-4 pm Bingo	4-6 pm St. Peter's Stress Management	<h1 style="margin: 0;">MARCH</h1> <h2 style="margin: 0;">RECREATION CALENDAR</h2>			

This reflects a typical month of activities for the Recreation program. The variety of activities provided illustrates the importance of recreation in the lives of people with AIDS.

over their lives, and have fun. An informal drop-in group provides clients with a space to sit, relax, talk, or watch a movie.

GMHC's Recreation Services staff has developed good relations with many local merchants, craftspersons, artists, and theater companies, helping to integrate the program into the community. Once a week, for example, theater companies tell us of available tickets, leading to the distribution to our clients of over 700 tickets each month. Local restaurants provide us with pastries, cheeses, and bread, as well as free meals for our clients. Artists and craftspersons volunteer their skills, hair stylists offer their services, potters donate pottery for gifts, musicians appear at GMHC to perform.



PHYLLIS HAYNES

Phyllis has worked in Recreation Services planning monthly museum and brunch trips for 2 years.

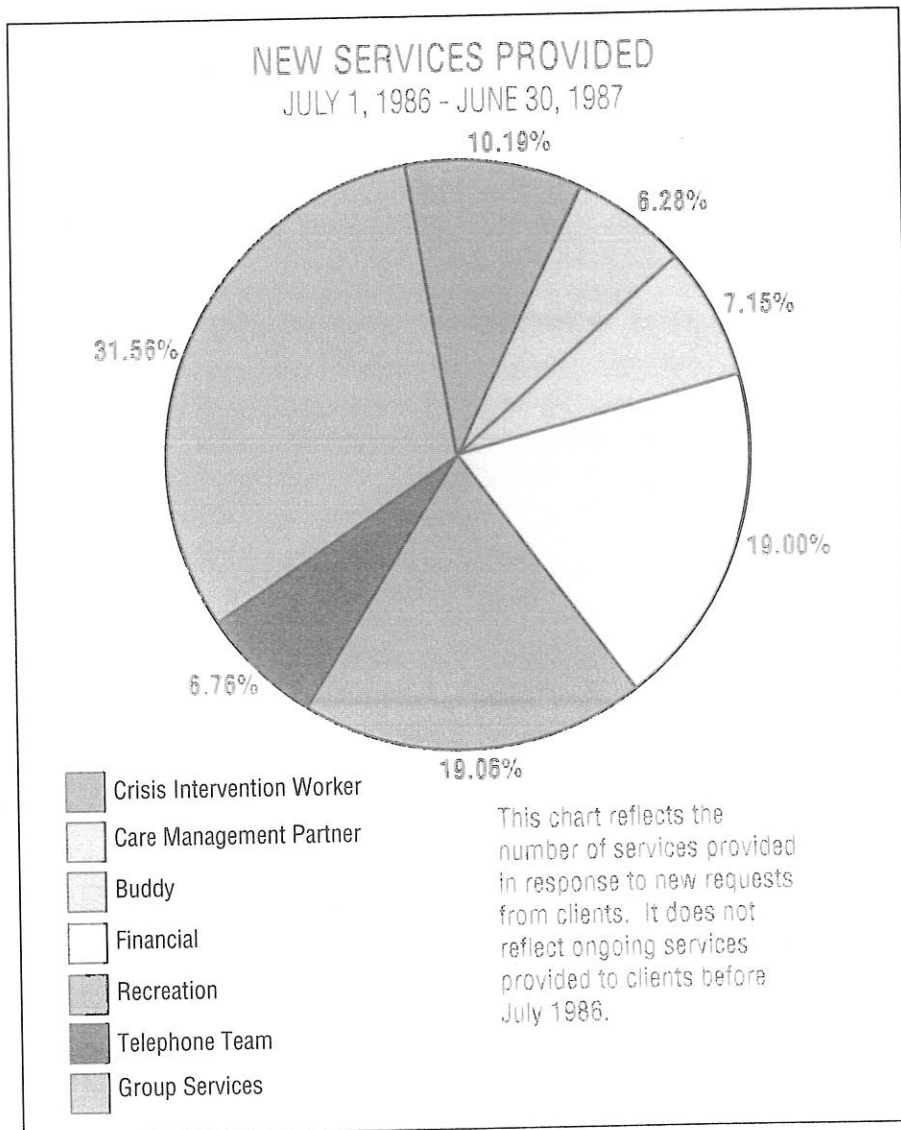
"GMHC's museum and brunch trips are often the first time that people have gone out as PWAs and PWArcs. I've made a lot of close friends, and I've lost a few, but I'm grateful that I had a chance to know them while they were here."

FINANCIAL ADVOCACY

The GMHC's financial staff and volunteers provide clients with ongoing assistance in obtaining the maximum benefits available through federal, state, city, and private agencies. Financial advocates process necessary documents with a client in a hospital room, in the client's home, or at a regularly scheduled meeting held at GMHC's offices.

The major goals of our financial program are to alleviate the stress faced by many over economic problems, and to help clients maintain a quality of life consistent with established needs. Each client is given the opportunity to discuss often difficult and confusing financial issues with an expert who knows how to provide understandable information.

Virtually all of GMHC's clients use the organization's financial advocacy services since this nation's health care and insurance systems usually prove inadequate in the face of a long-term, life-threatening disease. As the *Wall Street Journal* pointed out in August 1987, even those persons with AIDS who have insurance "often face bankruptcy," and half of GMHC's clients are impoverished by the high cost of hospitalization and medication with inadequate insurance coverage. As the *Journal* stated: "Financial chaos devastates relatives and lovers as well as the sick themselves." GMHC's Executive Director was quoted: "AIDS has exposed in a very glaring way all the problems of the system." The *Journal* concluded that the financial problems "are getting worse in many ways."



Our financial advocacy volunteers and staff served more than 1,400 clients in the past year. Their services included an initial assessment of the clients' needs, assistance in preparing the mountains of papers that must accompany every entitlement request, and the continuous monitoring of the request necessary to ensure that

all benefits are obtained.

Because a client's financial status is often one of the most important and most stressful issues in his or her life, the financial staff and volunteers find themselves performing many different kinds of services, acting as peer counselors and friends, as well as liaisons and advocates.

OFFICE OF THE OMBUDSMAN



The Office of the Ombudsman advocates for better health resource development for people with AIDS. The department and its advocacy role have grown considerably in the last year, an expansion reflected in workload, staff, and volunteer increases.

In 1985, GMHC's Ombudsman handled 350 health-related complaints. In 1986, the Ombudsman, the Client Representative (a position created in June 1986), and volunteers together received and processed 604 complaints.

As health problems and health resource needs increased, more staff positions were added in 1987. A child services advocate was appointed in May, a health care advocate in June. These two new positions were created in an effort to better handle complaints about hospital care and services for children with AIDS.

Volunteers made important con-

"The work of the Ombudsman Department has been extremely valuable in assisting the Commission in documenting the scope of discrimination in the funeral home industry. Together, we've shown how community organizations and government agencies can cooperate in making a difference in the quality of life for people with AIDS."

AIDS Discrimination Unit
NYC Commission on
Human Rights

tributions to the Ombudsman's Office this past year. One volunteer single-

handedly contacted 600 funeral directors to assess their suitability as referrals for families of persons with AIDS. As a result of this survey, she created a resource list, which has been made available to service providers throughout the city, to help families avoid discriminatory and fraudulent practices during their times of grief. This volunteer's exposure of consumer fraud led to reforms in the state regulation of the funeral industry.

Though the Ombudsman's Office works to improve health care services for people with AIDS, a by-product of this work is the improvement of health care for everyone. GMHC's Ombudsman works with state agencies to revise health codes and standards, and to investigate areas of systematic discrimination. We also work with other AIDS service providers to identify the problems that most often affect client care and to develop ways of improving AIDS services.



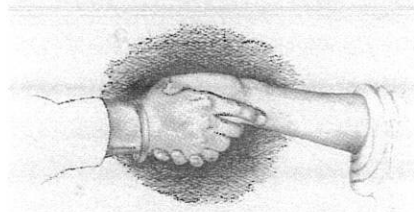
GENE BAGNATO

KAY GLIDDEN

Her work in the Ombudsman's office has included a comprehensive funeral home survey. She also volunteers as a buddy.

"As a nurse, it frustrated me to see AIDS patients leave the hospital without having someone to help them with things like shopping and cooking. When I learned that GMHC provided this service — I decided to volunteer. I've learned so much from this work about the resilience of people and how dignified life really is."

VOLUNTEER OFFICE



The most important activity of the Volunteer Office is the interviewing, screening, and placement of new volunteers. The department receives 200 calls a month from people interested in volunteering at GMHC. Over the phone, we explain possible volunteer functions, then send volunteer applications and a list of the jobs available. Volunteers handling such initial telephone contacts are often experienced in working with clients, and usually provide any information needed by prospective volunteers.

"When the story of New York's AIDS epidemic is written, the self-help effort will be the bright part of it."

Dr. Stephen Joseph
*Commissioner of Health,
New York City*

In the past 12 months, over 1,800 people requested volunteer applications. Of these, 1,000 completed and returned their forms to the Volunteer Office. These applications indicate whether prospective volunteers wish to work with a client or perform departmental support work.

Of the 1,000 people who returned applications, over 450 asked to help in a department support capacity. They were interviewed and referred directly to an appropriate department. The applications of volunteers are kept in the Volunteer Department, coded so that the special skills of the volunteer can best be utilized. The Volunteer Office's files can provide virtually any kind of skill, from hair-dressing to signing for the deaf.

In the last year, another 450 volunteers asked to work directly with a client. After being interviewed in a group with other prospects, new volunteers participate in an intensive three-day training course. Usually, about 75 people take part in each training session; courses are held every six weeks.

The topics include an overview of GMHC's departments, the medical aspects of AIDS, the perspective of a person with AIDS, intravenous drug

use, safer sex, confidentiality, active listening, and bereavement.

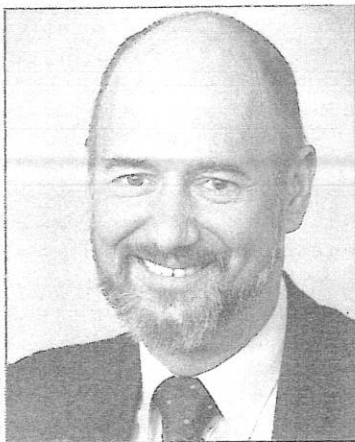
The first day's training is designed to familiarize volunteers with GMHC's structure and give them information about AIDS. The second day focuses on the fears and prejudices, as well as strengths and goals, of the volunteers themselves. This self-evaluation is realized through role-playing, verbal fantasizing, and small group discussions. The third day's training concentrates on the psychological aspects of AIDS, such as suicide, rage, and denial. The entire training program stresses the volunteer's role in empowering the client.

GMHC's training program provides new volunteers with an excellent understanding of the agency, its policies and procedures. Discussions focus on how to deal with the various situations volunteers may encounter in their work. Volunteers are provided GMHC's training manual on the organization's policies and the psychological and practical problems that often accompany AIDS.

After the training, the new volunteer and a member of the Volunteer Department staff decide the most suitable client service work for the new volunteer. This might be working as a buddy, crisis intervention worker, recreation volunteer, or financial advocate.

An average of 60 new volunteers are trained every six weeks. These go on to become the Client Service Department's means of providing direct care. The great majority of volunteers find their work rewarding, despite its difficulty.

GMHC's Volunteer Office also performs a variety of functions for the

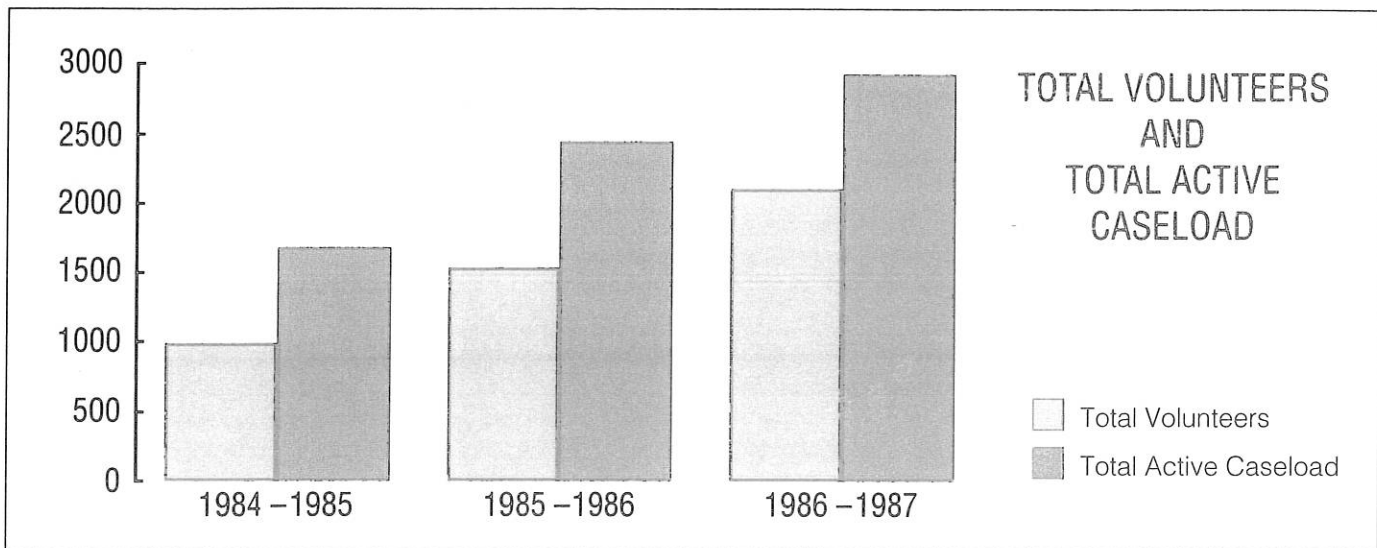


GENE BAGNATO

GUY MILLER

Since February, 1987, Guy has been an office manager in GMHC's Volunteer Office.

"I like doing the support work that makes the organization work. It's the least glamorous work, but maybe the most important."



organization as a whole. It usually provides the first contact prospective volunteers have with GMHC, and thus helps the organization welcome and encourage such volunteers.

Intake volunteers are trained by the Volunteer Office for the sensitive work of responding to a potential client's first phone call or visit to the organization. Intake volunteers must be well-trained in the difficult work of responding to the diverse needs that each new client brings to GMHC. Hundreds of intake volunteers, each with a particular set of skills, are trained for this work.

As the body of knowledge about AIDS has grown, so too has the scope of our ongoing in-service training for volunteers. This past year's seminars included presentations on experimental therapies, new drug treatments for opportunistic infections, and the changing social and political climate associated with AIDS.

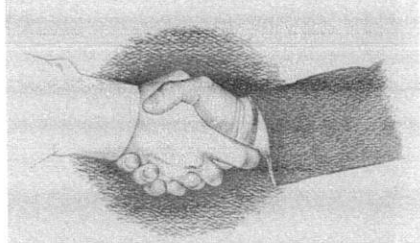
The Volunteer Office is also the central place where other departments leave work to be done by

administrative volunteers. Often, volunteers may not know how they would like to serve GMHC, and opt to work first in the Volunteer Office. This gives them an opportunity to learn more about the organization. All staff members drop by the Volunteer Office on occasion, giving volunteers a chance to meet them and ask questions about other departments' work. Often, after working in the Volunteer Office, volunteers move on to work in Client Services, Education, or on the telephone hotline.

GMHC's Coordinator of Volunteers also contacts the staffs of other AIDS agencies, and has been pleased to give them information on the running of our busy volunteer office. Because of the many years GMHC has been in existence, and because of our great success in mobilizing volunteers, many other agencies want to know how GMHC trains, guides, and supports volunteers as they go about the often trying tasks that make life more comfortable for other human beings in need.

As the number of clients increased so did the number of volunteers. These dedicated men and women are the very lifeblood of the organization and enable the agency to keep up with increasing demands for services.

EDUCATION



"By distributing GMHC's literature throughout the New York Public Library System, we are providing lifesaving information to millions of New Yorkers. This joint project is just one example of how different institutions can successfully work together to achieve a common goal."

New York Public Library

GMHC's provision of many different AIDS-related educational services, first organized late in 1985, went into full swing in 1986-1987. The Education Department's careful preparation has enhanced its ability to meet the challenge of AIDS-related education in the years to come.

Ongoing research by GMHC's staff has provided the first insight anywhere into the relative effectiveness of various educational strategies for increasing the public's knowledge about AIDS, and for modifying attitudes and behaviors associated with HIV transmission. This research provides the basis for current educational programs, replacing earlier programs pressed into use in the face of crisis. In 1986-1987, over 1,500 individuals participated in GMHC's educational research programs.

GMHC's research into the effectiveness of various educational methods and materials has resulted in greater reliance on volunteers. Paid staff now coordinate, supervise, and facilitate the volunteers who actually present the comprehensive educational programs targeted to gay and bisexual men, health care providers, and the general public. Last year, 349 volunteers assisted with curriculum development, materials production, and the presentation of educational programs, as speakers, group leaders, trainers, and peer counselors.

Another important innovation by GMHC is its dissemination of AIDS information and education through preexisting networks that reach into every neighborhood and ethnic community of the city. Our outreach through public libraries and local post offices, for example, has allowed us to

place some of the best educational materials available on AIDS within easy reach of all New Yorkers.

To reach as many people as possible, GMHC presents programs at times and in places where particular targeted audiences gather. Presentations and workshops are sometimes scheduled in the evenings, on weekends and holidays, late at night and early in the morning, and in such

varied locations as schools, shelters, libraries, and bars.

ACHIEVEMENTS

The Education Department's achievements in 1986-1987 are highlighted below:

- ▲ Hotline volunteers, responding to 52,000 telephone calls, provided peer counseling in the form of reassurance, education, support, and referral; the number of calls received in the first three months of 1987 was 52% greater than the number received in the same period in 1986.
- ▲ Thirty-one percent of the total calls received by the hotline were from individuals who identified themselves as heterosexual; 25 percent were from women.
- ▲ Education Department volunteers staffed information tables for 463 events at 160 locations in the five boroughs of New York City. At these events, in addition to peer counseling, the volunteers distributed over 300,000 pieces of GMHC's literature.



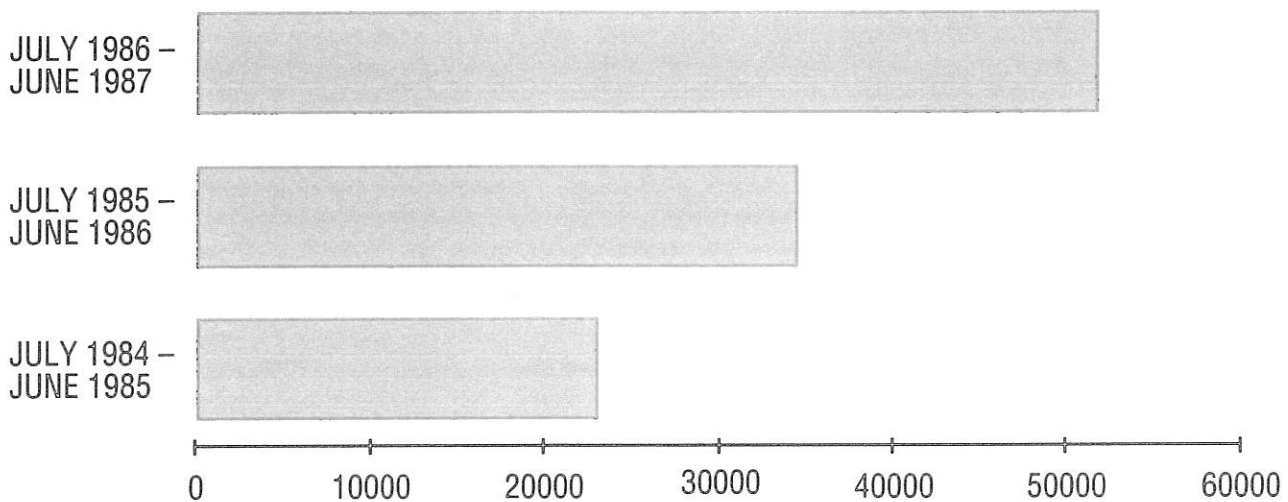
GENE BAGNATO

RAY PAULSEN

Ray, a social worker, has volunteered for Speakers Bureau for 1 1/2 years.

"I treat PWAs in my practice as a psychiatric social worker. In addition to helping PWAs, I wanted to get involved before-the-fact to educate people about how to protect themselves from being exposed to the virus."

ANNUAL TOTAL OF HOTLINE CALLS



- ▲ An active mail-order business for educational literature is conducted by the Education Department. Volunteers responded to 3,380 orders received by mail and telephone, sending out over 300,000 copies of GMHC publications.
- ▲ Access to public libraries for the purpose of literature distribution was obtained in midyear; in the first six months of the program's operation nearly 500,000 pieces of GMHC literature were distributed in Manhattan and Brooklyn public libraries.
- ▲ In all, GMHC produced 35 new publications and distributed 2.5 million copies of our literature.
- ▲ The AIDS Professional Education Program provided numerous edu-

cational sessions for mental health professionals and the clinical support staff of 280 community-based agencies located in the five boroughs of New York; total attendance at those sessions was 2,614.

- ▲ Our Speakers Bureau volunteers made 300 presentations to a total audience of 14,137.
- ▲ Staff and volunteers in the AIDS prevention and research programs gave 139 safer sex workshops and risk-reduction presentations to gay and bisexual men, reaching nearly 10,000 men.

Last year, GMHC incorporated television into its programming. A weekly 30-minute cable news presentation, "Living with AIDS," produced by GMHC, is striving to reach a poten-

FIGHTING FEAR WITH

tial audience of 500,000 Manhattan cable subscribers.

Television has advantages over other educational formats for communicating with certain hard-to-reach populations at risk for AIDS. TV signals pass through ethnic, cultural, and economic barriers that effectively block other forms of communication. Viewers do not risk compromising their anonymity. The more effective use of video, especially in providing technical assistance to other AIDS agencies, is planned for the future.

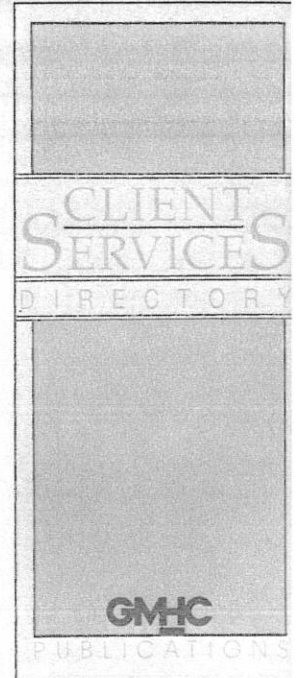
Also last year, the development of an in-house computer system allowed GMHC to evaluate our educational services more precisely and to develop a data base to use for more effective programming. Computers have permitted GMHC to incorporate new information into its educational program without delay.

While GMHC's client service caseload has increased by fairly predictable increments, the qualitative need for AIDS education has also escalated, though less predictably. The need for such education has surged and ebbed as different segments of the public have perceived themselves as vulnerable to AIDS.

The gay and bisexual population was identified at the outset of the epidemic as a threatened subgroup of the general population. Shortly after, intravenous drug users, hemophiliacs, and those who had received blood transfusions prior to April 1985 were added to the high-risk groups. As it became apparent that sexual partners of members of these groups shared their high-risk status, and that babies born to mothers at risk might be infected, increasing numbers of women and a significant group of the "worried well" of both sexes became

PUBLICATIONS

To reach many audiences, GMHC's publications are distributed in a variety of settings: bars, libraries, public health conferences, schools, bathhouses, street fairs and post offices. Brochures address legal issues, women's concerns, the use of condoms, medical questions and the fear of AIDS.



FOREIGN LANGUAGE

Responding to the needs of a multilingual city where everyone needs to know about AIDS, GMHC has made information available in Spanish-language and Chinese-language brochures.



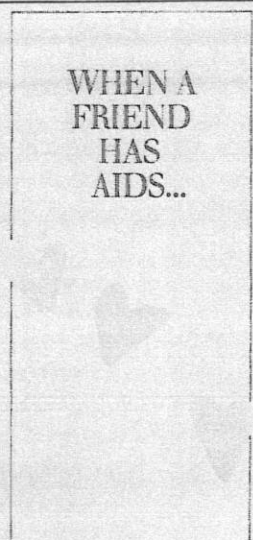
FACTS

Women Need To Know About AIDS



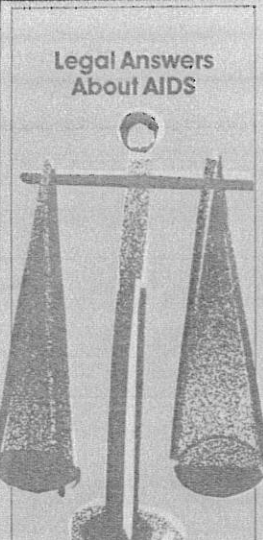
GMHC PUBLICATIONS

WHEN A FRIEND HAS AIDS...



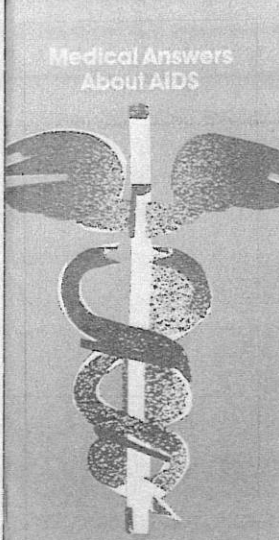
GMHC PUBLICATIONS

Legal Answers About AIDS



GMHC PUBLICATIONS

Medical Answers About AIDS



GMHC PUBLICATIONS

POSTERS

Taking education to the public, GMHC distributed condom posters in gay bars and bathhouses, and on city streets.

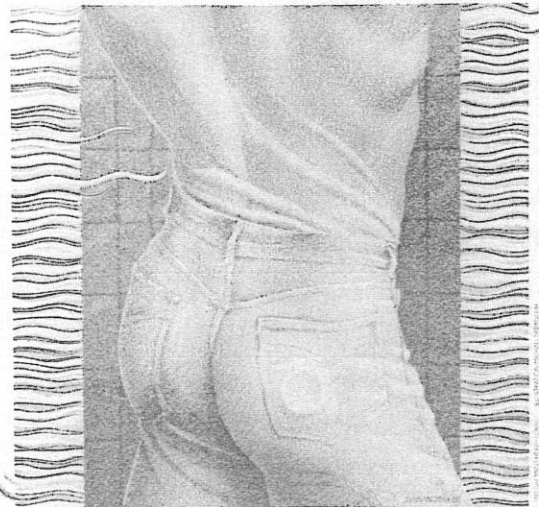
[愛死病] 熱線
AIDS HOTLINE



愛死病是什麼?
愛死病是一種傳染病，它會攻擊你身體本身共有的「安全系統」，使你免疫力下降，使你更容易感染上許多種病毒，甚至致命性的其他傳染病。
愛死病 AIDS 是由四種英文字 AIDS 縮寫成的，它們各自代表之意如下：

- A Acquired 先天性的
- T Immune 免疫力
- D Deficiency 缺乏
- S Syndrome 併發症狀

A RUBBER IS A FRIEND
IN YOUR POCKET



UN AMIGO ES UN CONDÓN
EN EL BOLSILLO

FOR MORE INFORMATION CALL THE
HUMAN RIGHTS/GMHC/CTU... 212-607-6655

candidates for specifically targeted educational programs.

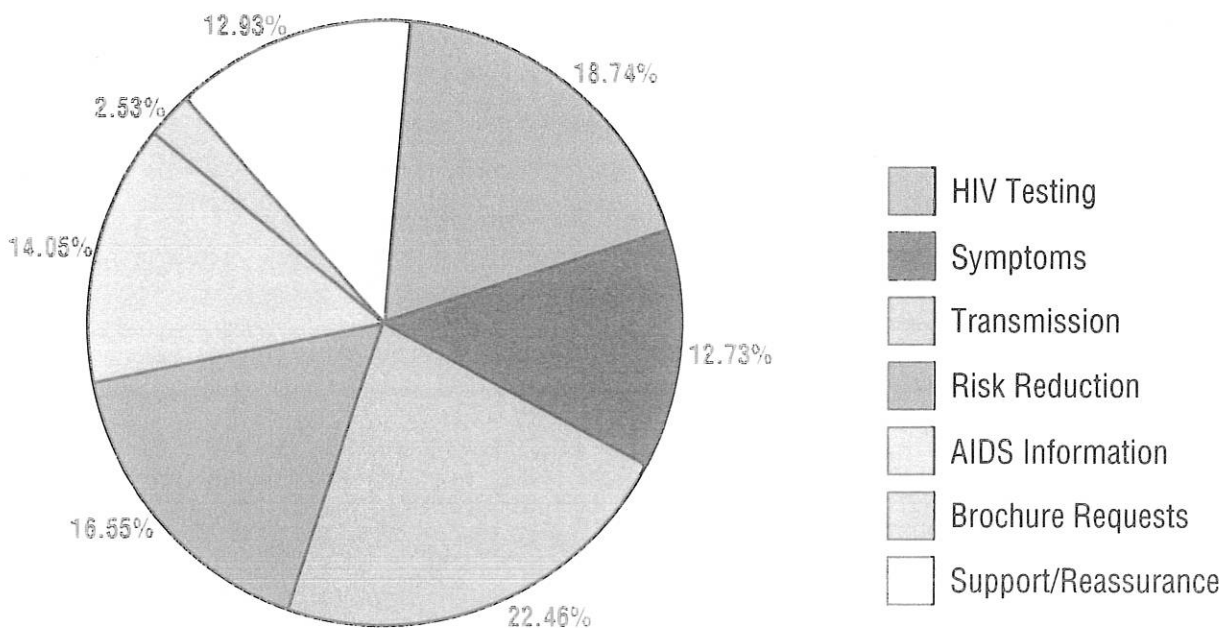
As demands for risk-reduction education change, as new facts are disclosed about the disease's transmission, and as we gain new knowledge about the effect of education on sexual behavior, GMHC's programming will change accordingly.

Providing effective up-to-date educational services costs a great deal. As education assumes a critical role as the major way of reducing and preventing the transmission of AIDS, the need for funds to support this educational work will increase. GMHC staff members are focusing on

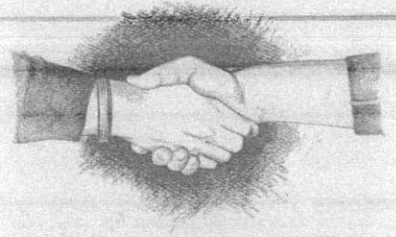
the problem of finding support for the continuation and expansion of our lifesaving educational services.

In 1986-1987, almost 70 percent of the funding for educational services was obtained from foundations, government, and corporate sources. During the year, the Education Department has submitted more than a dozen letters of intent and grant proposals, seeking the increased funding required for 1987-1988 and for the years to come. Positive action on these proposals will help to assure a continuation of the high quality educational services that GMHC and its public demand.

PERCENTAGE BREAKDOWN OF HOTLINE CALLS BY CONTENT



LEGAL SERVICES



Our Legal Services Department supplies free services to people with AIDS or ARC. It is still the only program of its kind in New York City, and one of only a handful of such programs in the entire country. In the last year the department's client caseload has increased 22% over the previous year, the issues it handles have become more complex, and the number of legal matters dealt with for each client has increased. In addition, the department has been active as a policy advocate, not only for the individual with AIDS, but for the community of people with AIDS or ARC, and for those at high risk.

In an effort to meet these challenges, Legal Services has reached out to other community groups — such as Legal Aid and the Lambda Legal Defense & Education Fund — to facilitate referrals to other agencies and to increase its pool of volunteers.

In July 1985, the Legal Services Department had approximately 40 volunteers. After outreach to various minority-group bar associations and other community organizations (such as the Women's Bar Association), the number of volunteer lawyers has risen to about 170. GMHC's volunteer attorneys are the most important resource in this department.

During 1986, the number of complaints regarding employment discrimination declined, as employers became better educated about AIDS transmission, and as suits were successful in establishing that such discrimination was illegal. This decline in employment discrimination complaints occurred in spite of the June 1986 memorandum of the U.S. Justice Department. This memorandum

"GMHC has become a significant voice not only in New York City, but in Albany and Washington as well. Indeed, of all the organizations in the country that provide services to those with AIDS as well as to others, GMHC has become the most vocal, the most sophisticated, and the most influential in the area of public policy. It is an enormous force for good."

Lambda Legal Defense & Education Fund

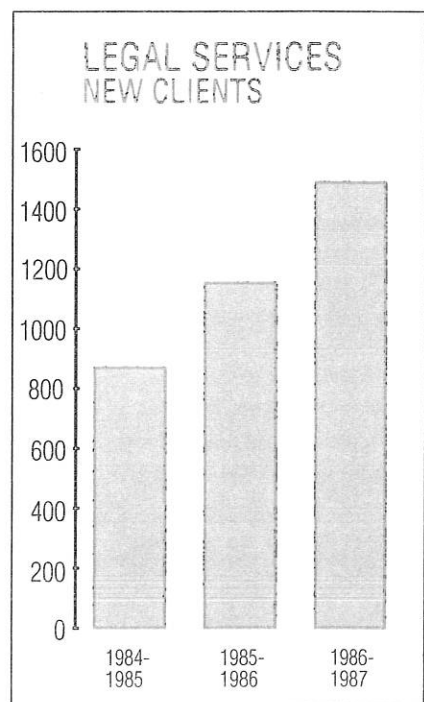
concluded that persons with AIDS could be legally dismissed from employment if their employer feared contagion, however irrational and medically unjustified that fear.

One type of discrimination complaint continued unabated, however — complaints about AIDS-related insurance discrimination. GMHC's Legal Services Department, therefore, worked closely with Lambda and the Governor's office to ban the use of the HIV antibody test by companies issuing health insurance. After two years' work, the initiative was successful; in May 1987, Governor Cuomo banned the use of the test to determine health insurability. This matter is now pending in the courts.

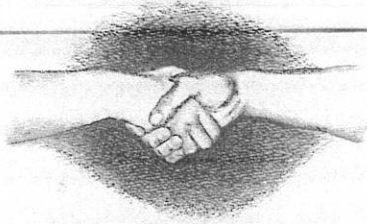
This Department also participated in a number of public forums and

workshops to educate people about AIDS in the workplace, and to help eliminate discrimination on the job. As part of its public education work, the Legal Department in March 1987 published the pamphlet *Legal Answers About AIDS*. The pamphlet is written in an easy-to-follow format and addresses the most common questions of people with AIDS or ARC. By July 1987, 50,000 copies had been distributed.

In spite of these successes, the Legal Service Department's work grows more complex. Persons with AIDS have an increasing need for estate planning, and ask more questions about debtor/creditor and insurance issues, discrimination, and immigration. It takes increasing effort to serve as advocates and legal advisors for the entire community of people concerned about AIDS.



PUBLIC INFORMATION



The Public Information Department's functions are: first, to establish a public identity for GMHC; second, to formulate a public relations strategy for the organization, selecting issues and fostering public interest in those issues; and third, to use that interest and those issues to help shape public policy in response to AIDS. This department helps GMHC establish and maintain its communications with clients, volunteers, the public, and the media.

Last year, the expansion of GMHC's Public Information Department included the appointment of a full-time public information assistant, the development of a public relations committee on GMHC's Board, the recruitment of a managing editor of GMHC's in-house newsletter, *The Volunteer*, and the broadening of GMHC's involvement in a wide range of policy issues requiring public infor-

"Over the past year, NGLTF and GMHC have worked closely to win some key battles. GMHC's staff is essential to our work. Whether we are developing a media strategy to shape AIDS coverage, researching facts to back up our lobbyists' arguments, or devising new ways to pressure the government to act, GMHC is an invaluable resource."

National Gay & Lesbian Task Force

"The nation's most influential AIDS care agency."

Washington Post

mation backup. The Public Information Department works with the organization's policy director, and assists the Ombudsman's and Legal Services staffs in securing media coverage of their activities.

The Public Information Department continues to provide accurate AIDS-related information to a wide variety of local and national reporters, placing many stories on radio, television, and in print. The department has also worked with other AIDS groups and gay and lesbian organizations to develop strategies to ensure accurate reporting about AIDS, and to identify media outlets that have not covered AIDS sufficiently.

In February 1987, the Centers for Disease Control (CDC) announced its recommendation for mandatory HIV antibody testing for certain groups, such as people entering hospitals and all couples applying for marriage licenses. In response, the Public Information Director worked extensively with the National Gay & Lesbian Task Force on a public relations strategy to counteract the CDC's proposal. We provided background information to public health officials who were working on op-ed pieces for a variety of newspapers. We organized a series of press briefings at the CDC's conference in Atlanta, and disseminated comprehensive arguments supporting anonymous testing and counseling. This program was instrumental in maintaining the consensus among public health officials in favor of voluntary, anonymous testing.

GMHC's Legal Services Director also spent countless hours educating the media on the abuses of the antibody test and on many other AIDS-related stories. The Public Informa-

THE VOLUNTEER

The agency maintains contact with volunteers through its bimonthly newsletter. *The Volunteer* features medical information, volunteer profiles, and department updates, as well as news of other AIDS agencies.



CHARLES O'NEAL

tion Department and other departments of GMHC often work together to achieve a better quality of life for people with AIDS, as well as a better-informed public.

In October 1986, the Public Information Director placed a story on insurance discrimination on WABC-TV. This three-part series revealed abuses of the antibody test by the insurance industry, and helped influence Governor Cuomo's decision to ban the use of the test by health insurance companies.

GMHC continues to keep in close touch with a wide variety of media outlets. In the past year, GMHC met twice with the editorial board of the *New York Times*, once with *Newsday*, and numerous other times with NBC News, Nightline, and the *Washington Post*. These meetings have reinforced GMHC's reputation as a leading organization in the fields of AIDS service, education, and advocacy, and have helped improve the quality of AIDS coverage.

The Public Information Department also devised ways for GMHC to communicate more effectively with volunteers. GMHC's in-house newsletter, *The Volunteer*, distributed to over 40,000 individuals, is an integral part of GMHC's communication with its diversified audience.

Next year, the Public Information Director plans to initiate more contacts with black, Hispanic, and women's organizations to discuss upcoming policy issues and the ways different communities respond to these issues. The department will also continue to create stories that communicate a fair and balanced picture of the many policy issues and communities affected by AIDS.

Who Will Pay for AIDS, and How?

All
Of
Society

By Richard Dunne
and Timothy Sweeney

AIDS is hitting hardest at young people entering their peak years of productivity. This loss of productivity is exacerbated by discrimination against employees with AIDS. In our system, insurability is linked to employability. People who are not hired because they are in high-risk groups, or people who are fired for the same reason, are either denied insurance or lose what insurance they have. Stringent confidentiality is therefore required.

Researchers Protest Exclusion Of Homosexuals From AIDS Panel

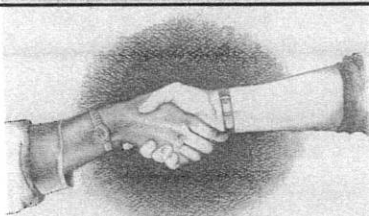
*Letter to Reagan Urges
Rethinking of
Commission's Composition*

By Michael Specter
Washington Post Staff Writer

"It would be an utter waste if the president chooses to ignore our experience, our creativity, our resources and our desire to see an end to this epidemic," said Tim Sweeney, deputy director of New York's Gay Men's Health Crisis, the nation's most influential AIDS care agency. "Over the next five years, tens of thousands of gays will die from AIDS. We have earned a right to be part of any commission that will recommend policy affecting our lives."

GMHC has made alliances in the influential mainstream media, and is looked upon by members of the press as a major, credible source of AIDS information.

PUBLIC POLICY OFFICE



In 1986, to coordinate GMHC's advocacy efforts, we established the position of Deputy Executive Director for Policy. The Director develops policy statements for consideration by the Board of Directors, and is one of the key spokespersons for GMHC on the politics of AIDS. The Director's goal is to translate into public policy recommendations what GMHC has learned in working against AIDS, and to bring these ideas to the attention of local, state, and national policy makers.

Fighting for people with AIDS and their loved ones has always been a central motto of GMHC. Part of that fight is direct advocacy for people affected by AIDS — making sure those people's needs are considered by the public officials who establish policy in society's fight against AIDS.

A number of GMHC's programs include advocacy. The Ombudsman's Office acts on complaints from individuals; this office documents patterns of abuse and discrimination, and pushes agencies to correct such abuse. Examples of such advocacy are the successful discrimination cases against funeral directors, based on complaints made to GMHC's Ombudsman's Office.

GMHC's Legal Services Department documents patterns of discrimination and seeks the systemic changes necessary to end such discrimination. In the spring of 1987, after two years of complaints and negotiations between the New York State Department of Insurance and GMHC's Legal Services Department, the State issued a regulation banning the use of HIV antibody test results to determine health insurability.

The Ombudsman and Legal Serv-

"Gay Men's Health Crisis has been a leader in addressing the multiple human and political problems associated with AIDS. Ours has been an excellent working relationship over the years, and I have always appreciated GMHC's counsel. You can be assured of my continuing advocacy on behalf of GMHC and persons with AIDS in securing the federal legislation, services, and funding necessary to deal with this painful human tragedy."

Congressman Bill Green
15th Congressional District
New York

"By bringing together the leadership of community service organizations, GMHC has provided the coordination to enable the beginning of an invaluable dialogue to take place."

Minority Task Force
on AIDS

ices Director work with the Public Information Department to help set the public policy agenda in regard to AIDS. For example, GMHC's Public Information Department helped to shape the consensus that emerged at the Centers for Disease Control Con-

ference in favor of counseling and voluntary HIV antibody testing as an adjunct to public education.

On the national level, GMHC gives major financial and organizational support to the AIDS Action Council (AAC), our lobbying representative in Washington, D.C. The AAC lobbies Congress, the Administration, and various governmental departments. It is the only national organization established solely for lobbying on AIDS-related issues.

The Council played a central role in obtaining the appropriation of \$1 billion in federal funds for AIDS research, prevention, education, and services in 1988. The Council also lobbied for voluntary testing programs accompanied by appropriate counseling, and comprehensive anti-discrimination and confidentiality protections. The Council also pushed the National Institutes for Health and the Food and Drug Administration to expedite the processing of new trial drugs. Under the auspices of the AIDS Action Council, the GMHC Board, staff members and volunteers have met directly with agency heads and congressional representatives in Washington. GMHC also made a grant to the National Gay and Lesbian Task Force in Washington, D.C. for its AIDS advocacy program.

On the New York State level, a lobbying firm represents GMHC's public policy ideas in Albany. Last year, we presented numerous legislators with basic AIDS information, resulting in the withdrawal or defeat of many misguided mandatory testing bills. Strong state confidentiality protections and increased education and counseling programs were lobbied for by GMHC.

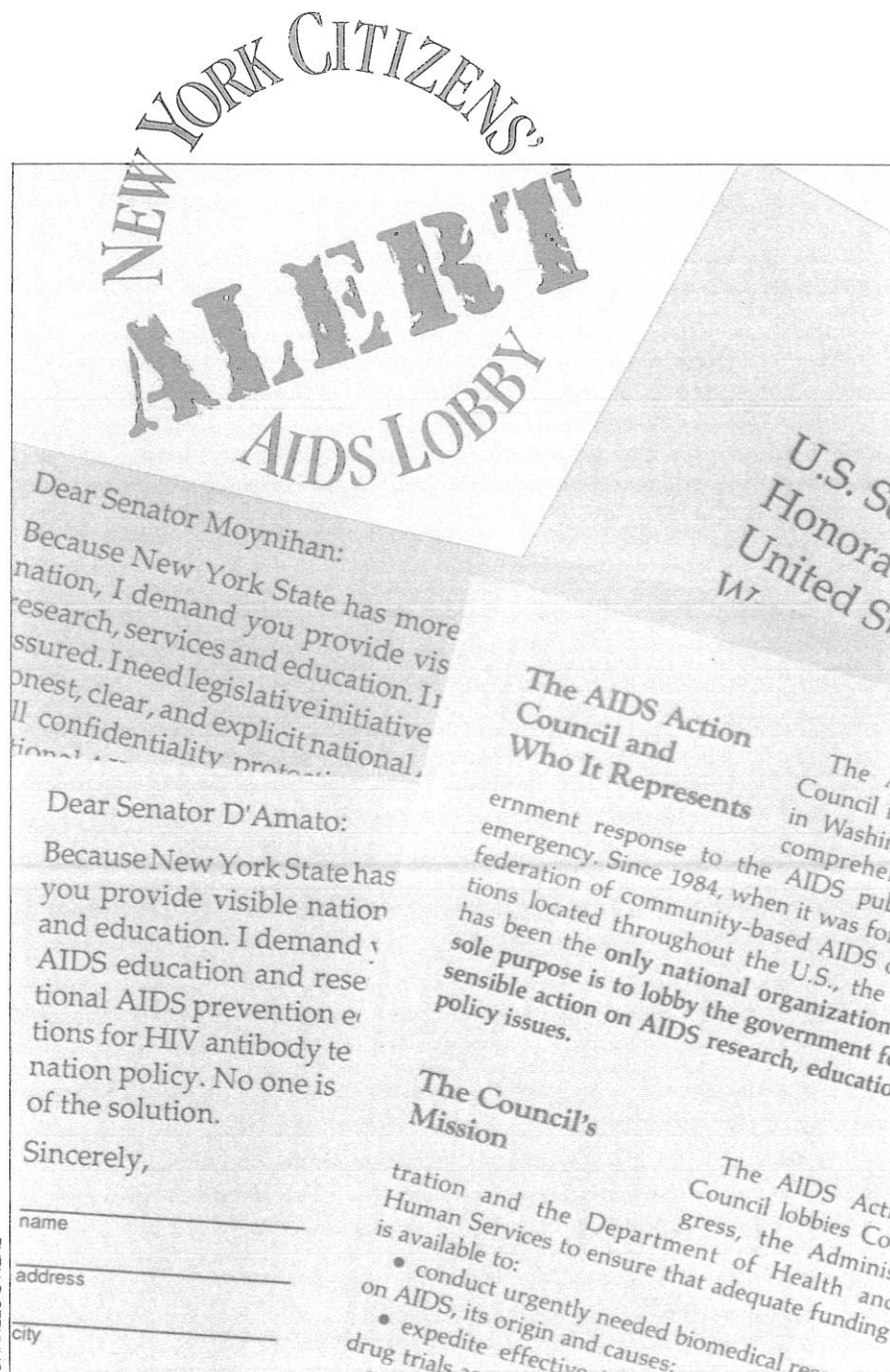
In June 1987, we founded the New York Citizens' AIDS Lobby, a grassroots network that encourages concerned citizens to add their voices to the public debate about AIDS funding and policy by writing letters, making phone calls, and attending in-person lobbying efforts with legislators. Over 2,000 New Yorkers have signed up for this effort.

On the New York City level, we have helped to found the AIDS Service Community Working Group, a coalition of nine AIDS service organizations. The Group includes the Minority Task Force on AIDS, His-

Last year, we presented numerous legislators with basic AIDS information, resulting in the withdrawal or defeat of many misguided mandatory testing bills.

panic AIDS Forum, People with AIDS Coalition, AIDS Resource Center, Institute for the Protection of Lesbian and Gay Youth, the Village Nursing Home, and Community Health Project. This coalition successfully persuaded the City to increase its budget for AIDS services and education by \$4 million. By showing that New York's diverse communities can work together to fight AIDS, we sent a powerful message to elected officials that this illness must be a top political priority.

GMHC's success in serving and empowering a community in need



CHARLES O'NEAL

has inspired many other communities. In the years ahead, we at GMHC will continue to speak out for fair, effective AIDS policies, and will continue to develop and strengthen our political ties with all the groups touched by the AIDS crisis.

Over 2,000 individuals have joined the New York Citizens' AIDS Lobby, which was formed in June 1987 to influence political decision-making on AIDS issues.

DEVELOPMENT

The Development Department is responsible for raising money to support the many programs of GMHC not funded by government contracts. In fiscal year 1986-87, total income reached a record \$6.58 million, an increase of 179% over the previous fiscal period.

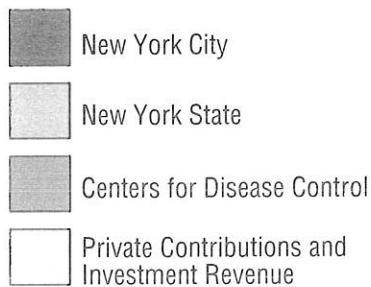
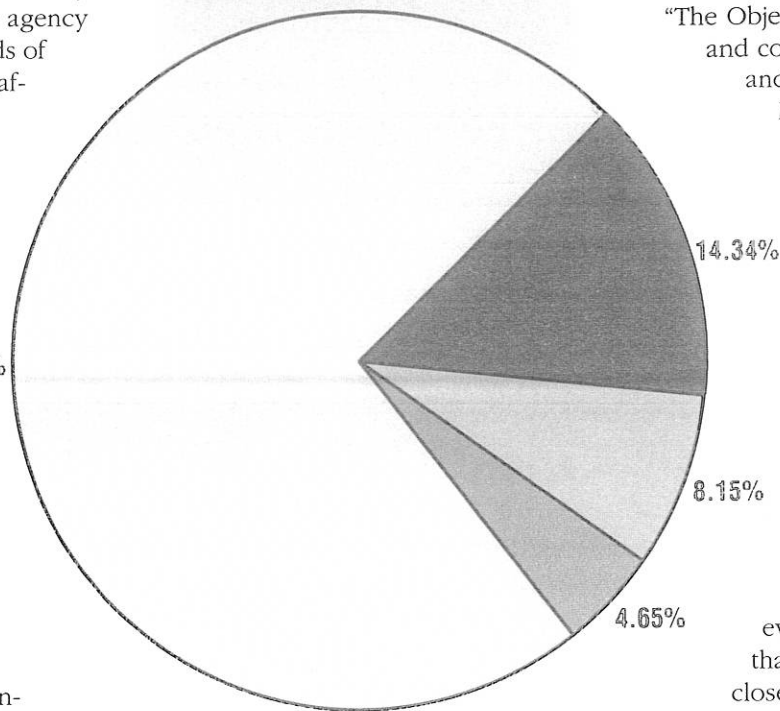
Through the incredible generosity of thousands of people, the agency was able to meet the demands of an ever-growing population affected by AIDS, and to provide needed education to many sectors of society.

Government funding represented only 26% of GMHC's 12-month income for fiscal year 1986-87. Contracts were received from the Centers for Disease Control, the New York State AIDS Institute, the New York City Department of Health, the New York City Department of Mental Health, and the New York City Human Resources Administration. While government support rose in 1986-87, nearing \$1.5 million, it expanded at a slower rate than the overall budget of GMHC.

As in the past, benefits and special events yielded the highest proportion of income for 1986-87. Many large and small events were held during the year, bringing in well over \$2 million.

On May 17, GMHC's second walkathon, AIDS Walk New York, broke all records for AIDS fundraising events. Twelve thousand walkers, sponsored by 88,000 individuals, raised over \$1.61 million for GMHC's

FUNDING
JULY 1986 - JUNE 1987



client services and education programs. Beautiful weather, hundreds of dedicated volunteers, and thousands of committed walkers made AIDS Walk New York a truly memorable event.

On February 11, 1987 GMHC's annual benefit art auction was held at Sotheby's. This year's theme was "The Object as Art," with antique and contemporary decorative and applied art featured.

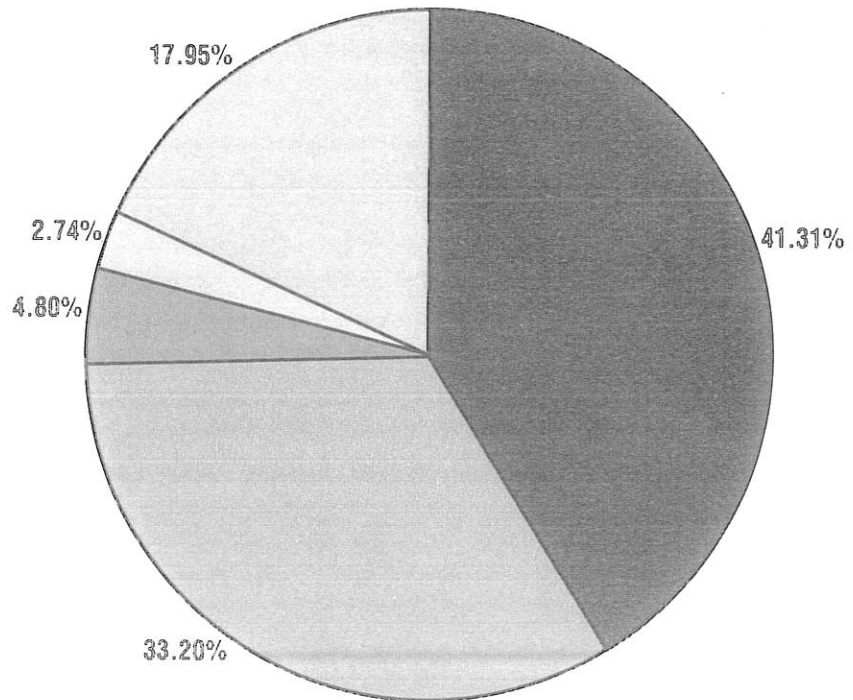
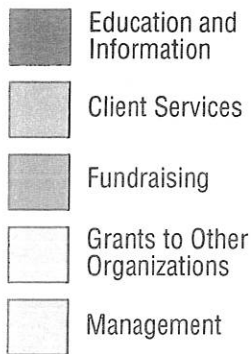
Many notable potters, furniture-makers, and decorative artists donated their work, including Ralph Bacerra, Robert Mapplethorpe, Eliel Saarinen, Beatrice Wood, and Betty Woodman. The auction

was chaired by Garth Clark, Robert Woolley, Matthew Schutz, and Edward De Pasquale. The event proved so popular that ticket sales had to be closed out prior to the auction. Nearly 1,000 tickets, priced from \$75 to \$5,000, were sold. 185 works were successfully bid on. Together with ticket sales, the event grossed \$530,000.

Individual contributions, including the Benefactors Project, memorial donations, and direct mail, yield 30% of GMHC's annual income, or \$1.7 million. The newly created Benefactors Project became a worthwhile vehicle for individuals to make substantial contributions by spreading out their pledges over a 12-month period. As in the past, memorial contribu-

EXPENSES

JULY 1986 - JUNE 1987



tions proved a fitting way in which to honor a loved one who had died. Surpassing all expectations, direct mail yielded one of the highest proportions of income for 1986-87. GMHC was cited by the Direct Marketing Association for its appeals and response rates. This program will undergo significant expansion in 1987-88. Unsolicited individual donations continued to be a substantial source of income for GMHC. In the summer of 1987, GMHC became a member agency of the United Way.

1986-87 saw a dramatic increase in foundation support. Among the new corporate donors were MONY Financial Services, AT&T and Ameri-

can Express. Corporate support totaled \$85,000 from nine donors. Foundations — thirty-three in all — donated \$227,000 to GMHC. Major foundation sponsors included Tisch, van Ameringen, Samuel and May Rudin, Ittleson, Frederick Richmond and the Laurents Foundation.

Finally, the GMHC Building Fund was established to raise capital funds for our new headquarters at 129 West 20th Street. Chaired by Sam Watters, this Committee is seeking to raise \$4.7 million by early 1988, the date of expected occupancy.

LETTER FROM THE TREASURER

The past fiscal year has been one of rapid organizational growth for GMHC. As the health crisis has exploded, so has the need for services to people with AIDS and their care partners and families. The agency's client caseload has doubled, with rapidly growing demand for legal and financial assistance, as well as ongoing support by buddies, groups, and the telephone hotline. In addition to direct client services, educational outreach activities have been dramatically expanded. We have embarked on a project with the New York Public Library System, whereby our publications are being distributed to over 200 branches throughout Manhattan, Brooklyn, and Queens and to 15 correctional facilities. Literature tables are staffed weekly at 3 general post offices in Manhattan and the Bronx. In just one year, we have distributed over 2.5 million pieces of literature. Knowledge is one of our greatest weapons in slowing the spread of AIDS and fostering a more supportive environment for those who are in crisis.

All of these services have grown at a time when the public sector is still slow to respond, and government contracts account for a shrinking percentage of GMHC's revenues. We are more dependent than ever on private funding sources, particularly as we expand into areas which do not lend themselves to government financing and where an independent voice is crucial. GMHC's advocacy role is three-fold: to promote better care and treatment of people with AIDS; to combat discrimination against all people affected by AIDS; and to pressure city, state, and federal governments to allocate more funding for AIDS education, research, and treatment.

All these activities require substantial amounts of funding, and we have been fortunate to obtain support from increasing numbers of generous contributors. In just one year, our contributors have increased from 11,000 to 28,000, with an additional 100,000 walkathon donors. This has allowed GMHC to have an ongoing surplus, a major source of financial stability throughout the crisis. The marshalling of resources has allowed us to undertake the heavy responsibility of purchasing and renovating a building in order to house all our programs under one roof. It has also provided a base from which to expand existing programs and add new ones in response to increased demands of the community. Finally, it has ensured that we have never been forced to turn away a client for lack of funds. As we all endeavor to bring this epidemic to an end, Gay Men's Health Crisis is committed to being there as long as we are needed.



Bernard L. See, Treasurer
*Board of Directors
Gay Men's Health Crisis*

Joseph R Concilio

Certified Public Accountant

236 West 26th Street Suite 7SW New York New York 10001 212 924-3838

**BOARD OF DIRECTORS
GAY MEN'S HEALTH CRISIS, INC.
NEW YORK, NEW YORK**

I have examined the Statement of Assets, Liabilities and Fund Balances of Gay Men's Health Crisis, Inc. at June 30, 1987 and the related Statements of Public Support, Revenue Received and Expenses and Changes in Fund Balances for the year then ended. My examination was made in accordance with generally accepted auditing standards, and accordingly included such tests of the accounting records, and such other auditing procedures as I considered necessary in the circumstances.

In my opinion, the accompanying Statements present fairly the Assets, Liabilities and Fund Balances of Gay Men's Health Crisis, Inc. at June 30, 1987 and the Public Support, Revenue Received and Expenses and Changes in Fund Balances during the year then ended.

New York, New York
September 14, 1987

Joseph R. Concilio

**STATEMENT OF ASSETS, LIABILITIES,
AND FUND BALANCES**
GAY MEN'S HEALTH CRISIS, INC.
JUNE 30, 1987

ASSETS

CURRENT ASSETS

Cash			
	Restricted for Building Fund Purposes	\$ 2,034,502	
	Restricted for Program Development	500,000	
	Unrestricted	113,992	
	TOTAL CASH		2,648,494
Grants Receivable			301,585
Other Current Assets			2,080
			<hr/>
	Total Current Assets		2,952,159

OTHER ASSETS

Fixed assets — at cost —			
	net of accumulated depreciation of \$133,971	\$ 4,770,286	
Deposits		42,389	
			<hr/>
	Total Other Assets		4,812,675

TOTAL ASSETS

\$ 7,764,834

LIABILITIES AND FUND BALANCES

CURRENT LIABILITIES

Accounts Payable & Accrued Expenses	33,420	
Installment Obligations	1,436	
		<hr/>
	Total Current Liabilities	34,856

LONG TERM LIABILITIES

Mortgages Payable — See Note F		2,300,000
		<hr/>
	Total Liabilities	2,334,856

FUND BALANCES

Unrestricted			
	Designated by GMHC's Governing Board:		
	Building Fund — See Note C2	2,034,502	
	Program Development Fund	500,000	
	TOTAL DESIGNATED BY GMHC'S GOVERNING BOARD		2,534,502
	Undesignated		2,810,909
			<hr/>
			84,567
Restricted			<hr/>
	Total Fund Balances		5,429,978

TOTAL LIABILITIES AND FUND BALANCES

\$ 7,764,834

SEE NOTES TO FINANCIAL STATEMENTS

PROGRAM DEVELOPMENT FUND

The program development fund is a reserve fund for the expansion of existing services and programs or for the creation of new or It was established to ensure that GMHC would be able to respond quickly to the changing needs of the community and ensures that the agency does not have to engage in the process of seeking funds from outside sources. Rather, it enables the organization to establish a program immediately and does not restrict how GMHC uses the funds.

The following programs are examples of how the Program Development Fund would be used. These programs were developed prior to the establishment of the Fund.

The approval of AZT by the Food & Drug Administration brought in a flood of requests for information on drug costs, availability and toxicity levels. GMHC had to respond quickly to the need to provide timely, accurate information to people with AIDS. The establishment of GMHC's Medical Information Program, headed by Dr. Barry Ginsberg, is one example of how these funds can be used. The program, implemented in July, 1987, provides comprehensive information on experimental drugs to clients, volunteers, and the community. The establishment of this program is a timely manner the latest information on antivirals, immunomodulators, and treatments for opportunistic infections.

The countless hours of service volunteered to the organization by selfless men and women is GMHC's greatest strength. The agency recognized the need — through feedback from volunteers and the community — to respond more fully to volunteer needs to assess the organization's volunteer structure. A consultant was retained to develop

**STATEMENT OF PUBLIC SUPPORT, REVENUE RECEIVED
AND EXPENSES AND CHANGES IN FUND BALANCE
GAY MEN'S HEALTH CRISIS, INC.
YEAR ENDED JUNE 30, 1987**

PUBLIC SUPPORT AND REVENUE RECEIVED	RESTRICTED FUND	UNRESTRICTED FUND	TOTAL ALL FUNDS
PUBLIC SUPPORT			
Contributions	\$ 459,720	\$ 901,235	\$ 1,360,955
Direct Mail Campaign	0	723,490	723,490
Publications Sales	0	16,737	16,737
Coinbox Solicitation	0	34,098	34,098
Established Memorial Funds	0	197,538	197,538
Outside Benefits, Grants & Special	0	1,954,932	1,954,932
Government Grants	1,623,773	0	1,623,773
Total Public Support	2,083,493	3,828,030	5,911,523
REVENUE RECEIVED			
Investment Income	8,102	63,648	71,750
Total Revenue Received	8,102	63,648	71,750
TOTAL PUBLIC SUPPORT AND REVENUE RECEIVED	2,091,595	3,891,678	5,983,273
EXPENSES			
PROGRAM SERVICES			
Persons with AIDS and Clinical Services	834,367	189,377	1,023,744
Public Information and Education	1,003,398	343,605	1,347,003
Total Program Services	1,837,765	532,982	2,370,747
SUPPORTING SERVICES			
Management and General	20,000	530,982	550,982
Total Supporting Services	20,000	530,982	550,982
FUNDRAISING	0	147,346	147,346
Total Fundraising	0	147,346	147,346
TOTAL EXPENSES	1,857,765	1,211,310	3,069,075
EXCESS OF PUBLIC SUPPORT AND REVENUE RECEIVED OVER EXPENSES			
	233,830	2,680,368	2,914,198
FUND BALANCE AS OF JULY 1, 1986	49,351	2,223,435	2,272,786
Add: Adjustment to Restate Fund Balance as of June 30, 1986 on Accrual Basis - See Note G	0	242,994	242,994
Building Fund Spending from Restricted Funds	(198,614)	198,614	0
FUND BALANCE AS OF JUNE 30, 1987	\$84,567	\$5,345,411	\$5,429,978

See Notes To Financial Statements

and implement a volunteer survey of how volunteers interface with GMHC, how they feel about the agency, and how they utilize its resources. This is another example of how this money can be used to enhance GMHC's services and programs.

GMHC will continue to maintain a reserve of money against unpredictable governmental support. It is this foresight that will allow the agency to continue to adapt to the increased and diversified challenges presented by the AIDS epidemic. Unexpected medical developments will occur in the AIDS epidemic and GMHC must have the ability to respond quickly.

PURCHASE OF NEW BUILDING

In early 1988, GMHC will move into its new home on 20th Street and will bring together programs and services now scattered among five locations. This move is essential for the efficient management of our expanding organization and the convenience of clients and volunteers. The decision to make the \$6 million purchase and renovation of the new six floor building which will house GMHC was made after an exhaustive review of the available alternatives for renting adequate space. Since rentals were difficult to find and are projected to become increasingly expensive in the coming years, this purchase is further evidence of GMHC's commitment to serve the community.

Capital funds for the building renovation (estimated to cost \$3.0 million) are being raised through the Major Donors Campaign. Sizeable contributions, which may be given over a three-year period, are being sought from individuals and corporate and foundation donors. These funds will be used to complete the renovation, and to the extent possible, to repay a portion of our \$2.3 million outstanding mortgages.

STATEMENT OF FUNCTIONAL EXPENSES
GAY MEN'S HEALTH CRISIS, INC.
YEAR ENDED JUNE 30, 1987

	PROGRAM SERVICES	SUPPORTING SERVICES	FUNDRAISING	TOTAL EXPENDITURES
	PERSONS WITH AIDS AND CLIENT SERVICES	PUBLIC INFORMATION AND EDUCATION	MANAGEMENT AND GENERAL	
Staff Compensation	\$ 592,018	\$ 488,518	\$ 249,136	\$ 1,390,899
Employee Health Benefits & Payroll Taxes	86,683	60,258	35,018	195,365
Professional Fees & Consultations	20,998	131,272	37,704	195,725
Supplies & Stationery	23,104	101,255	7,023	136,958
Telephone	23,179	27,461	8,943	63,521
Hotline Expenses	0	16,103	0	16,103
Postage & Shipping	7,844	15,804	3,309	42,630
Occupancy	103,079	66,889	30,286	201,665
Printing & Publications	21,438	195,341	3,363	233,533
Travel	9,556	17,042	1,225	29,852
Advertising	0	6,883	28,345	35,228
Grants & Allocations to Other Service Organizations	4,850	79,275	0	84,125
Volunteer Training & Related Costs	10,462	30,211	8,976	49,649
Staff/Board Expenses	1,940	3,685	50,411	56,036
Direct Financial Aid				
PWA Recreational Activities	92,603	0	0	92,603
Public Forums & Expenses	0	60,231	0	60,231
Insurance	3,369	0	21,455	24,824
Equipment Maintenance	0	14,142	10,693	36,101
Dues, Subscriptions, & Fees	0	6,442	3,207	11,085
Direct Lobbying Expenses	0	0	18,696	18,696
Miscellaneous	585	5,414	19,341	31,286
TOTAL EXPENSES BEFORE DEPRECIATION	1,001,708	1,326,226	537,131	3,006,115
Depreciation	22,036	20,777	13,851	62,960
TOTAL FUNCTIONAL EXPENSES	\$ 1,023,744	\$ 1,347,003	\$ 550,982	\$ 3,069,075

SEE NOTES TO FINANCIAL STATEMENTS

NOTES TO FINANCIAL STATEMENTS

NOTE A — ORGANIZATION

Gay Men's Health Crisis, Inc. ("GMHC") was incorporated under New York State law on June 25, 1982, and created for the purpose of advancing the scientific and public knowledge and treatment of diseases associated with defects in the body's immune system affecting the gay community, including support for medical research aimed at curing and treating such diseases, support for clinical programs for the medical and psychological treatment of persons affected with such diseases, and providing information to the public about such diseases and their treatment.

NOTE B — SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The financial statements have been prepared in accordance with the American Institute of Certified Public Accountants' industry audit guide, "Audits for Voluntary Health and Welfare Organizations."

NOTE C — FINANCIAL COMMITMENTS

1. Operating Lease

During 1984, GMHC entered into a lease for premises with minimum annual rental commitment under said operating lease of:

1984 - 89	\$174,000.00
1989 - 94	204,000.00
1994 - 99	252,000.00

2. Building Renovation

GMHC is in the process of renovating its facility on West 20th Street, New York, NY (See Note F). The cost of the renovation will be approximately \$3,000,000.00 and it is expected that such work will be completed by June 30, 1988.

NOTE D — DONATED SERVICES

No amounts have been reflected in the statements for donated services. GMHC has valued such services at \$1,880,694 for grant reporting purposes.

NOTE E — TAX-EXEMPT STATUS

GMHC has obtained a ruling from the Internal Revenue Service which states that it is qualified to operate as a publicly supported organization as defined by the Internal Revenue Code, and is exempt from taxation under section 501 (c) (3) of the code.

NOTE F— MORTGAGE PAYABLE

On June 12, 1986 GMHC acquired the land and building ("The Property") located at 129-133 West

GAY MEN'S HEALTH CRISIS, INC.

20th Street, New York, New York. The Property is encumbered by the following two mortgages:

A. The first mortgage is held by Amalgamated Bank of New York in the principal sum of \$1,500,000. Payments of interest only at the annual rate of 12.5% are being made on this mortgage which matures on November 1, 1988 at which time the unpaid balance of \$1,500,000 plus any unpaid interest will be due.

B. The second mortgage, which is subordinated to the first mortgage, is held by Three Pyramids Realty Co. in the principal sum of \$800,000. Payments of interest only at the annual rate of 12.5% are being made on this mortgage which matures on July 1, 1991 at which time the principal sum of \$800,000 plus any unpaid interest will be due.

NOTE G — FUND BALANCE

GMHC's financial statements as of June 30, 1986 were presented on a cash basis. The statements as of June 30, 1987 are presented on an accrual basis. Accordingly, an adjustment to the fund balance in the amount of \$242,994 was necessary to restate the fund balance as of June 30, 1986 on an accrual basis.

AIDS is truly everyone's problem. In the coming year GMHC will expand our endeavors by supporting the work of others — training AIDS prevention educators, providing technical assistance to other volunteer programs, working in coalition with community-based organizations on policy issues.

Over the past six years, we have come to expect the unexpected. Prime organizational virtues are flexibility and responsiveness to the changing nature of the epidemic. As our clients began to live longer, we strengthened our financial, legal, and recreation services. As different populations were hit by illness, we added a pediatrics program, expanded our health care advocacy, and formed partnerships with health-related groups, physicians, and a variety of community organizations.

We will continue to anticipate and respond to the vagaries of the epidemic — through service, through education and through advocacy. With hard work, love and imagination, GMHC has successfully mobilized a community against a tragic epidemic. GMHC has earned unprecedented respect for the people who built it. But even as funds are raised, medical advances made, services and education delivered, and governments moved, we remain true to our original vision: we are a community of caring, a community of concern. We will make our voices heard for the people we love.

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