Gender, Diversity and HIV/AIDS: A skills-building session for policymakers, practitioners and researchers

FINAL REPORT









Gender, Diversity and HIV/AIDS: A skills-building session for policymakers, practitioners and researchers FINAL REPORT is produced by:



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Introduction

The Atlantic Centre of Excellence for Women's Health and the Prairie Women's Health Centre of Excellence delivered a session at the XVI International AIDS Conference in Toronto in August 2006 that profiled gender-based analysis applied with a diversity lens (GBA) as an essential tool in HIV/AIDS policy, programming and research, and helped to build the capacity of participants to conduct GBA. The session used scenarios and case studies from local, national and international contexts that reflect a range of experiences related to HIV/AIDS. The delivery of the session was made possible by funding and support from the Bureau of Women's Health and Gender Analysis, Health Canada (BWHGA). Members of BWHGA also assisted with the delivery of the workshop.



Objectives

The development and delivery of this session at the XVI International AIDS Conference had three primary objectives:

- To increase awareness of GBA as an essential tool for developing and implementing HIV/AIDS policies, programmes and research.
- To build participants' capacity to undertake GBA as an integral component of their work on HIV/AIDS.
- To demonstrate how GBA can strengthen policies, programmes and research, to be more equitable, inclusive and effective.



Background

Experience in previous international HIV/AIDS conferences has indicated that while awareness of the integral role of gender in HIV/AIDS prevention, support, treatment and care is increasing, many people are still unable to incorporate their new understanding of gender into their work, due to lack of skills in gender-based analysis. Furthermore, the connections between policy, practice and research relating to gender and HIV/AIDS remain weak and need to be strengthened if effective responses to the pandemic are to be implemented.

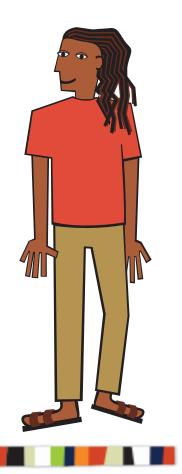
GBA is an analytical tool which uses sex and gender as organizing principles, or ways of conceptualizing information. It helps to bring forth and clarify the similarities and differences between women and girls, men and boys, the nature of their social relationships, and their social realities, life expectations and economic circumstances along with other determinants of health. It identifies how these conditions affect health status and the differential vulnerability to HIV/AIDS for women and girls, men and boys. GBA provides a framework for conducting research and data collection, and analyzing and developing policies, programmes and legislation. The GBA framework should be infused with a diversity analysis that considers factors such as income, age, race/ethnicity and culture, geographic location, level of ability, sexual orientation, etc., along with sex and gender. Effectively integrating sensitivity to gender and diversity into all work relating to HIV/AIDS prevention, treatment, care and support, cannot be done without highly interactive and hands-on skills training and capacity building. The objective of this session was to make an important contribution to building capacity in GBA

by working with participants to acquire an understanding of and practice in GBA. In this way participants would be prepared to undertake GBA in the context of their own work and/or would seek further training in GBA.

The Atlantic Centre of Excellence for Women's Health (ACEWH) and the Prairie Women's Health Centre of Excellence (PWHCE), together with Health Canada's Bureau of Women's Health and Gender Analysis (BWHGA), were well positioned to address these gaps through a skills-building session on GBA and HIV/AIDS at the XVI International AIDS Conference in Toronto, August 13-18, 2006. The Centres and BWHGA have a mandate and history of collaborative work, particularly in the area of policy relevant research. The Centres also work with their respective communities to ensure that their research is informed by the experiences of those infected and affected by HIV/AIDS. ACEWH has been working in the field of gender and HIV/AIDS for over six years, both domestically and internationally, particularly in the area of gender mainstreaming and gender-based analysis. PWHCE has developed GBA applications, which have been adapted and adopted regionally, nationally and internationally. These most recently include GBA for target populations for the Federal Initiative on HIV/AIDS, and a comprehensive GBA of the health status of women in Manitoba. In May 2006, ACEWH and PWHCE delivered a GBA skills-building workshop at the conference Gender, Child Survival and HIV/AIDS: From Evidence to Policy held at York University, Toronto. Furthermore, during the past ten years, PWHCE has developed and deepened networks and associations with marginalized and vulnerable communities of women, especially women living in poverty, Aboriginal women, and women living in rural, remote and northern Canada.

"Gender cultural contexts differ greatly, and need to be taken into account."

Together, ACEWH, PWHCE and BWHGA collaborated to deliver a session to build capacity in gender-based analysis with a diversity lens, and demonstrate the value of strengthened links between policy, practice and research.



Development

Regular teleconferences were held between ACEWH, PWHCE and BWHGA to develop the session format, scenarios and other workshop materials. All materials were circulated for comment and approval before translation and final production.

The session format was developed to include focused small group work in which participants work through scenarios and case studies to better understand the relevance and process of conducting a GBA and the consequences of ignoring gender and diversity considerations in the development and implementation of HIV/AIDS policies, programmes, and research.

Six new scenarios were generated which formed the basis of the small group discussions and facilitators' guides were developed to aid the delivery of the workshop and facilitation of the small groups. The scenarios were research-based and had factual components woven into narrative elements that allowed for easy identification of the issues and the characters. Additionally, they were carefully constructed to incorporate issues and principles that might emerge in a broad range of contexts and countries. They were composite portraits of real experiences and situations facing women and men infected and affected by HIV and AIDS-related illnesses. Each scenario was followed by three steps to guide the participants through the exercise. The scenarios covered the following areas:

- HIV and breastfeeding
- HIV community research
- HIV and access to AntiRetroViral (ARV) treatment
- HIV and gender-based violence
- HIV and the workplace
- HIV and statistics

Workshop Materials

A previously developed GBA checklist was revised to allow participants to enhance their ability to integrate gender considerations into policies, programmes and research relevant in a range of contexts (e.g. resource limited settings, international contexts, etc.) and with diverse populations (e.g. Aboriginal peoples, women in poverty, youth, people residing in rural remote areas, etc.). A bookmark explaining Gender, Diversity and HIV/AIDS and providing a checklist for conference participants to use during and after the conference when listening to presentations or speakers was produced.

An up-to-date list of useful background resources for each of the areas covered by the scenarios was produced for participants who wished to find out more about the issues covered in their group or for the other scenarios. A CD was produced containing all of the session materials. Where possible, materials were produced in English and French.

Each participant received a package of workshop materials containing:

- a copy of each of the six scenarios in French and English
- a GBA checklist in French and English
- a bookmark in French and English
- a list of background resources/references
- a CD
- information leaflets on gender and HIV/AIDS

"Great opportunity to network with people from very diverse locations."

Session Design

The two-hour session was designed in four sections with the majority of the time being given to small group work. The design of the session format was as follows:

Introduction of key concepts and explanation of small group work – Barbara Clow (ACEWH) and Margaret Haworth-Brockman (PWHCE) – 20 minutes

Small group work – a flexible programme was designed that could accommodate up to 12 groups of approximately 10 participants (two groups per scenario). Each group to be facilitated by a facilitator recruited from or by ACEWH, PWHCE and BWHGA. One group to work in French. – 60 minutes

Feedback/discussion between groups working on the same scenario – 20 minutes

Final wrap up, feedback on lessons learned – 20 minutes

The introductory presentation was intended to help participants to understand the terms "sex" and "gender"; appreciate the overlapping and discrete impact of sex and gender on health; and recognize gender differences that may affect HIV/AIDS awareness.

The small group work was designed to help participants to examine the role of sex and gender in the HIV/AIDS pandemic in terms of prevention, care, treatment, support and mitigation of impact; gain a basic understanding of gender-based analysis and practice it (GBA); and move from GBA in theory to its application in their own practices and policies.

"Not all gender sensitive programs and policies are neutral or harm-free."



What Actually Happened

The session was attended by over 100 participants from a wide range of developed and developing countries in Africa, Asia, Europe, South America and North America.

Some participants were French-speaking and used the simultaneous translation services available for the presentation section of the workshop. Francophone participants were also able to choose to join the small group that was facilitated in French. Unfortunately, due to the limited availability of French-speaking facilitators there was only one small group working in French. There were no translation services available for other languages and some groups had a significant number of participants with limited English.

At the end of the introductory presentation participants were also given the opportunity to choose to join a group working on Scenario Six, which focused on GBA and statistical and other quantitative data. This scenario was geared to people interested in and comfortable working with statistical and other quantitative data.

All other participants were grouped according to where they had chosen to sit in the room and were randomly allocated a facilitator and one of the other four scenarios. Due to the uneven size of the groups, the fact that there was only one group working in French and one on Scenario Six, and the arrangement of the room, the facilitators agreed that it would not be possible to include the third step in the original workshop design (feedback/discussion between groups working on the same scenario). The time allocation was adjusted accordingly to allow 80 minutes for group work.



Evaluations

At the end of the workshop participants were asked to fill in evaluation forms which asked the following questions:

- Were your expectations for this session met?
- What did you like most about today's session?
- What did you like least about today's session?
- What could have been done better?
- What is the most useful thing you have learned today?
- How would you rate the presentations and facilitation?

All questions were posed as qualitative (open format) not quantitative evaluations however some respondents chose to enter a grade or number value as an answer to question six. Sixty-two responses were collected and the evaluation feedback was predominantly positive. Of the 17 respondents that chose to allocate a numeric value to question 6, the average score was 7.67 out of 10 or 76.7%.

The participants' knowledge of and expertise in GBA varied widely; some were unfamiliar with the basic conceptual differences between sex and gender whilst others had already incorporated some level of gender analysis into their work. Despite this range, the discussions in each group were lively and productive and participants engaged with the social issues embedded in each of the scenarios as well as showing insight into the complexities of gender and HIV/AIDS. Some of the groups expanded their discussion to include issues of sexuality and its relationship to gender, especially where the scenario included an explicit issue of sexuality. Many of the discussions focused on the relationship of stigma and discrimination to the effectiveness of programmes and policies. There was consensus on the need for policy-makers and

programme developers to work with community-based organizations to ensure that they understand the characteristics of the population they are dealing with, especially the gender roles, expectations and limitations experienced by the people they are hoping to reach.

Participants were able to relate the content of the scenarios to their own country, culture and area of expertise or interest at the same time as they found common ground between their disparate social, economic and cultural backgrounds. Discussions that revealed the similarities and differences among the experiences of people working in similar fields (e.g. HIV prevention programmes for youth), but in very different circumstances, were valuable in breaking down some assumptions about the cultural barriers or lack of them in other countries.

The participants in some of the small groups came to the conclusion that policies and programmes that do not consider gender may not only fail in their objective but may also cause harm to the people they are intended to help. This was most obvious in the scenarios that used examples of abstinence programming and gender-based violence.

The participants in the small group that considered the issues involved in using data sets and statistics related to HIV and AIDS welcomed the opportunity to tackle and consider a concrete problem. For some participants this activity was directly relevant to their work and increased the relevance and usefulness of the workshop for them. This is the first time that that a scenario that requires participants to work with complex data sets was used and, although it can still be improved, we believe that it was a successful scenario that added an important perspective for the participants. Participants were invited to choose this scenario themselves (rather than be assigned to it) because it was felt that an interest in working with data was important for them to get the most out of the exercise. The feedback indicated

"Most skill sessions use activities but this is the first time I've used charts. I enjoyed this a lot."

"Data collection and the instruments used play a significant part in effective response to social and health issues."

that this approach worked and that allowing for areas of focus or specialization is possible even with such limited space and time.

Participants' suggestions for future workshops centred on the need for more time to discuss gender and diversity in relation to their scenario. The small group discussions, especially when the participants were so culturally diverse, needed a great deal of time for everyone to be able to contribute and for the complexities of gender and diversity to be explored. Participants also wanted the opportunity to discuss their scenarios with others working on the same one. This is particularly important in a skills-building session as it emphasizes the fact that there is no 'right answer' to the questions used to guide the participants through the GBA exercise. This very valuable component of a GBA workshop requires additional time and physical space to allow participants to form a larger discussion group. Finally, running such a short session limited participants to working on only one of the six scenarios. As a result participants did not have access to the wide range of issues and situations covered by the different scenarios which gave a broad view of HIV/AIDS in a range of socio-economic and cultural contexts. Participants were disappointed that they did not have the opportunity to work on all of the scenarios.

The other limitation of the workshop that was commented upon by some participants was the lack of opportunity (due to lack of available time) to move from doing a gender-based analysis on the scenarios to developing programmes or policies that would address the issues raised during the GBA.



Lessons Learned

Facilitators' Feedback

Feedback from the facilitators identified some key areas to address when conducting future workshops. Some of the following points illustrated the complexity of separating gender out from other issues and reminded us to ensure that the focus of a gender and diversity workshop needs to encompass issues other than gender. Having said this, it is important to focus on gender as a starting point rather than trying to engage in such complex and broad based discussions that it is not possible for the group to make any progress. The scenario that focused on social research with youth and abstinence as a prevention strategy was particularly vulnerable to this point as the facilitator's comments show:

"The youth group and abstinence scenario brings up so many issues around abstinence programming. Unfortunately, this is such a contentious topic that it often ends up the primary focus of conversation and can be difficult to keep gender and gender considerations at the forefront of the discussion. There were lots of debates around abstinence programming and then lots of discussion around research ethics."

"[The scenario needs] some way of personalizing the whole public-pledging [activity] so that their individual predicaments give a more concrete jumping-off point for the discussion, which might make it easier to keep gender as the focus."

The scenario on HIV and the workplace also raised questions and concerns about social justice and cultural factors that affect a young woman's ability to protect herself from HIV:

"The group spent more time trying to find solutions or justification for the young woman in her situation rather than looking at differential impacts within the situation. The group clearly stated that they needed more information in order to not make assumptions about the situation and also encouraged us not to make the mistake of imposing western culture/expectations onto the situation as well."

Other facilitators' comments presented new ideas that could be incorporated into the content or format of future workshops:

"What about transgendered people, those who don't fit male or female?"

"Some participants revealed that they were not clear on the distinction between sexuality and gender, and that the introductory slides explaining these ideas were passed over quickly. It seemed as though more time on sexuality and gender would have been helpful."

"Brief video clips rather than or in addition to written scenarios may be a consideration for future sessions. Short films are portable, can be carried on CDs or memory sticks and may do well in explaining nuances of the scenarios to non-English-speaking participants."

"I was hoping it would be more advanced discussion on gender-based programming, i.e., how to bridge the divide between creating gender sensitive programming and the gendered status quo, i.e., how do we empower women but also allow for/plan for/address their real lack of power dependence, etc."

Facility/set up

Although the room set up and facilities had been checked with the conference organizers beforehand the room and seating arrangement proved to be inadequate for small group work. Members of the Bureau of Women's Health and Gender Analysis, Health Canada specifically checked whether the seating could be rearranged to form the small groups and they were reassured that the seating was not fixed. In fact the seating was fixed in rows and this made the small group work very difficult as participants could not sit facing each other. In addition, although the capacity of the room was 120 people, it was too small to accommodate the noise level generated by nine small groups. The combination of the seating arrangement and the noise level in the room made it very difficult for participants in the small groups to hear each other and therefore significantly impeded the conversations. The facilitators in each group relayed the discussion to others who could not hear (or in some cases understand) the speaker and in this way each group managed to complete their activity and generate interesting and lively discussion.

The conference volunteers were very helpful and contributed to the overall smooth running of the workshop. Even with the support of such on-site volunteers, future workshops must have a floating facilitator to monitor the overall process, the progress of the small group discussions and to integrate latecomers into the workshop.

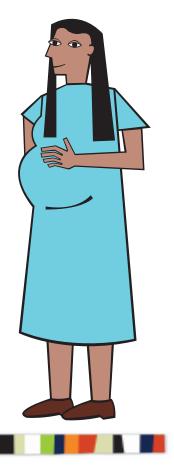


Conclusions

The popularity of this workshop and the enthusiastic participation of the attendees proved that there is sufficient interest and need for GBA skills-building workshops to be run in the future in a variety of venues and conferences.

The workshop successes and challenges, combined with the time and resource commitment required for development of the session, materials and resources, underscore the need for a full-day session on GBA and diversity. This was particularly true in terms of how much could be accomplished in such a short period of time and the eagerness of the participants to both cover more scenarios and to move from a basic GBA to programming and policy formation.

When conducting this kind of workshop at a large conference it was agreed that it worked well that we ran the session on a day before the full conference started. This suggests that at future conferences a gender and diversity workshop would be most effective if it was run as a full day and as a separate satellite session or symposium prior to the start of the conference.



Next Steps

It is proposed that the Atlantic Centre of Excellence for Women's Health and the Prairie Women's Health Centre of Excellence, together with Health Canada's Bureau of Women's Health and Gender Analysis, deliver a full-day session at the XVII International AIDS Conference in Mexico City in August 2008 that profiles gender-based analysis applied with a diversity lens (GBA) as an essential tool in HIV/AIDS policy, programming and research. ACEWH and PWHCE will, in the meantime, participate in similar national and international opportunities, as appropriate.

This session should be organized to allow participants to engage in increasingly complex levels of GBA and lead them to programming and policy development activities.

The session should be scheduled to run on the day before the official opening of the conference on Sunday, August 3 to ensure that participants can engage fully with the material and the activities and get the most out of the workshop.