



## **Technical Project Report**

### **Third Balkans HIV and AIDS Conference**

### **HIV and Gender: Creating an enabling environment**

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## **Introduction**

The Third Balkans Regional HIV Conference on HIV and AIDS, with the theme of *HIV and Gender: Creating an Enabling Environment* was organized by Fondation PH Suisse – *Partnerships in Health* (FPH) on March 27-28, 2008 in Sarajevo, Bosnia and Herzegovina. This conference is an important forum created by the Western Balkans HIV and AIDS programme which has been supported by Sida and implemented by *Partnerships in Health*. The Balkans regional programme promotes regional exchange and capacity building with a thematic focus relevant to HIV annually through this forum. The conference was made possible with support from Sida, UNAIDS, UNDP, GFATM Bosnia and Herzegovina and Serbia, UNICEF, UNFPA, WHO, ILO, UNIFEM, Jensen-Cilag, GlaxoSmithkline, and Roche.

### **1. Project activities**

The main goal of this conference was to advocate for an increased awareness and understanding among participants on how gender influence HIV vulnerabilities and how sensitivity to gender issues can improve the effectiveness of HIV prevention and AIDS care programmes. In addition, updates on clinical protocols and including again the vulnerable populations' own voice, as well as special recognition of good media practice from the regions, were included in the Conference programme. Most sessions were participatory which encouraged discussion between participants and panellists. The conference programme provided participants with an opportunity to view HIV from a gender lense; share examples of how gender has been taken into account in other programs; and gain an understanding of how entrenched gender biases affect members of vulnerable groups, female as well as male.

The conference was attended by more than 190 participants from 15 countries, representing Ministry of Health, Ministry of Civil Affairs, Ministry of Education, local administration, institutes of public health, local and international NGOs, PLHIV, members of vulnerable populations, specialists and representatives of international organizations (including five out of the ten UNAIDS co-sponsors) and FPH technical and programme staff. Among the participants, 38% were from the public sector, 49% from NGOs and 9% from international organizations. Participants from Kosovo were unable to attend due to the political situation between Kosovo and Bosnia and Herzegovina. This third conference garnered 50% more participants compared to the 2<sup>nd</sup> conference, indicating the increasing recognition by countries of this region on the need and importance of this forum. Partners of this conference have suggested to FPH to expand this forum in the future years to the Southern and Eastern Europe region.

The two-day conference programme consisted of plenary sessions, and skills building parallel sessions using a mixture of presentations and interactive methodologies. In addition, organizations shared their manuals, tools and publications allowing the important technical publications from entities such as UNAIDS and ILO be efficiently disseminated to the participants.

### **Day One**

The conference was opened by Dr. Senad Sepic, Deputy Minister of Civil Affairs, Bosnia and Herzegovina, who emphasized the need to keep this region low in HIV prevalence. Dr. Amela Lolic, Deputy Minister of Health and Social Welfare RS welcomed the participants on behalf of the Ministry of Health. The welcome statement of Sida was delivered by Mrs. Emma Sundberg, Sida Stockholm. She shared Sida's position that men and women manifest their vulnerabilities differently, and that the involvement of men is essential to respond to gender-based HIV

vulnerabilities. The FPH Executive Director, Dr. Bettina Schwethelm highlighted the role of the regional approach and conference to develop a joint vision for the region and expressed her regret that some participants who had wanted to attend were not able to come.

The *keynote speech* by Mrs. Damira Sartbaeva, Regional Program Director, UNIFEM, CIS, described the inclusion of gender concepts in national programs, using Kyrgyzstan as an example. She stated that social and cultural dimensions of gender related inequality is both a cause and consequence of HIV, but that synergies could be harnessed between gender equity advocates and HIV workers.

A plenary session on the *Roma perspectives of Gender and HIV*, presented by Maja Grujic and Indira Bajramovic, World Vision BiH and Mira Novakovic, Novi Sad Humanitarian Center, Serbia, pointed out the lack of reliable data about the Roma, their poor conditions, particularly in Serbia, and their lack of rights (civil status, access to health information and services, schooling and political influence and voice). The panellists stressed that Roma must be involved and their culture addressed in all interventions and that learning from good practice examples in the region (Romania and Bulgaria) is key to improvements for this population group.

Three parallel skills building sessions followed.

(1) *EACS guidelines for the management of HIV infection* Infectious diseases specialists from the region, Dr. Djordje Jevtovic, IDS, Serbia, Dr. Nenad Draskovic, Montenegro, Dr. Arjan Harxhi, Albania, Dr. Milena Stevanovic, Macedonia, and Dr. Vesna Hadžiosmanovic, BiH, discussed the EACS guidelines vs. what they can actually offer to their patients. These specialists pointed out that much advocacy with policy makers is needed to assure the availability of essential medications for treatment; that generic drugs have a short shelf-life; and that as small-market countries resulting in Pharmaceutical companies lacking the interest to go through drug registration. There is a need to balance the need of evidence- based approach vs. the feasibility of treatment costs to adjust decision on their use in each country's context. Establishing a regional treatment centre could contribute to improved care; and there is a continued need to improve the education of health care professionals.

(2) *Gender-based violence and implications for STI and HIV prevention* Eljona Kulluri, Albanian Social Worker Association, Vesna Stanojevic, Counselling Centre Against Family Violence, Serbia, and Duska Andric Ruzicic, NGO Medica Zenica, Infoteka Department, BiH. presented the definition of gender-based violence (GBV), statistics, victim profile, and causes. It is clear that GBV, including human trafficking is pervasive and increasing in the countries of this region. The presenters recommended humanizing the relationships between the sexes: integrate gender education in general education, health education and mental health; involving key stakeholders in the prevention of GBV, trafficking and HIV; increase government commitment to support safe houses, dealing with the perpetrators of violence; and improve the civil status of Roma children to reduce trafficking.

(3) *Mental Health and HIV* Dr. Cardaklija, National AIDS Coordinator, BiH and Dr. Schwethelm, Executive Director, *Partnerships in Health*, reported on the qualitative and quantitative needs assessments of mental health and social workers in BiH, Macedonia and Serbia. Their work indicated that knowledge of these providers at the primary care level is inadequate, client confidentiality is often not maintained, and provider induced stigma affects the effectiveness of these workers in prevention counselling, referral and support to PLHIV. Jovana Stojanoviski and Marina Stojanovic, IAN, Serbia then discussed mental disorders in PLHIV and the importance of mental health providers to act as agents of change.

**Global Fund update** Philip Crec'h, Fund Portfolio Manager, Eastern Europe and Central Asia, Ana Milosavljevic, PIU Director Assistant, GF HIV Project in Serbia, Dr. Nesad Seremet, Programme Director, PIU of the GFATM, UNDP BiH, Karlo Boras, Acting Board Member, Developing Country NGO Delegation, Eastern Europe, GFATM shared strategic directions related to gender and round 8 proposals.

## Day Two

Dr. LeeNah Hsu, Regional Programme Manager and Senior Technical Advisor, FPH, provided a summary of the key points covered on Day One.

A inspiring special good practice panel from Albania on ***the right to schooling of children living with HIV: Albania multisectoral response*** was presented by Olimbi Hoxhaj, Director of Albanian PLHIV Association, Anila Tabaku and Suela Balaj: Ministry of Education and Directory of School, and Gerti Xhaja, a journalist shared this good practice example with the participants on how the initial rejection by parents of children of a school on the attendance of HIV positive twins actually resulted in improved legal protection of children to education through advocacy, and public education by the PLHIV association the media, and a supportive position by school administrators in collaboration with the Ministry of Health and International Organizations.. This session also highlighted a good practice example of media reporting from the region in the past 12 months. This plenary session was followed by three parallel skills building sessions.

(1) ***Introducing gender analysis for HIV prevention*** Roman Gailevich, UNAIDS Regional Support Team, Russia, Iva Jovovic, UNAIDS, Croatia, and Dr. Silvia Koso, UNOPS, Serbia reviewed the definitions of sex and gender and showed how gender norms affect roles, behaviors and actions in a society. They pointed out, through participatory exercises that in view of the fact that gender concepts are acquired, they can be changed to improve the effectiveness of HIV programming.

(2) ***FPH model of primary health care provider capacity building*** *Partnerships in Health* developed a training model that includes a course to build trainer skills through coaching, role modelling, monitoring and evaluation for feedback and involvement of PLHIV as resources people for the training. The session was conducted by the FPH local implementing partners and staff, Dr. Sana Sabovic, BiH, Dr. Nenad Draskovic, Montenegro, Dr. LeeNah Hsu, FPH, and Klodjan Meta, Resource team member, Albania. The trainings have applied the principle of Greater Involvement of People living with HIV or AIDS (GIPA), promoted universal precautions in the workplace, and engaged primary care providers to promote early detection of HIV with VCCT.

(3) ***How are gender and HIV issues are addressed in UNFPA youth programming*** Zeljka Mudrovic, UNFPA BiH, Elsona Agolli, UNFPA Albania, Silvia Rukavina, Y-PEER, Croatia, and Naida Kucukalic, Y-PEER, BiH shared in an interactive way, how gender sensitivity is built into the Y-PEER approach, but pointed out that the Y-PEER approach should be adapted for Roma and other minority populations.

There were four parallel skills building sessions in the afternoon of the second day.

(1) ***Targeting the gender dimensions of AIDS through the workplace*** Pallavi Rai, Gender Focal Point, ILO Switzerland, Klelija Balta, Gender Programme/Learning Manager, UNDP BIH, and Mirela Kadribašić, Coordination Assistant, UNDP BIH presented this session.. It became clear that much needs to be done in terms of establishing workplace policies and approaches in

the Balkans region. ILO developed several resource materials including the *ILO Code of Practice* – a gender sensitive tool. ILO's experience in Eastern Europe and CIS region could contribute to new collaborative partnerships to reduce gender bias and workplace discrimination.

(2) ***Bio-behavioural surveillance methodology*** Aida Kurtovic, FPH, BiH, Dr. Ljubica Jandrić, IPH of RS, BiH, and Dr. Jelana Ravlija, IPH F BiH presented the BBS in BiH to gain better understanding of the behaviours of at-risk populations. Various methodologies were applied to gain access to these hard-to-reach populations. The information gathered from this study can be utilized to develop better policies and program activities in the future.

(3) ***Creating an enabling environment for addressing gender and adolescents most at risk of HIV and AIDS*** Aine Costigan, UNICEF, Switzerland, Dr. Ljupco S. Risteski, Institute of Ethnology and Anthropology, Macedonia, Marina Pema, Institute of Public Health, Albania, Jelena Zajeganovic, UNICEF Serbia, Suzana Vukoje, Jazas, Serbia discussed the overlapping risks of youth and other populations (i.e., MSM may have sex with females, adults have sex with youth) and study findings that sexual initiation is starting at ever younger age. Gender and age issues need to be integrated in national plans, operation plans, and programs (e.g., child protection services, activities with street children).

(4) ***TB/HIV co - infection - How can the patient really benefit from our interventions?*** This session had been planned for the second annual conference in 2006 in Montenegro, but had to be cancelled by WHO in addition to the fact that conference participants had to be evacuated from the conference venue due to a bomb threat. Lucica Ditiu, Medical Officer from the Communicable Diseases Unit of WHO Regional Office for Europe conducted the session. Due to lack of good data, the extent of HIV and TB co-infection in the region is not clear. However, alarming increases of MDR and XDR TB in neighbouring countries and the fact that TB is difficult to diagnose in PLHIV indicate a great need in the region to mobilize governments, providers, and communities to strengthen local capabilities.

The main programme of the conference concluded with a plenary panel, ***Voices of vulnerable populations: Gender related challenges for HIV prevention.*** Our main collaborators and beneficiaries spoke to the participants directly. This session, first initiated in the Second Balkans Regional Conference, received excellent feedback from participants in 2006. It has been decided that a platform will be devoted in each annual Conference for these voices. This session serves as a reality check and motivates participants to involve the active participation of vulnerable populations in HIV responses. A female drug user from BiH, MSM from Albania, and PLHIV from Macedonia, shared their stories and recommendations to the participants. It is clear that much remains to be done in the region with respect to advocacy, protection of human rights and service delivery in reducing stigma and discriminations, including from the health care providers.

The panel recommended to all participants the following:

- Female drug users require a different therapeutic approach from males to deal with trauma and other underlying factors
- MSM are far from being accepted by society. They need to receive good information about HIV and its prevention
- Members of vulnerable groups should receive equal treatment to that of all European citizens
- Health professionals should be advised to attend this session to face the reality of what the vulnerable populations experience at the health services

- PLHIV should be treated as any other human being and not just receive charity. They want a dignified life and be able to participate fully in society and make their contributions.

Dr. LeeNah Hsu, Regional Programme Manager and FPH Senior Technical Adviser highlighted the recommendations from the voices of the people for the Conference participants to take home and practice: Integrate gender consideration in HIV policy and programming. Treat everyone as an equal human being. Allow everyone to make contribution in our efforts to contain the HIV epidemics throughout our life span.

Mrs. Emma Sundberg, Sida HQ Project Officer. Dr. Lolic, the Deputy Minister of Health and Social Welfare, RS, and Bettina Schwethelm, FPH Executive Director closed the Conference urging the participants to take home and practice what new knowledge they gained from this Conference and to renew the collaboration in the region and beyond.

## **2. Project Outputs**

The conference produced the following outputs:

- Conference report, to be translated into local language and posted on the Western Balkans HIV and AIDS website: [www.balkans-fight-hiv.org](http://www.balkans-fight-hiv.org)
- Presentations
- Participant evaluation of the conference and recommendations to FPH for the planned fourth conference
- List of conference participants

## **3. Use of outputs**

The outputs of the conference will benefit the Western Balkans Regional Programme, and its country, regional, and international partners on HIV prevention, care and support activities. The conference report will be shared with the participants and be available on the programme website: [www.balkans-fight-hiv.org](http://www.balkans-fight-hiv.org). The presentations serve as reference material for HIV programmes; the evaluation will be utilized in planning of the 2009 Regional Conference; and the participant list, comprising the key stakeholders on HIV in the region, will form the basis for continued regional networking and for receiving inputs for 2009 Regional Conference organization.

## **4. Degree of achievement of short-term objectives of the project**

The short term objectives of the conference were as follows:

- (1) To create a shared understanding of gender and its role in HIV prevention and AIDS treatment and care in the Balkans
- (2) To provide a forum of exchange on how to address gender issues for effective HIV and AIDS programming at the local, national and regional level

This conference has the largest number of participants of the three regional conference being organized to date. The total number would have exceeded 200, had the Kosova delegates been able to participate. Participants represented Ministries of Health, Education, Institutes of Public Health, local and international NGOs, representatives of the United Nations, particularly the UNAIDS co-sponsors and international agencies, staff of GFATM and country implementers, and bilateral and international donors. Essential for the purpose of the conference and HIV

stakeholders were the representatives of the vulnerable populations including PLHIVs, which as in the two prior regional conferences, contributed, through their candid sharing of challenges and barriers, to the conference's grounding with the realities outside its doors.

Participants acquired insights about gender mainstreaming and new collaborative relationships were established. For example, ILO expressed an interest to provide support for workplace programme in the region. Croatian & Montenegro participants are interested in the HIV related training needs assessment for mental health and social workers.

## **5. Participant feedback via evaluation form**

All the items related to the organization of the conference were rated by participants to be above 70% with the highest score given to the conference facility at 90% and lowest marks for the conference website at 71%. As for the sessions of the Conference programme, the range of rating was from 50% to 93% with the key note speaker rated at 50%. The two skills building sessions: TB-HIV co-infection and most at risk adolescent sessions received the 93% score. It is encouraging to note that from 80%, 64% and 65% respectively of responding participants are interested in contributing to the planning, organization and co-financing of the 2009 Regional Conference. With respect to the open-ended responses to what "*participants liked best about the conference*", 42% of the respondents mentioned the discussion, exchange, interaction, meeting of others, networking, etc.; 28% a theme, a particular panel or topic, data or experts; and 6% the people or diversity of the participants. Many potential topics were recommended for next year, and there was no single topic that emerged. *Partnerships in Health* will consult with local and international partners on the next theme and conference location.

## **6. Degree of achievement of the main objectives**

The Conference has contributed to creating a shared understanding of gender and its role in HIV prevention and AIDS treatment and care in the Balkans through the exchange of experiences among participants on how to address gender issues for effective HIV and AIDS programming from the participating countries.

The Conference has increased gender awareness of many participants based on their direct individual feedback. It is hoped that such improved gender awareness will eventually translate into improved level of gender mainstreaming in future HIV activities in the region, including the generation of sex disaggregated programme data, over time.

## **7. Conclusions**

The theme of gender and HIV of this Conference is particularly timely in view of the international commitments in view of the advocacy by the Global Coalition on Women and AIDS, the strengthened support to gender responses in the upcoming 8<sup>th</sup> round of Global Fund to Fight AIDS, TB and Malaria, in addition to major bilateral donors' support on mainstreaming gender in HIV responses. The Balkans region has much to improve on the gender sensitive HIV interventions, this Conference contribute to fostering collaborative partnership in meeting this challenge for the people of the region.

## **8. Recommendations and follow-up**

It is clear from the conference evaluations that the Conference has an important role in the region for exchanging information, discussion, networking, as well as transmission of information.

Participants are overall happy with the organization, but recommended further improvements on presentations, interactivity, and a more direct linkage of their work to real life.

The participant recommendations will be taken into account in the planning for 2009. In addition, the recommendation of the UNAIDS representative, Roman Gailevich, to further build the capacities of the local partners and include the larger Balkans and neighbouring regions will be taken into account.

The Western Balkans Programme to fight AIDS, TB and Malaria will continue its advocacy and capacity building in countries and regionally to contribute to the sustainability of gender-sensitive HIV responses that incorporate greater involvement of PLHIV. To achieve this requires the collaboration of all its partners and stakeholders in the region and beyond.

## **9. Annexes**

- (1) Participant list
- (2) Conference agenda
- (3) Financial report