Contents

Summary .................................................................................................................. 5
Evaluation Method ................................................................................................. 7
Findings ................................................................................................................... 8
  1. Overall Performance ....................................................................................... 8
  2. Coordination .................................................................................................... 9
  3. Leadership ....................................................................................................... 9
  4. Capacity building ............................................................................................ 10
  5. Media ............................................................................................................... 11
  6. What’s on? Guide ........................................................................................... 12
  7. Operations ...................................................................................................... 13
Light up Scotland ................................................................................................... 15
Recommendations .................................................................................................. 17
  1. SWADAG ....................................................................................................... 17
  2. Light up Scotland ............................................................................................ 18
Annex 1: SWADAG Interview Questions ............................................................... 19
Annex 2: Light up Scotland Interview Questions ................................................... 20
Summary

The Scottish World AIDS Day Awareness Group 2012 Evaluation was carried out following the creation of the Scottish World AIDS Day Awareness Group (SWADAG). This report seeks to assess the effectiveness of SWADAG from the perspective of its members, and to provide recommendations based on suggestions made by respondents. Respondents included SWADAG members and HIV Scotland staff. A media analysis was also conducted.

Eight respondents participated. Overall, six felt SWADAG’s performance was “Good” to “Excellent” for the first year, and all respondents provided examples and recommendations of how SWADAG could be improved. None of the respondents suggested SWADAG should not continue.

The following key areas were identified:

1. **Need for stronger coordination and objectives:**
   Respondents discussed the need for a key theme for World AIDS Day in Scotland, and of the role of SWADAG in creating awareness of activities amongst organisations.

2. **Need for stronger leadership:**
   It was suggested this leadership should come from HIV Scotland. The need for a permanent SWADAG lead member was also identified.

3. **Capacity building:**
   Respondents discussed a need to expand SWADAG to include wider networks. SWADAG’s ability to strengthen networks within the HIV voluntary sector was noted as a main strength by all of the respondents.

4. **A need to strengthen media engagement strategies**

5. **What’s on? Guide:**
   There is a need to discuss the relevance of the What’s on? guide. If a document is to be produced, it needs to be distributed earlier.

6. **A need to create an annual timeframe for SWADAG:**
   There is also a need to discuss the frequency of meetings for future World AIDS Days.

7. **Light up Scotland:**
   Topics raised included the need for a dedicated role for the Light up Scotland campaign, an improved media engagement strategy, and a need for funds to be made available to sponsor the costs of lighting up for relevant buildings.
Introduction

The Scottish World AIDS Day Awareness Group (SWADAG) was set up by HIV Scotland in 2012. A working group for World AIDS Day in Scotland, it aimed to bring organisations together to support a unified coordinated campaign. Its members included representatives from the HIV Voluntary Sector, namely Waverley Care, Church of Scotland HIV Programme, Terence Higgins Trust, Gay Men’s Health, Positive Help, and HIV Scotland. Scottish NHS Health Boards were also informed of the group and invited to contribute. Organisations were approached via email, and SWADAG’s minutes were distributed by HIV Scotland through this same network. Regular updates were given during the Sexual Health and Blood Borne Virus Framework Executive Leads meetings, Third Sector meetings, and Clinical Lead networks.

SWADAG sought to provide a coordinated approach to Scotland’s World AIDS Day. Previously, organisations typically worked in isolation on individual campaigns; in 2011 one national magazine hosted two different campaign adverts on the same page. SWADAG brought together several organisations, some of whom do not regularly work together and are in frequent competition for a decreasing funding pool.

SWADAG was set up in accordance with HIV Scotland’s Work Plan 2012/13, which identifies the following objectives:

i. Coordinate the HIV sector’s initiatives for World AIDS Day, with a focus on the HIV Third Sector
ii. Produce a media strategy for the general media that raises awareness of HIV and decreases stigma
iii. Light up Scotland – buildings around Scotland are lit in red to raise awareness of HIV

This evaluation was conducted in order to assess the effectiveness of SWADAG and Light up Scotland in its first year, and to identify recommendations for the future.

The term, “sector,” shall be used to describe the HIV voluntary sector in Scotland.
Evaluation Method

This mixed-method evaluation was conducted through a series of meetings with HIV Scotland staff, interviews with SWADAG members shortly after World AIDS Day, and observation of the post-World AIDS Day SWADAG meeting. HIV Scotland received independent email feedback from one NHS Health Board. HIV Scotland staff were also asked to discuss the Light up Scotland campaign. Documents such as SWADAG’s funding application and minutes of the SWADAG meetings were made available. There was no central record of the minutes, and one meeting was missing.

Interview respondents included SWADAG members and HIV Scotland staff. A standardised, open ended interview method was adopted, allowing all interviews to follow the same set of questions. Where appropriate, the ordered of questions was varied to suit the respondent’s conversation. Interviews were conducted face to face or over the telephone, and two respondents attended a group interview. Two respondents, HIV Scotland staff, were given an additional interview regarding the Light up Scotland campaign.

The evaluation was conducted by HIV Scotland’s Evaluation Assistant.
Findings

In total, all eight respondents out of a possible eight completed interviews.

Key themes identified from the interviews are:

1. Overall Performance
2. Coordination
3. Leadership
4. Capacity Building
5. Media
6. What’s on? Guide
7. Operations
8. Light Up Scotland

1. Overall Performance

Figure 1 shows how well respondents thought SWADAG performed overall. Six respondents rated SWADAG’s overall performance as “Good” or “Excellent”. Four of the respondents explained this was in part due to it being SWADAG’s first year. Other reasons given included non attendance by some of the sector, and the change of staff at HIV Scotland. One respondent felt SWADAG led to a higher level of attendance at events, and raised the profile of World AIDS Day.

“Overall, it was a very good beginning. We should be proud as a sector”

“SWADAG exceeded my expectations for this year, but my expectations for next year are higher”
2. Coordination

There was a degree of uncertainty over SWADAG’s main objectives. Although seven out of the eight respondents identified coordination as the key responsibility, there was notable diversity in their definitions. Three main areas were identified: the need for a main theme; awareness of other organisations’ activities; and a hesitancy to use the word, “coordinate”.

2.1 Need for a main theme

The theme for Scotland’s World AIDS Day 2012 was stigma, as identified by SWADAG. This was in line with a planned Government campaign. The need for a main theme was highlighted by six out of the eight respondents who defined the main responsibility of SWADAG as a forum to present, “a clear, united message to the public” in order to reduce confusion. One respondent suggested the main theme should be determined by HIV Scotland in collaboration with Scotland’s Health Boards. Four of the respondents suggested a strong campaign should be run to increase awareness.

“People have started to lose the messages about HIV and AIDS...we are the custodians of World AIDS Day and we need to come up with new ideas to continue to grasp people”

Two respondents felt this year’s World AIDS Day did not achieve a single, unified message to the public and identified a stigma campaign and a Testing Week. One respondent felt earlier notice of the Testing Week would have allowed other SWADAG members to get involved.

2.2 Create awareness of other organisation’s activities

Six respondents discussed the role of SWADAG as a means of creating awareness of other organisations’ activities: “World AIDS Day 2011 was uncoordinated. HIV organisations had no concept of what others were doing”. Two went on to identify the need to reduce overlapping; one respondent explained MSPs received ribbons from three different organisations in the previous year. Two respondents felt SWADAG was an opportunity for the HIV voluntary sector to pool resources.

“One big response as a whole potentially could be stronger than lots of small campaigns, especially as there are limited resources”

During the group interview, respondents discussed whether SWADAG should act as a steering committee.

2.3 Hesitant to use “coordinate”

Two of the respondents were hesitant to use the word “coordinate”. Both identified coordination as the main objective of SWADAG, but explained, “SWADAG isn’t leading activities” and “SWADAG was not about HIV Scotland telling others what to do”.

3. Leadership

The need for stronger leadership was raised by five of the eight respondents. One respondent explained stronger leadership would increase SWADAG’s capacity, whilst another suggested people look towards leadership for themes and guidance: “people are busy, and like to be ‘gifted’”.
3.1 Leadership from HIV Scotland
All five respondents who discussed leadership suggested this was a role that should be taken on by HIV Scotland. One respondent described, “a two way relationship: leadership from HIV Scotland and an element of using the SWADAG meeting to discuss what’s going on on the ground”. Another respondent described the need for HIV Scotland to adopt a coordinator role for SWADAG.

Of the three respondents who discussed accountability, all felt SWADAG was currently accountable to HIV Scotland.

Several respondents stated leadership from one organisation was not something that could have been achieved within SWADAG this year due to the climate within the HIV voluntary sector. One respondent explained HIV Scotland was, “careful not to be seen as telling others what to do”.

3.2 Need for a permanent SWADAG lead member
Five of the respondents expressed the need for a permanent SWADAG lead member within HIV Scotland. Respondents had other roles and responsibilities, and therefore felt unable to dedicate much time to SWADAG. Three respondents noted an improvement in coordination following the appointment of an Events Assistant within HIV Scotland.

“It’s definitely good to have someone whose main focus, or one of their main priorities, is SWADAG. This should be someone within HIV Scotland, as they have the networks and a much broader overview”

Two respondents suggested there were problems in the passing over of information between the HIV Scotland staff changes. Several interns, full-time staff and subsequently an Events Assistant were involved from HIV Scotland.

4. Capacity building
4.1 Expanding networks
The expansion of SWADAG to include wider networks was discussed by six of the respondents. Suggested networks included Health Boards, identified by five respondents, and student societies, suggested by two respondents. Two of the respondents discussed the practicalities of widening SWADAG, and felt that not all participants would benefit from attending meetings: “an email network would be sufficient for many”.

One respondent described a two way process:

“HIV Scotland to get an idea of what’s going on in Health Boards...in January, February, March, and then feed back to SWADAG regarding what the WAD 2012 theme will be. Then make resources available that people in Health Boards and HIV sector can access.”

Another respondent raised the absence of Health Boards’ involvement: “they would not have wanted or accepted involvement this year, but hopefully SWADAG’s reputation will mean they want to get involved next year”.
4.2 Strengthening the HIV Voluntary Sector

SWADAG’s ability to strengthen networks within the voluntary sector was identified by all eight of the respondents as a main strength. One respondent said they, “enjoyed being able to work closely with other agencies in the sector,” whilst another stated, “having people from lots of different backgrounds who wouldn’t normally get together was a main strength. The more that diversity can be improved the better”. One respondent felt SWADAG galvanised the sector.

Despite this, concerns were raised by five respondents over attendance at SWADAG meetings. Two respondents were unsure how well SWADAG was advertised within the sector and questioned the use of email to invite members. Of those that did attend regularly, it was noted SWADAG was, “very Edinburgh-Glasgow focused; there wasn’t really much input from anybody anywhere else.”

“It takes a huge chunk of my day to travel to and from SWADAG meetings”

Four respondents suggested the location of meetings at HIV Scotland might have been a factor for non attendance. During the preliminary discussions, SWADAG agreed on holding meetings at HIV Scotland. Four respondents discussed holding SWADAG meetings elsewhere; suggestions included alternating meetings between Glasgow and Edinburgh, meetings at the Church of Scotland, or using conference centres or free meeting rooms in central Edinburgh. One respondent felt it was important to move away from a central Scotland focus, and utilise offices nationally such as Aberdeen.

5. Media

Respondents raised concerns over World AIDS Day’s proximity to St Andrew’s Day, 30th November, and the implications this may have for publicity. World AIDS Day 2012 faced additional publicity challenges: falling on a Saturday, media interest was reduced and Members of Scottish Parliament were out of office.

Media monitoring was not actively used, and a retrospective study was carried out using online search tools. NAT’s media analysis was also consulted, as were SWADAG members. A total of 19 media reports or adverts were identified within Scottish media, of which 9 made specific reference to the theme of stigma. A further example of media referencing the stigma theme was found in ScotsGay, which provided extensive coverage of World AIDS Day in Scotland. This included a dedicated World AIDS Day cover, and comprehensive listing of events featured in the “What’s on?” guide. An additional 8 reports were listed by respondents, but it has not been possible to confirm them. BBC Radio Scotland included a World AIDS Day discussion in its “Sunday Morning with...” programme.

SWADAG did not agree on a media strategy for World AIDS Day. This was raised by four respondents, two of whom identified it as a main weakness. One respondent suggested SWADAG could create a media subgroup. Another respondent was unsure if a media strategy would be suitable for SWADAG, “Perhaps a more joined up press would have been stronger, however no-one knew how that would work”. During the SWADAG meeting, members discussed the need for a
“hook” to attract media attention. Suggestions included a stunt or visually using statistics released before World AIDS Day.

6. What’s on? Guide

The What’s on? guide received mixed results (Figure 2). Six of the respondents felt the design could have been improved. It was recognised professional design was not within the skills of SWADAG, and it was felt “more time and money needs to be invested in professional design”. One respondent suggested photos from previous events could be included.

Four respondents noted the guide did not provide a comprehensive overview of events in Scotland. Examples ranged from organisations including some but not all of their events, and the absence of a number of university events.

One respondent noted the publicity gained from participating. It gave organisations an opportunity to make themselves known to audiences they might not usually engage with.

![Figure 2: Response to the question, "How would you rate the What’s on? Guide?" by number of people]

7.2 Late distribution

The late distribution of the Guide was raised by five respondents. Suggested reasons for this included SWADAG members missing deadlines, and a delay in printing following confusion with the printers over printing resolution and formatting. During the SWADAG meeting, members discussed problems regarding effective distribution, and were unsure if many people picked them up once they had been put on display. This was further supported by an email from an NHS Board; resources
were received too late to be made use of effectively. One respondent explained the guide ran out in some Glasgow locations, and suggested SWADAG could employ a distributor to monitor demand.

**7.3 Content of the guide**

There was some uncertainty over what the guide should include, and three respondents questioned the relevance of the guide entirely. One respondent suggested a single A5 list of events may be more suitable. Other ideas included an in-house report of events, and region specific flyers that could be localised and half the size. Two respondents discussed the potential to expand the guide, with the events section to comprise just one part of it. They suggested other information could include Health Protection Scotland (HPS) figures and statistics, therefore enabling SWADAG to tap into press surrounding the November release of HPS data. One respondent suggested producing a resource after World AIDS Day to document what took place. This was described as a mapping exercise, and it was felt this would facilitate the creation of wider networks.

**7. Operations**

**6.1 Delegation of responsibilities**

SWADAG has no formal operational structure. Of the seven respondents asked about the delegation of responsibilities, all identified this as voluntary. Responsibilities were often taken on according to a member’s capacity within their own organisation; for example, bead badges were distributed by Church of Scotland as they owned them. Only one activity was not completed. One respondent felt SWADAG’s capacity could be increased if HIV Scotland’s SWADAG member had more resource time, and took on more responsibilities. One respondent suggested the relaxed atmosphere of the meetings meant members took ownership of SWADAG early on.

**6.2 Frequency of meetings**

Meetings were held monthly. All six respondents who were asked felt the frequency was adequate for 2012. In future, three respondents suggested the frequency of meetings should increase towards World AIDS Day, particularly if SWADAG intend to scale up its activities. Two people suggested this did not necessarily need to be done through meetings.

“If SWADAG want to step things up, then towards World AIDS Day they will not necessarily need to meet more frequently, but will need more frequent contact through emails”

All of the respondents said meetings should begin earlier in the year. One respondent discussed the need for an early start if SWADAG hoped to engage with Health Boards, whilst another suggested infrequent meetings should begin at the beginning of the year, and then increased towards World AIDS Day. One respondent suggested an early start would enable SWADAG to become more adventurous, and scale up its activities.

**6.3 Project Plan**

Four respondents discussed the need for a project plan. Suggestions included a timeframe, an agenda detailing meeting dates and objectives, and deadlines for printing and distribution lists. One respondent suggested this would help with funding applications, whilst another felt it would help to
facilitate involvement with Health Boards. Two respondents discussed the need for a brief document or statement of objectives for SWADAG, particularly if the group extends its network. A project plan was drafted by HIV Scotland in March, but not utilised.

6.4 Budget and Expenditure

A funding application to support SWADAG’s activities was completed by HIV Scotland on SWADAG’s behalf, and a total of £4000 was awarded by the Scottish Government. This included £1700 to employ an Events Assistant to coordinate the *Light up Scotland* campaign. The remaining £2300 was allocated to printing and distribution of resources for the *What’s on?* guide, and promotional material for *Light up Scotland* as shown in Table 1.

Excluding staffing costs for the Events Assistant position, SWADAG’s expenditure exceeded the budget. Promotional costs such as magazine adverts were not included in the budget proposal. Despite one respondent noting there were not enough poster tubes for distribution, distribution costs fell below budget. The *What’s on?* guide was also under budget.

<table>
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<tr>
<th>Description</th>
<th>Budget</th>
<th>Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>What’s on?</em> guide design and printing</td>
<td>£1430</td>
<td>design (stock photo) £14.25</td>
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<tr>
<td></td>
<td></td>
<td>printing (x7000)     £929</td>
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<tr>
<td></td>
<td></td>
<td><strong>Total</strong> £943.25</td>
</tr>
<tr>
<td><em>Light up Scotland</em> posters design and printing</td>
<td>£520</td>
<td>design                £265</td>
</tr>
<tr>
<td></td>
<td></td>
<td>printing (x250)      £131</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Total</strong> £396</td>
</tr>
<tr>
<td>Distribution and admin costs</td>
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<tr>
<td></td>
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<td>general postage       £80</td>
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<tr>
<td>Other</td>
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<tr>
<td></td>
<td></td>
<td>Big Issue Advert      £735</td>
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<tr>
<td></td>
<td></td>
<td>ScotsGay Advert       £295</td>
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<td><strong>Total</strong> £1102</td>
</tr>
<tr>
<td>Total Budget</td>
<td>£2300</td>
<td><strong>Total</strong> £2607.25</td>
</tr>
</tbody>
</table>

Table 1: Total budget and expenditure for SWADAG (excluding staffing costs)
Light up Scotland

Responsibility for the planning and coordination of Light up Scotland was undertaken by HIV Scotland. As shown above, an Events Assistant was employed as part of the SWADAG budget. This role was managed by HIV Scotland. As such, interviews were limited to HIV Scotland’s Events Assistant and CEO. During the January SWADAG meeting, members discussed the Light up Scotland campaign; observations have been included where relevant.

A total of 85 buildings were contacted, 36 of whom were unable to light up. Reasons included being unable to locate the person responsible, buildings not responding to enquiries, or financial or logistical constraints. A further eight buildings had agreed to consider lighting up, but were ultimately unable to. Reasons included financial or legal constraints. One building unable to light up agreed to fly a flag displaying the red ribbon. The flag was flown upside down; reasons for this are unclear.

8.1 Timescale
As with SWADAG, respondents noted the late starting of Light up Scotland. During the SWADAG meeting, members discussed the need to start approaching buildings earlier.

The need for a dedicated role for the Light up campaign was also raised by both respondents. This was also identified by SWADAG members. One respondent went on to suggest, “the person responsible needs to start at the beginning...they need to be involved in the planning”.

“Having a dedicated role for the Light up made a significant difference, as the person had no other distractions”

The absence of a comprehensive hand over from previous staff, including interns, was identified as a main weakness by one respondent and was discussed during the SWADAG meeting. The respondent felt unable to negotiate with buildings that had already said no. A spreadsheet of contacted buildings was outdated, and the respondent was unsure whether buildings on the list had been contacted or not. It was suggested this had an impact on how HIV Scotland was perceived by others; buildings spoke to more than one person and there was a risk of duplicating enquiries.

8.2 Lighting Resources
It was suggested HIV Scotland should have funds or resources available to support buildings lighting up. Although the Scottish Government offered to consider such a funding request, it was felt by both respondents that the need for such funds was identified too late to have been used effectively. One respondent stated HIV Scotland would need to develop a rationale for which buildings they would financially support.

Examples were given by one respondent of buildings that wanted to light up, but were unable to find suitable red filters:

“The gels that they’d put on the lights were just burning because the lights were so hot...this was an example of a building that really did want to do it and really was trying”
8.3 Public response
No measurement of public response was undertaken. One respondent was approached by a member of the public who had previously worked in the sector and doubted the general public would understand why buildings were lit up red, particularly in the run up to Christmas. The respondent felt people might be likely to search the internet to find out more. *Seeing Red?* posters were also provided to buildings lighting up. HIV Scotland received positive feedback from Government and HIV sector leaders.

1.4 Media
All of the respondents felt the media involvement could have been improved. There were problems distributing the press release, as the contact list was out of date. Generic emails were sent to newspaper editors as a result.

The *Light up Scotland* press release was distributed three days before World AIDS Day. Respondents were unsure when the press release should be distributed: one respondent felt an earlier release would have given the media more time to prepare, whilst another respondent was concerned the release would be forgotten if sent out too early. It was suggested the press release could be sent out twice. Adverts were placed in ScotsGay and The Big Issue magazines, which featured the *Seeing Red?* poster on the back page.

Photographers were employed on a voluntary basis to take photos of buildings lit red. However, it was noted this limited the scope of the images as photographers were Edinburgh or Glasgow based. It was suggested by one respondent that if funds were made available to reimburse travel costs, photographers may be willing to travel further. One respondent discussed using the photos to help sell the *Light up* campaign in the future. This was also discussed by SWADAG.

A list of buildings turning red was advertised on the HIV Scotland website, and updated regularly. A link to this page was also provided in the *What’s on?* guide. Members of the public were invited to send their photos to HIV Scotland. HIV Scotland staff used the social media tools Twitter and Facebook to promote red buildings on the day. Photos have also been displayed on the HIV Scotland website since. One respondent became aware of photos promoted by the public using social media of red buildings HIV Scotland was not aware of.

8.5 Posters
*Seeing Red?* posters were provided to all buildings that agreed to light up, and also distributed to Health Boards. It is unclear where recipients displayed posters. Electronic posters were available to download from the HIV Scotland website. It was felt the *Light up* posters provided strong campaign material, and both respondents commented on the professional appearance. SWADAG requested the poster design be used in the future.

8.6 Contacts
One respondent discussed the importance of up-to-date contacts for buildings. The respondent identified finding the person responsible as a main weakness of *Light up Scotland*. Several examples were given where the respondent was unable to find the relevant person, despite lengthy periods of contact. During the SWADAG meeting, it became apparent one member had a contact that may have been useful.
Recommendations

The following recommendations have been reached based on an analysis of the data and recommendations made by respondents.

1. SWADAG

1.1 Identify a main theme
A main theme should be clearly identified; SWADAG need to decide how this theme is chosen.

1.2 Develop a campaign
SWADAG should develop a campaign that promotes the theme of World AIDS Day in the months leading up to it.

1.3 Establish leadership within SWADAG
SWADAG to agree on leadership. It should be decided what this entails, and whether leadership should come from HIV Scotland.

1.4 HIV Scotland to employ a permanent SWADAG lead member
HIV Scotland to assign the role of SWADAG lead member to a member of staff who is able to dedicate more time and resources towards SWADAG.

1.5 Expand SWADAG’s network
SWADAG to expand its network to include agencies from outside the sector. This may include Health Boards and student societies. SWADAG are to decide how this network will be maintained.

1.6 SWADAG to create a media strategy
SWADAG to agree on a media strategy. It should be established whether this involves a unified press release. SWADAG to ensure the main theme is evident in media coverage.

1.7 SWADAG to identify an annual timeframe
SWADAG to create a timeframe for activities. This may include prospective deadlines for design, printing, and distribution. SWADAG to decide on frequency of meetings, and to consider starting earlier in the year.

1.8 SWADAG to produce Terms of Reference
SWADAG to create a Terms of Reference document. This will help to clarify SWADAG’s main objectives, and will provide an introductory document when approaching new members.

1.9 Review of the What’s on? Guide
SWADAG members to discuss the relevance of the “What’s on?” guide, and to agree on a future publication if necessary. SWADAG to invest in professional design. SWADAG to consider conducting a review of public response to the guide.
1.10 **Identify mechanisms to assess public response**

Set up media monitoring tools such as Google Alerts to identify HIV and AIDS or World AIDS Day media coverage. Consider conducting a baseline study to monitor public impact as a result of World AIDS Day.

2. **Light up Scotland**

2.1 **HIV Scotland to employ a member of staff for Light up Scotland**

2.2 **Planning to begin earlier**

If *Light up Scotland* is to continue in future years it should be guided by recommendations made by the *Light up Scotland Report, 2012*.

2.3 **Assess the need for funds for buildings**

HIV Scotland to assess the need for funds to be made available to support the cost of buildings actioning their light up.

2.4 **Increased media strategy**

Media contacts to be developed. HIV Scotland to consider funding for photographers. Social media tools such as Facebook and Twitter to be utilised.

2.5 **Clear handover between outgoing Events Assistant and future post holder**

This should include an up-to-date contact list for buildings and details of challenges faced in 2012 where necessary. This will be outlined in the *Light up Scotland Report, 2012*.
Annex 1: SWADAG Interview Questions

SWADAG Interview Questions [Name, Job Title]

Function/ Roles:

1. What were SWADAG’s main responsibilities?

Structure and coordination:

2. Overall, how well was SWADAG coordinated?

3. How were responsibilities delegated?

4. Did you feel the frequency of meetings was adequate?

Achievement:

5. Overall, how well did SWADAG perform? Give reasons.

☐ Excellent ☐ Good ☐ Fair ☐ Poor
6. How would you rate the “What’s on Guide”? Give reasons.
   □ Excellent    □ Good    □ Fair    □ Poor

7. What were the main strengths and why?

8. What were the main weaknesses and why? (What were the main barriers to achieving aims?)

9. How would you improve SWADAG?
Annex 2: Light up Scotland Interview Questions

Light up Scotland Interview [Name]

1. Overall, how would you rate Light up Scotland? Give reasons.

2. What was the level of your involvement? Give details.

3. What were the main strengths and why?

4. What were the main weaknesses and why?

5. Did you receive any feedback about Light up Scotland? Give details.

6. How would you improve Light Up?