



# **Our Annual Report**

**2024**



# **ACET**

EDUCATING AND CARING



## CEO's Report

A question our world is pondering at this fraught and complex time is — what can Artificial Intelligence (AI) not do? One fascinating answer which has emerged is that AI has great difficulty forgetting. AI does not copy information into memory, thereby allowing us to delete data from storage. Rather, it trains information into its neural networks, unlearning becomes like removing a particular ingredient from a baked cake. As a result of not forgetting, it does not need to remember. In the Bible the Hebrew word for remembering is *Zakhor* (זָכַר). It is often given as a strong command to a people and it is intimately tied to the reality of relationship — with neighbours, with friends, with enemies and with God — they are living, embodied, dynamic relationships where, unlike with AI, we move in rhythms of forgetting and remembering.

2024 was a year of much remembering in ACET Ireland. In this Annual Report you will read news of our Care Team carrying out a review of their work, pondering the question of the project's relevance in the midst of ongoing HIV treatment improvements. You will see many activities related to a returning and remembering of our roots from Luky's engagement with the intersection of drug use in the community he serves to Aishling's first full year of Positive Youth Project. Wendy's visit to Zimbabwe and her detailed reports from a place we can often forget act as a poignant reminder of our global focus. A more local home in the North East Inner City was subject to much reflection in the year that followed the Dublin riot of November 2023.

HIV's current moment runs deep with the paradox of remembrance. Astonishing treatment advances continue to progress us forward and yet the structural and systemic challenges which inform the stories of the past 40+ years remain as pertinent as ever and bring us back to the start. Thank you to all our supporters and funders who make possible our work in this paradox.



— **Richard Carson**

*"I feel really supported,  
like I can tell you anything  
and you won't judge me."*

It is important to us to give the clients' voice in this annual report: you will see quotes from them throughout these pages.



# ACET Care Work

*We in ACET work with people living with and affected by HIV and are supervised, funded and monitored by the HSE.*

A new year is a blank canvas although there are always reoccurring themes, some hopeful, others challenging.

The year 2024 started with increased levels of violence and unrest in the communities where we work. When this happens, we make safety plans, protecting basic needs like medical care and access to resources such as food and accommodation, and minimising personal repercussions. **A consistent presence rooted in trust and mutuality is one of the most valuable resources our care work can offer when safety is a concern.**

## ACET 2024 Care Work



886 adult care  
visits  
+ 45 volunteer-led  
visits



18 Quilt  
group  
meetings

"It doesn't feel as scary having you go  
with me – it's good to feel less afraid."



202 family and  
youth sessions



61 counselling  
sessions

"It's nice to have a space where I speak  
openly about my HIV, like I'm normal."



111 Positive  
Youth Project  
1:1 sessions  
+ 2 group sessions



80 times of  
respite, including  
1/2 day outings  
and family camp

We work to improve the lives of those living with and  
affected by HIV who, as a result of profound stigma and  
health exclusion, require our approach of mutuality,  
patience and presence.

THIS HAS BEEN CREATED WITH IMAGES FROM PFLAID.COM

Looking at safety highlighted an ongoing challenge in our work: accommodation. The limited options for transfers and extremely long waiting lists are frustrating for tenants and support services. While this is not a new trend, there is pressure on clients to house family members or friends without stable accommodation. This has a knock-on effect on finances and domestic stability; there are repercussions from tenancy boards and housing councils who have contracts to uphold. We supported a couple of client families through disciplinary meetings and renegotiating boundaried contracts to maintain their properties, all while empathising with their particularly complex living situations.

For those who are in emergency accommodation, the pressure of communal living with high levels of drug dealing, antisocial behaviour and other concerns was very evident in 2024. We heard of many people not feeling safe in the city centre. Drug-related intimidation remains high; a number of threats and incidents of violent behaviour were reported during this time.

Some clients spent prolonged periods in hospital receiving mental health support. During Covid we noted a significant increase in drug relapses,



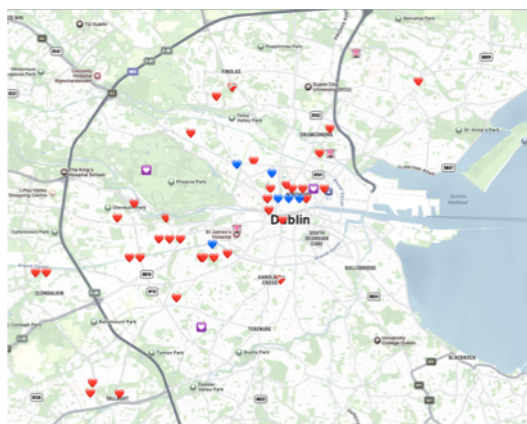
*View from a  
hospital room.*



violence, isolated living conditions and debt-related intimidation. A couple of years on, the catastrophic impact this had on mental health has become truly evident. The extended wait periods for receiving treatment for community detox and stabilisation services puts pressure on families and brings hopelessness for the individual waiting, often heightening the initial need for treatment. Psychosis, delirium, self harm, depression, anxiety and overdoses requiring treatment or in-patient care were some of the challenges.

Cost of living increases have been felt year after year recently, with 2024 being no exception. Food, clothing and basic household needs felt the pinch with difficult choices between heating and groceries, something that we often

*Continued on page 5*



♥ = Care client areas    ♥ = Service partners (Rialto Community Drug Team, Paddy McGrath Housing, Dublin Simon Respite, Talbot Centre, HIV Ireland)    ♥ = ACET Office, AIDS Memorial, Terrie's Kitchen Table    🏠 = HIV Clinics (GUIDE, Mater, Beaumont)    ♥ = Gravesites (Harold's Cross, Glasnevin)

## Places & Spaces:

Because we work through a community-focused lens, caring happens wherever the individual's world lies. Our work takes place across a kitchen table, on a Luas, in a local park or waiting room, through voice notes left on WhatsApp, sitting together in a case management meeting, or attending a memorial service in the local community. This map gives a glimpse of where a typical week might take us: visiting someone, meeting with a partnering organisation, catching up with colleagues in the ACET office, or accompanying someone to a hospital. There are many paths trodden in the 30+ years of ACET care and memories of people and organisations have left their mark.

*This map of Dublin has been generalised such that any implication of where a client resides is entirely coincidental.*

*Maps are useful in telling a story, although, as the geographer Doreen Massey reminds us, they can be static and fail to tell that our stories are ongoing and wrapped up in the passage of time. This map must acknowledge that there are hundreds of local and global interactions at play in the place that is Dublin and that we alter the places we work, for better or worse, with every encounter.*



addressed during care visits. We saw an increase in accessing community supports such as food banks and St Vincent DePaul's vouchers, which can cause guilt or shame.

Strengthening relationships is a vital component of care support and was a constant theme throughout the year. Caring for the whole person in their own world often means supporting existing

relationships, both in the home and community. It also means identifying and creating new relationships that can meet other needs, such as community support: drop-in projects, counselling services or medical social workers. We continued our relationships with HIV clinics throughout Dublin, such as the GUIDE at St James' Hospital and the Mater Hospital. As well, we have been building up partner and stakeholder relationships throughout Dublin, informing services and organisations of who ACET is and how we work, exploring how we might work best together for those we support.

**HIV-related support is an ongoing thread** throughout the year, with regular conversations about medication access and adherence or experiences of stigma. Every client living with HIV has a unique story of how taking medication affects daily life or how HIV impacts their physical, mental and emotional wellbeing. Our support accompanies them from home (often linking with family as well), to community and medical professionals such as their GP, clinicians and health and social inclusion teams.

Hospital appointments have become less frequent, with most clients presenting every four to six months rather than every second month. While this works well for many, for others it means missed health screenings, ignored medical symptoms, and self-prescribing between appointments.

*"I don't think it's really hit that I don't have to take my tablets anymore, I feel so much has changed for me in this last year."*

As a result, our care team prioritise our community health focus, particularly relating to HIV. We saw increasing pressures on GP services throughout the year and the isolation of clients who struggle with mobility and respiratory issues, resulting in limited access to vital resources. Many of those we support are also ageing with HIV, highlighting different needs and

levels of care, especially while navigating the limitations within the healthcare system.

*"You know me, I don't be turning to people to talk to but you've seen it all over the years, you get it. Other people don't get it."*



Spring and summer always bring new opportunities for respite; better weather and longer, brighter days make it possible to meet in green or blue spaces, outdoor cafes, a back garden, or at a gravesite to lay flowers. During these seasons, there was a theme of decluttering physical spaces, such as homes, creating opportunities for personal or family DIY projects. In the same way, some clients were interested in mental decluttering: pruning away habits or unhelpful relationships that were no longer beneficial, especially in the context of physical and mental health.

Throughout this time the care team reflected on our current capacity for new referrals, how we support individuals, and how best to offer this support. Because our care relationships are so valuable to us with relationships built over many years, this has been a series of reflections and discussions on why ACET's care work exists in the first place, how we care and who we care for. We created a leaflet for new referrals, placing an emphasis on individuals who have little to no support around living with HIV. We highlighted health advocacy, practical support (based on personal care plans and referrals to other appropriate agencies), and emotional support —confidential discussions in safe spaces on various themes such as stigma, family dynamics, addiction, grief and loss.



The year closed with the special tradition of Christmas hampers. Hampers are tailored to each individual or family and delivered to their homes to help meet practical needs coming into the Christmas season. The winter months have their own difficulties, such as increased fuel costs, along with the aftermath of Christmas expenses. Just as in other years, this season was challenging for many we support, as grief and memories of deceased loved ones were threaded throughout, but the hampers helped brighten some of that darkness. We are grateful to our partnering local churches and individuals who generously give each year.

As always, our care work is a collaborative effort. Each year is different, yet with so many familiar themes.

ACET care team are **Hansi Chisnall** (left) and **Olivia Corbett** (right).







## ACET Care: Quilt Group and Positive Youth Project

### Quilt Group — Thirty Years

In 2023 the quilt group had been running for 30 years and a celebration was planned to mark this event. The group had long discussions around format and representation, making sure that the work was inclusive of the 30 years.

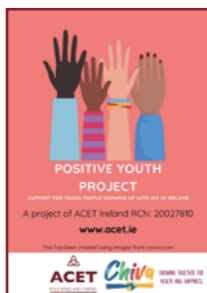


As the stories began to unravel and memories flooded back, it became obvious that this indeed was a substantial piece of social history in the south inner city. During the planning, the group was approached to make a podcast around the formation and longstanding existence of the project. This podcast, Poz Vibe, hosted by Veda Lady and Robbie Lawlor, was widely acclaimed and reached a wide audience.

The long-awaited celebration took place during the annual Friends Remembering Friends ceremony, November 2024, with the group presenting the quilt story. Many who attended were awed by our journey; it is widely recognised that the memories recorded over 30 years have highlighted the devastating impact on this community.



— **Terrie Colman-Black**



### Positive Youth Project

A year after launching the Positive Youth Project, we have seen steady growth in its development, client engagement, and funding interest. Throughout the year, the one-on-one work focused on young adults who have been struggling with medication adherence. Our goal is to support them in achieving an undetectable viral load status, which is necessary for them to qualify for the ARV injection. Some clients have successfully transitioned from daily medication to receiving the

ARV injection once every 1-2 months through their clinics, which has improved their adherence massively. Another area the project has been focusing on is organising peer meet-up events for both groups, over and under 18s.

*continued on page 8*



## ACET Care: Counselling, Support and Supervision

*ACET counsellor Vivienne Morrow-Murtagh works with some of our clients, from ages 18 up to mid 60s, as well as providing off-line therapeutic support to ACET staff and project coordinating staff from one of our historic partnerships, Recovery Academy Ireland. Care worker Hansi Chisnall is also fully accredited with the Irish Association for Counselling and Psychotherapy and has counselling sessions with clients.*

### Counselling

#### Generous listening

The common themes in supervision and therapy in this last year have been processing complicated grief, negotiating ethical considerations, and developing competence in culture and diversity. Also the integration of technology has been a constant theme which has made access to our services easier for a few who wish to occasionally meet that way.

In supervision the same patterns apply as before: exploring clients' situations, listening to and understanding clients' stories and considering effective approaches, holding the understanding of our own biases in the process.

Our clients are central and in order for them to remain that way we are constantly practicing resourcing and toning our own nervous system so that we are not easily hijacked by someone's narrative, enabling what is most essential to all our clients and supervisees: generous listening.

— Vivienne Morrow-Murtagh



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#### ***Positive Youth Project, continued from page 8***

Aishling and Richard attended the Chiva Conference 2024 in Birmingham, which focused on HIV stigma, the roles of African communities, and the impact of naming HIV with children, and addressed maintaining care for young people transitioning to adult services, both globally and in the UK. Richard and Aishling successfully presented a poster, which explored challenges and opportunities in establishing a new Irish national support service for young people living with HIV.

Aishling supported four Irish young people who attended the Chiva Freedom to Be Residential Camp in August. During the camp, which brought together 88 young people aged 11 to 17 from England, Scotland, and Wales growing up with HIV, participants had the opportunity to form connections in an inclusive and welcoming environment. The camp provided a chance to learn more about HIV while engaging in a variety of activities and workshops, including adventure sports, creative arts, yoga, and wellbeing practices.

— Aishling McCormack







# Migrant Plus

## General Overview


As anticipated in the previous annual report, 2024 looked like the first year of the true post Covid-19 era: the pandemic was being dealt with just as a seasonal epidemic. As a result, almost all Covid-19 special activities ceased (meetings, working groups etc.). The main focus went back to tackling the usual issues and concerns impacting the health of people from a migrant background.

## Key Activities

### - Information Provision and Support:

Interactive provision of relevant information is essential when addressing migrant health information gaps. This is an important part of the work of the project, as it is one of the best ways to empower community members to play an effective role in protecting and improving their own health.

**ACET 2024**  
**Migrant Plus**



1 testing van  
doing 400+  
tests in Ireland



85 1:1 and  
75 group  
information  
sessions

"Migrant Plus has maintained its position as a recognised, knowledgeable source of reliable information for people from a migrant background."



12 topical  
presentations  
and 67 Q and  
A sessions



5 venues  
supplied with  
period dignity  
products

Migrant Plus continues to explore new ways to engage and fully support these communities throughout Dublin.



219 personal  
support  
sessions



54 networking &  
partnership  
meetings  
+ 15 training sessions

Migrant Plus is ACET's testing, awareness and integration project working with other agencies to reduce the incidence of HIV in Ireland and end the story of Aids.

For those facing barriers minimising their health gain, the project offered customised support when requested or needed. Quite often, the support sometimes covered various issues affecting the general health of the target population.

### - Tackling Misinformation on Health

With the extensive use of social media by community members, misinformation has found an open gate into vulnerable populations. Misinformation impairs a migrant's ability or readiness to embrace public health messages coming from the relevant health authorities. **The organic reach of misinformation among migrants is really a matter of concern, as many people lack the tools and ability to cross-check any information they receive.**

The project worked to tackle this misinformation that has a potential impact on people's health.

HIV and AIDS, vaccines and nutrition seem to be the main health areas where there is persistent or recurrent misinformation that is difficult to eradicate.



## Migrant Plus

The strategy of the project is to usually couple the provision of information on health with the debunking of any related misinformation.

### - Drug Prevention

The project has undertaken a pilot initiative in collaboration with a migrant church, LA GRACE Christian Assembly, and the Clondalkin Drug and Alcohol Task Force. This initiative is meant to contribute to tackling the rise in migrant youth being caught in drug abuse and related criminality (e.g. drug trafficking). We were alerted by two things:

- through a group of volunteers visiting prisoners, we were made aware of the increasing trend of migrant youth being over-represented in the carceral system over drug-related offences. This is considered a direct consequence of factors such as negative social influences, broken families, and easy access to drugs and money. These factors are increasing the exposure and access of migrant youth to drugs.
- a number of parents from migrant backgrounds were concerned and in disarray after learning their children were either using drugs or had friends using. As they felt powerless to address the issue, they sought help from their faith leaders.

We approached the Clondalkin Drug and Alcohol Task Force to plan some actions and agreed that the prevention officer from the Clondalkin Drug and Alcohol Task Force would run a series of workshops with migrant youth, which were attended by an average of 35 young people.

This initiative, a collaboration at a local level, is ongoing. We made a step presentation of the process, “Drug Use Among Young Adults in a Community of Migrant Background: a case study on integration and health inclusion”, during the 2nd Refugee and Migrant Health Networking and Knowledge Exchange Seminar in University College Limerick (*photo on right*).



### - HIV and AIDS

As other years, our focus was to raise or maintain the awareness about HIV and AIDS: signposting available public services; tackling HIV-related stigma; and encouraging people to get tested to know their HIV status in order to protect themselves and their partners against the virus.

Due to operational reasons, the project no longer provides HIV testing. People



## Migrant Plus

were referred to structures that offer this service, mainly HIV Ireland.

### **- Mental Health**

Due to the lack of awareness, cultural factors, misinformation and stigma, mental health is still a topic that is not discussed easily among people from migrant backgrounds. When wrong attitudes are rooted into cultural values or perceptions, change can only occur slowly. Through our interactions, we continue to raise awareness of mental wellness with the target population on the issue. On this topic, we collaborate with leaders of faith groups for synergistic actions.

### **- Advocacy**

The project acts as one of the migrant voices promoting better health. We advocate on behalf of people on issues such as service access, barriers and challenges faced by migrants, voicing migrant health concerns, and pushing for migrant involvement as stakeholders of public service provision.

### **- Partnerships and Networking**

As one of the voices of migrant communities on health, we attended a number of meetings, webinars and events, including the Social Inclusion Working Group, HIV Community Testing Steering Group, 2nd Refugee and Migrant Health Network and Knowledge Exchange Seminar, Positive Youth Project launch, Refugee and Migrant Health Partnership – Information Network, European Testing Week, Creating Safe Spaces for Youth in Faith Communities, Mi-Health Europe, Clondalkin Drug and Alcohol Task Force Workshop, and PEFI meetings.

## **Outcomes Summary**

### **Some of the outcomes of the project for 2024:**

- Providing information and tackling misinformation; advocating for better health for migrants; raising awareness on mental health; and preventing drug use by migrant youth were the main activities for the project.
- Migrant Plus has maintained its position as a recognised, knowledgeable source of reliable information for people from a migrant background.
- The project has maintained its visibility by being present where migrant health issues are being discussed.
- Our collaboration with faith leaders is thriving.

**—Yvon Luky**





## Migrant Plus: Peer Support, HIV Testing & Period Dignity



### Peer support and mobile HIV testing:

2024 was characterised by consolidation of relationships built in 2023 with migrant communities in churches, tertiary level institutions, women's peer support workers and some youth services.

Peer Support work involved one on one meetings, providing child care for clients with no one to leave their child with, psychosocial support, sign-posting and group sessions. The cost of living increase, housing crisis, and anti-migrant protests all augment migrant women's health challenges in Ireland.

The **Equal Check and Chat Van** team (*right and below*) delivered about 400 rapid tests: HIV, syphilis and hepatitis C. Twenty-seven volunteers were trained from various backgrounds. Volunteers are the mainstay of the community testing; mentoring and support for them goes on.



I delivered anti racism training to:

- Dublin city community co-op
- the Longford Traveller community
- peer support workers
- University of Limerick MA class
- centre managers in Dun Laoghaire Rathdown County Council.



The **Period Dignity** product project was characterised by building relationship with five churches, procurement, delivering and restocking sanitary pads and tampons. All venues had higher uptake of sanitary pads than tampons.

I attended the following seminars:

- Refugee and Migrant Network and Knowledge Exchange Seminar in the University of Limerick

- Irish Global Health Partnerships conference
- Praxis gathering

Other trainings done were BM Module in Interpreting the Irish Health System, Psychological First Aid, First Aid, domestic and gender based violence.

— **Chipo Harper**





# Matilda Project

*The Matilda Project is a project of ACET Ireland, set up in 2001 as a response to HIV in Zimbabwe. We help fund home-based care, food packs and support groups for adults living with HIV.*

The highlight of 2024 was returning to Zimbabwe to spend time in the community, meet old friends and colleagues, and see the impact of the drought: a most joyful and sobering few days.

Everyone we spoke to told us about their fears about the lack of water, how much

further they were walking to collect water for daily needs, how crops had failed completely, in many cases how they were eating once a day as a result.



*Mr. (93) and Mrs. (82) Dube with the 6 grandchildren and 1 great-grandchild in their care. Roda, left, and Thembelani, right, HBC volunteers with the Irish visitors.*

## ACET 2024 Matilda Project



3,212 food packs to orphans & vulnerable children, including those living with HIV



642 people living with HIV cared for by Home Based Care volunteers in 11 villages

"The community is so grateful with food packs at the very right time. It's our joy to see these children so happy."



22 primary & 26 secondary school students fees paid



154 adults in 8 support groups for people living with HIV

With the growing malnutrition of breast-feeding mothers we decided a monthly food pack until harvest would be beneficial.



183 Home Based Care Volunteers given 5 kg of seed in appreciation for their work



180 food packs for breast-feeding mothers

The Matilda Project is a project of ACET Ireland, set up in 2001 as a response to HIV in Zimbabwe. We help fund home-based care, food packs, and support groups for adults living with HIV.

An extra village had already been added to the monthly food pack distribution (100 extra) in June on the pleading of the school principal who described the weakness of children in the classrooms who hadn't eaten.

When we met with all the area co-ordinators and their assistants on 21 August, one issue discussed was the growing malnutrition of breast-feeding mothers and whether a monthly food pack until harvest would be beneficial. A register was compiled of 233 women, more than funds allowed, so we settled on the most vulnerable third, with extra food packs held back for the clinics in both wards (electoral areas) to give to women who had just given birth. This intervention was very welcome.





## Matilda Project

A Dublin family funded solar panels for the Youth Skills Centre beside the Community Care Programme's office, installed in June. This was transformative, in that power tools became an option for the carpentry students. The sewing machines that are electric could also be used each day at class (two-day power cuts are common). Several electric tools were bought for the YSC. A local welder agreed to give two days a week to train the boys, as did a builder who served as a Home Based Care volunteer for several years.



*Some of the carpentry students with their projects.*

The young women enrolled on the Dress Design course, with basic business skills thrown in by Willard, live on the ACET compound and benefit from soft life-skills training and an opportunity to grow in their faith, as a result. Patience and Siphso, their trainers, and Beauty, Willard's assistant, are good role models for them.



*Home-based Care volunteers.*

In both November and December there was a maternal death in the villages, one of a woman living with HIV. The babies are being raised by relatives. Willard has been buying formula milk for both, as the cost is prohibitive. Safety nets are exponentially less than we are used to in Ireland. The average monthly household income for the province where Willard is based in April 2024 was \$109, over half of which was spent on food. This is less than \$1 a day per person. Average household size was 4.3, with 45% under 18 years. ([Zim LA](#)).



— **Wendy Phillips**





## Partnerships



Nataliya Marchenko is working in partnership with **Cairde** by providing much needed community development and health inclusion supports to Ukrainian beneficiaries of temporary protection in Dublin. One-to-one supports, seminars, small group activities for women and wider social media inputs make up this important and ongoing project.



In 2024 we completed our first full year in partnership with **Chiva** in the UK as Positive Youth Project established itself. Input at our Dublin launch event, our attendance at the annual conference in Birmingham and Aishling taking part in regular networking supports with peers working in UK cities are among the ways this partnership is expressed.



Also based in the North East Inner City is our partnership with **Dublin City Interfaith Forum**. This includes supporting leaders of local faith communities and with the support of the Dept. of Taoiseach's local initiative, delivering Safe Haven, the training module on polarisation and faith to a team of local Gardai and faith leaders.



Following a late 2023 launch, the **Check and Chat HIV testing van** had a full year visiting a wide range of venues delivering rapid HIV tests and health information. Colleges and Universities were among the settings that proved particularly effective. The ACET staff member, Chipó Harper, explored the various opportunities and challenges of engaging the van with communities of minoritised ethnicity.

Most of our partnerships have some connection to the Department of the Taoiseach's **North East Inner City** initiative. Richard Carson sits on the Enhancing Policing Sub Group as a representative of the North Inner City Community Coalition and 2024 saw the development of a new strategic plan and the publishing of important new reflections, including on a high-level roundtable on addressing street dealing of drugs in the community.



Our partnership with the **Talbot Centre** continues. Bernie McDonnell has been using her many years of experience in the area of drug education to support local project workers, teachers, parents and young people in building capacity in this important area. Richard Carson makes a direct contribution to this project as a trainer at Learning Together Working Together, the biannual training course





## Partnerships

in the North Inner City that draws together youth workers, teachers, gardai, drugs project workers and many more.

In 2024 our partnership with **Depaul** came to an end. Having been a part of the establishment of Suaimhneas - the first urban recovery home for women experiencing addiction - in 2016, we provided off-line therapeutic support to staff including Sinead McKiernan, who has now moved on from Depaul.



## Look and Listen: More about ACET in 2024



Terrie Colman Black and ACET trustee and community activist Tony MacCarthaigh were interviewed by Robbie Lawlor and Veda Lady on the **Poz Vibes** podcast, celebrating 30 years of quilting in the community (The Quilt Group, 22/11/2024).



On the Jesuit Centre for Faith and Justice's podcast series, **Divine Election: A Christian Guide to Irish Politics**, Richard Carson talked about the importance of place in the Christian story and how loving your neighbour means loving your neighbourhood. (Place, 23/11/2024).



Praxis podcast **Mission Disco** features Richard Carson and Dave Gardner talking about engaging with and serving communities in Dublin city centre (Urban Mission episode, 18/10/2024).



Richard Carson's World AIDS Day article in **Vox Magazine** explored the impact of centuries of neglect for some communities while others look away; he encouraged us to "take some time to face the things that separate us from our neighbour, across unreal lines we have constructed or inherited."



**Working Notes**, a production of the Jesuit Centre for Faith and Justice on Gardiner Street about Dublin's North East Inner City, featured some fascinating voices and pieces on life in the area, including Richard Carson's essay, 'This is the Air We Breathe: sharing suburban place and story.'

The Vox article can be read on [vox.ie](http://vox.ie), Working Notes on [jcfj.ie](http://jcfj.ie) and the podcasts found wherever you get your podcasts.



# Financial Report

## Income and Expenditure

Year Ending 31 December 2024

		2024	2023	2022
		€	€	€
Income	ACET	438,796	387,196	282,222
	Matilda	<u>151,590</u>	<u>132,746</u>	<u>159,597</u>
	Total	590,386	519,942	441,819
Expenditure	ACET	(434,390)	(394,402)	(279,879)
	Matilda	<u>(134,076)</u>	<u>(133,397)</u>	<u>(178,646)</u>
	Total	(568,466)	(527,799)	(458,525)
Surplus/ Deficit	ACET	4,406	(7,206)	2,343
	Matilda	<u>17,514</u>	<u>(651)</u>	<u>(19,049)</u>
	Total	21,920	(7,857)	(16,706)
Accumulated surplus brought forward		75,992	83,849	100,555
Accumulated surplus carried forward		97,912	75,992	83,849

## ACET and Matilda Project Balance Sheet 31 December 2024

	2024	2023
	€	€
<b>Current Assets</b>		
Debtors	9,860	432
Cash at bank and in hand	<u>142,689</u>	<u>176,210</u>
	152,549	176,642
<b>Creditors:</b> amounts falling due within one year	(54,637)	(101,142)
<b>Net Current Assets</b>	<u>97,912</u>	<u>75,500</u>
<b>Total Assets less current liabilities</b>	<u>97,912</u>	<u>75,992</u>
<b>Creditors:</b> amounts falling due after more than one year	-	-
<b>Reserves</b>	<u>97,912</u>	<u>75,992</u>



## Director's Report:

Dr. Ebum Joseph

After another year of activity across our broad range of projects, I want to thank the funders, staff and volunteers of ACET Ireland. Our role as a Board is to provide the necessary and important governance to ensure that the wonderful work carried out by our team can thrive. This Annual Report provides vivid stories from Dublin to Zimbabwe of how dedicated, skilled and compassionate acts of service are impacting lives. I commend it to your reading and trust it will inspire and encourage you.

Our work continues to thrive in the challenge of HIV and all its linked systemic and structural realities. The ACET Ireland team have adapted to emerging challenges yet will continue to need our support through the coming years in a polarised and complicated world.

The Board itself has had some changes in 2024. Dr. Caroline Munyi has joined bringing her expertise as a gender, peace and development specialist, along with Maria Katanga Noble, a clinical and community nutritionist with a focus on HIV. After many years as a Board member and Chair, Prof Sam McConkey stepped back from his roles. We are grateful to Sam for all that he has given to ACET over the years and we know he remains a friend and source of wisdom on all matters relating to HIV.

— *Ebum Joseph, Chairperson*



### We would like to acknowledge the **ACET Board of Trustees:**

Samuel McConkey - Chair (resigned 19/12/2024)	Antoin MacCarthaigh
Dr. Ebum Joseph - Chair (19/12/2024)	Rev. Philip McKinley
Maria Katanga Noble (joined 15/4/2024)	Karen Thompson (Secretary)
Caroline Munyi (joined 18/07/2024)	

**ACET's purpose:** the advancement of community welfare including the relief of those in need because of youth, age, ill-health, or disability and the promotion of health, including the prevention or relief of sickness, disease, or human suffering. We do this by providing care support to those affected by HIV and training, awareness, and testing work to those that have been marginalised by society, including through partnerships responding to addiction and social exclusion. We offer this to individuals, families and communities both here in Ireland and with fundraising and capacity building support to Zimbabwe.

**ACET Ireland is fully compliant with the Charities Governance Code for complex charities.**



## Thank You

**We are very grateful, as always, to all those who gave regularly or through one-off donations or fundraising events. Many thanks, also, to all our volunteers, trustees, and members for their valuable contributions throughout the year.**

**We appreciate the support of:** HSE Social Inclusion in CHO 9; **North Inner City Drugs and Alcohol Task Force**; Department of Children, Equality, Disability, Integration and Youth; **Gilead Science**; GlaxoSmithKline; **The Hospital Saturday Fund**; Benefact Trust; **Tusla, Child & Family Agency**; Dublin City Council; **the North East Inner City Initiative**; acet UK and ACET NI; **Chiva**; Cairde; **Google**; Hayden Brown; **Pricewaterhouse Coopers**; Vox; **Rialto Community Drugs Team**; the GUIDE Clinic; **the Mater Misericordiae Clinic**; Beaumont Hospital; **HIV Ireland**; Positive Now; **Sexual Health Centre Cork**; Sexual Health West; **GOSHH Limerick**; European AIDS Treatment Group; **the Drugs/HIV Helpline**; Acts of Compassion Projects; **Recovery Academy Ireland**; Talbot Centre; **Depaul**; Jesuit Centre for Faith and Justice; **Dublin City Interfaith Forum**; Discovery Gospel Choir; **Sisters of Mercy**; Vincentian Fathers; **Abbey Presbyterian**; Lucan Presbyterian; **Trinity Church Network**; Connections Church Dublin plus all the other churches that we have had the opportunity to collaborate & work with.



An Roinn Leanaí, Comhionannais,  
Michumais, Lánpháirtíochta agus Óige  
Department of Children, Equality,  
Disability, Integration and Youth



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Donations can be made directly from our website or through bank transfer.