## Closing Session: Where do we go from here?

Gender Inequality and HIV/AIDS: Lessons for International Development in the New Millennium

## 1. What are the key issues or messages that you heard today?

- Still a lot to do in raising awareness on gender
- Stigma and Discrimination still very key challenges
- Education still very important- how do we pass on the message to others
- We all have a role to play in connecting dots of vulnerability and issues relating to HIV/AIDS. It is not useful to only dig deeper and deeper into gender issues, but instead should look at connections between issues (such as inequality, poverty, stigma and discrimination) to see how it all fits together
- The need to incorporate structural issues into prevention programmes, such that we go beyond the ABCs (of Abstinence, Be Faithful and Condoms) to the broader issues that affect individual behaviour choices
- The need to incorporate the construction of masculinities and femininities into prevention programmes
- The need for the local and international perspectives on Gender and HIV/AIDS to dialogue, share experience and lessons learned to inform and enhance each other's work towards best practice
- The need to involve and provide genuine participation of the sectors of Canadian society that are at high risk, such as Canada's aboriginal people
- How do we educate youth about their rights?, especially those marginalized like Aboriginal youth in Canada
- The need to utilize gender roles, in both positive and negative forms, in the fight against HIV/AIDS
- How do you respect those gender roles as well as challenge those components which pose risks for people?

## 2. What were the most surprising or striking issues or messages?

- Race- how to incorporate it in work on HIV. Why do we so rarely talk about race in our work on HIV/AIDS?
- Disrupting the First world/ Third world division through youth involvement
- Dramatic increase in new infections in women in Canada as big surprise
- Glad that we heard David Divine's voice to speak on men and culture and masculinity and bring history into this work. How to understand those broader barriers in communities such as Black communities and Aboriginal communities in Canada

- June's presentation with the images by South African youth was very striking and has sparked a lot of personal introspection about images of HIV/AIDS
- Comments about what and who were missing today:
  - i. Where are the faces of women in Canada with HIV? Why not here? If one in four children born in Canada is Aboriginal, then why aren't they here? In June's presentation, we learned that Aboriginal youth were the ones who didn't put HIV as an issue for "others", but owned it in those discussions, therefore their genuine participation in these events is essential.
  - ii. Where are the positive women? Where are the Aboriginal women?
  - iii. What about disabled women? How are we reaching them?
- Unable to locate HIV positive women to participate or make media
  presentations on their experiences living with HIV in Nova Scotia.
  Perhaps the lack of established networks in the Atlantic region- and the
  ongoing challenges posed by stigma and discrimination in our
  communities- is why we don't have women willing to come out and talk
  openly about living with HIV in NS

## 3. How do we move forward into international development in the new millennium to tackle gender inequity in HIV and AIDS?

- Can't move forward without further involvement of positive women and Aboriginal voices
- Need to move beyond targeted approach (advocated by WHO) to broad based approach in dealing with HIV in Canada, a low incidence country. We should learn from the experience in Southern Africa, whose epidemiological path we are now following.
- Need to begin process of educational programming with local context
- Need evaluation and monitoring of HIV prevention education so that we know whether or not it is effective and appropriate
- Important work towards far greater coalition building between research institutions and other groups which are pivotal to HIV prevention. For example, research community must link with diverse groups such as those working on issues in Black communities such as Churches and community leaders
- Involve Millennium Development Goals in our work and in our objectives
- Toronto 2006 (World AIDS Conference)- we should be involved, make sure gender is a key consideration in the planning and content. Also, use the opportunity as a rallying point for work
- Education on gender and HIV/AIDS for medical community and front line health workers
- Need to work on further treatment options for women and need for further research on women

- We must be wary of the neo-conservative agenda of the USA with respect
  to sexual and reproductive health work. In particular, the threat posed by
  the American push for "abstinence-only" campaigns and control over
  donor-funded sexual and reproductive health programmes
- Need to pursue future opportunities for collaboration between research and government
- We should build a network or forum of people working on gender and HIV/AIDS and bring them together and see what each other are working on
- We should be sure to involve international students working on HIV and AIDS issues while studying here in Canada. Could we build a forum for their inclusion?
- We should continue to encourage new generation of HIV/AIDS research, and push for funding for this important work
- So much expertise around HIV is undocumented and we must work to make it accessible. We need to look at how NGOs incorporate research into their programming plans and support and enhance this work