

Netzwerk Gesundheit für alle Réseau Santé pour tous Network Health for All

aidsfocus.ch

Minutes of the Annual Meeting of aidsfocus.ch, the Swiss platform on HIV/Aids and international cooperation

October 31, 2011, 13.45 – 16.45 p.m., Swiss Red Cross, Rainmattstrasse 10, Berne

Agenda

Part 1: Formal Part (13.45 - 14.30)

- 1. Minutes of the Annual Meeting 2010
- 2. Annual Report 2010/11 and accounts 2010

Accounts 2010

- 4. Activities planned for 2012
- 5. Theme of the aidsfocus.ch conference in spring 2012
- 6. Election / confirmation of members of the Steering Committee Varia

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Part 2: A wider focus of aidsfocus.ch? Sharing of experiences and discussion with Aagje Papineau Salm, Chair of Share-Net, Netherlands network on sexual & reproductive health and aids (15.00 – 16.45)

Participants:

Steering Commitee: Daniel Bruttin (Swiss AIDS Federation), Kate Molesworth (Swiss TPH/Moderation Part II), Rao Satapati (CO-OPERAID), Vreni Wenger (Medicus Mundi Switzerland), Coordinator: Helena Zweifel (aidsfocus.ch/MMS/ Moderation Part I).

Partners:MiekeEberhardt(KindernothilfeSchweiz),GabrieleHansch(SwissRedCross),StefanHoffmann(KwaWazee),LinusG.Jauslin(AIDS & Child),BarbaraMüller(FEPA),MikeNielsen(WorldVisionSwitzerland),IsabelleVianden(TearFund).MMS:MartinaStaenke(Minutes).

Guests: Muhundike Hambaya (Prison Fellowship Zambia), Andreas Loebell (SDC), Aagje Papineau Salm (Share-Net Netherlands), A. Rhino, Luciano Ruggia (BAG).

Apologies: Romana Büchel (Fastenopfer), Irene Bush (terre des homes switzerland), Meehyun Chung (mission 21), Patrick Durisch (Berne Declaration), Jochen Ehmer (SolidarMed), Tony Jungo (INTERTEAM), Yanik Marguerat (Federation genevoise de cooperation), Joel Meir (SolidarMed), Maya Natarajan (IAMANEH), Ignacio Packer (Terre des Hommes Foundation).

Welcome

Helena Zweifel, coordinator of aidsfocus.ch, welcomed the participants in the name of aidsfocus.ch and chaired the assembly. 10 of 29 partners were present as well as representatives from SDC, BAG, Share-Net Netherlands, Prison Fellowship Zambia and MMS.

Part 1: Formal Part

11. Minutes of the Annual Meeting, October 26, 2010

The minutes were approved.

2. Annual Report 2010/ 11 (till End of July 2011)

Helena Zweifel gave a brief overview of the most important events in the last period as described in the annual report. The highlight was as usual the aidsfocus.ch conference.

The annual report was approved.

3. Accounts 2010

The coordinator commented some figures: On the one hand there had been additional expenses such as the production of the alternative report "Engagement gegen Aids. Versprechen sind nicht genug". On the other hand there had been additional income for free distribution of toolkits in the South. Overall expenses and income are balanced.

The accounts 2010 were approved.

4. Activities planned for 2012

- Review of the strategy
- Annual conference in April 2012
- Website and aidsfocus.news
- Meeting Points

Review of the strategy

The Steering Committee will review the aidsfocus.ch strategy and develop a new one for next four years. The three main objectives will be will be reflected and if necessary revised: 1. Sharing of experiences 2. Capacity building of the members and 3. Advocacy: Sensitisation and raising awareness.

Website, aidsfocus.news and Social Media

In the moment the aidsfocus.ch website and the aidsfocus.news are getting revised in order to make them more attractive and dynamic. The new website will also include Social Media Tools such as facebook, twitter etc.

Meeting points

The coordinator encouraged the participants to inform her when they have guests from the South in order to share experiences with other partners.

The coordinator also informed that aidsfocus.ch will present at the "<u>6ème conférence</u> <u>francophone sur le VIH</u>" in Geneva from 25-28 March 2012..

5. Theme of the aidsfocus.ch conference in spring 2012

Helena Zweifel opened the discussion and encouraged the participants to propose themes for next year's aidsfocus.ch conference.

Discussion: Barbara Müller introduced the topic "Advocacy and HIV". According to her observations in Zimbabwe, advocacy has become an important issue. A lot of people who are living with HIV are organized in advocacy groups. An example: Because no medication had been available in the province people demonstrated in front of the medical provincial office until the office agreed to look into the problem. It was found that the drugs were stored in the

capital city and it would need some action to bring them to the province where they are needed. She was impressed to see what impact the advocacy groups had. Even the National AIDS Council adopted this approach and got people trained to stand up for their interests and rights.

Kate Molesworth supported the idea. She is particularly interested in hearing some speakers from the affected communities. In the context of some legislation and political movements against MSM this year in Africa advocacy gained additional significance. The topic could be expanded to include activism. The model for activism is the Treatment Action Campaign (TAC), and it could be a highlight of the conference if someone from TAC in South Africa would address the conference.

Stefan Hofmann was convinced that the advocacy efforts of his organization dealing with older people had increased their success. He felt that the longer he worked in a certain field, the more important advocacy got.

Luciano Ruggia was interested to know how far reports and declarations on human rights have direct impact on the affected people in the countries: Do they know about them and what is the real impact in the field? Barbara underlined that they do have impact. People used the arguments from the International Human Rights debates when they approached the governments. Linus Jauslin is also in favour of this aspect: It could be interesting to learn about how activists get their information and how they use it.

Decision: The aidsfocus.ch conference on April 17, 2012 will be devoted to the issue of "Advocacy and HIV".

Helena Zweifel invites all interested parties to join the advisory group, which will meet once or twice to prepare the conference. The Swiss TPH, FEPA, KwaWazee are ready to take part. More interested parties are most welcome.

6. Election / Confirmation of the Steering Committee

The current members stood for re-election: Vreni Wenger (Medicus Mundi Switzerland), Rao Satapati (CO-OPERAID), Daniel Bruttin (Swiss AIDS Federation), Kate Molesworth (Swiss Tropical and Public Health Institute) and Tony Jungo (INTERTEAM)

Helena Zweifel introduced Jochen Ehmer, who like to join the Steering Committee and fill in the vacancy left by Ignacio Packer (Terre des hommes Foundation). Jochen Ehmer could bring in the medical aspects in the context of international cooperation. Jochen Ehmer, who is currently travelling in Tanzania, is the Head of the International Program Department of SolidarMed. He is a medical doctor with additional training in tropical and HIV medicine and humanitarian assistance. He has a lot experiences as a general physician, as country coordinator of SolidarMed's program in Mozambique and as desk officer for Mozambique and Coordinator of the regional program SMART (HIV/ Aids Treatment Program). Helena recommends Jochen for election.

Decision: All current members were unanimously confirmed in office. In addition, Jochen Ehmer was unanimously elected as a new member of the Steering Committee.

The coordinator thanked the members of the Steering Committee for their valuable support.

Part 2: Sharing of experiences and discussion: A wider focus of aidsfocus.ch?

Should aidsfocus widen its focus to link HIV and sexual and reproductive health and rights (SRHR) in its objectives, programs and activities? Aagje Papineau Salm, Chair of Share-Net, Netherlands network on sexual & reproductive health and aids, was invited to share the approach and experiences of Share-Net. Like aidsfocus.ch Share-Net aims to maintain and strengthen the capacity of its members through information sharing, capacity building and advocacy, however, with a wider focus.

Kate Molesworth introduced Aagje Papineau Salm who is a medical doctor with a background in sexual and reproductive health, HIV and health systems, field experiences and work in the Dutch ministry of foreign affairs (MFA).

History and background of Share-Net: The network started in 2000 with two families: On the one hand there were strong activist AIDS organizations with influence on the policy of the ministry. On the other hand there was a rather loose group working on sexual and reproductive health and rights (SRHR). Aagje who worked at that time for the ministry of foreign affairs was a strong supporter of the network.

Positive results from 2000-2007: The network had a strong secretariat and active participation of the members. Of importance was the participation in policy development by working together with parliamentarians. **Weaker points:** The integration of the "two families" was not really addressed. Advocacy and lobby became controversial issues. In the Netherlands advocacy was mainly directed towards the government and people want to act with one voice. Because Share-Net was and is a network with very different organizations (conservative groups, activist groups fighting for access to abortion etc.), this was not possible. After the funding from the government stopped the question about the relevance of Shar-Net arose. Some organizations left Share-Net.

Restart in 2008: People expressed their need for cooperation and information exchange and of a strong platform. SRHR became more important in the policy of the Netherlands government and the HIV/AIDS groups were more inclined to include sexuality in their programs. **Framework 2011–2013**: 1. Information exchange (biweekly magazine). 2. Capacity development. 3. Platform for discussion and dissemination. 4. Sharing of knowledge on best-practices. 5. Facilitating policy dialogue and advocacy. For example the ministry of foreign affairs regularly involves NGOs and Youth in the official delegation to UN Meetings. Therefore Share-Net organized a meeting and formulated its input, thus giving the members of the network to react on the plans of the ministry. For Aagje this is a very important instrument for policy dialog. **Priority themes within this framework**: 1. Healthy sexuality. 2. Integration SRHR and HIV/AIDS. 3. Focus on key populations as for example sex workers, drug users, MSM and gay communities etc. 4. Integration in health systems.

Balance: The work on the interface of the two domains of Share-Net is functioning quite well: In short there will be a meeting on medical male circumcision to look at the issue from the position of women? The strong link to the ministry of foreign affairs is going on. Weaker points are that the steering group is not elected by the organizations like aidsfocus.ch does and functions more informally.

Aagje summarized the Pro's and Con's of integration: *Pros:* 1. Sexual behavior deterministic for both. 2. Same root causes. 3. Inter-related health outcomes. 4. Efficient use of resources. 5. Access to multiple components. 6. Increase client satisfaction. 7. Reduction of HIV-related stigma. 8. Less missed opportunities. *Cons:* 1. Increased workload personnel. 2. Lack of knowledge at both sides. 3. Negative attitude towards PLWH. 4. Weak infrastructure + health system. 5. Different funding streams + actors. 6. Focus on women and key-pops. 7. Difficult to integrate men and youth.

Discussion: To what extent should HIV/AIDS and sexual and reproductive health and rights (SRHR) be linked? Should we strive to include additional issues and aspects in our work?

Kate summarized her impressions: From an organizational point of view there seemed to be more pro's for including SRHR, but for people in the field there are more con's because they are already overworked and not trained for this additional task.

Vreni Wenger stated that we do it "not necessarily" need to include all issues. It is still up to the individual partner organization to focus on certain issues. It depends on their programs and their constituency what they are going to realize in the field. For Linus Jauslin, it is more important that AIDS remains on the agenda. aidsfocus.ch should concentrate on themes surrounding HIV and AIDS like advocacy and psychosocial support instead of going into new fields. AIDS has to do with sexuality, but it is not possible to do everything. Rao Satapati shared this opinion and expressed that aidsfocus.ch should also focus in future on AIDS and on the vision which was formulated in the beginning eight years ago. Mike Nielsen said that while it is necessary to have a clear focus we should also have some considerations on SRHR.

Barbara Müller emphasized that sexual and reproductive health and rights issues cannot be separated from HIV and AIDS and that we have to include it if we want to prevent HIV. Sexual health is a big issue for youth groups and young women, it is closely related to family planning and cannot be separated. We cannot necessarily do and integrate everything but it is important to have an open perspective. The Swiss AIDS Federation (SAF) had some experience in this regard as Daniel Bruttin reported. SAF and PLANeS had discussed the issue of integrating all aspects of sexual and reproductive health and rights and HIV. The realization that they were losing competence if they tried to do everything made them decided to split the work. PLANeS concentrates on SRHR of women and SAF on SRHR of men and gay people.

Andreas Loebell raised another aspect: How far were NGOs pushed into integration of HIV and SRHR by experiences in the field and how far were they pushed by donors? Vreni Wenger was convinced that hardly any partner organization acted donor driven. Pressure has come up based on needs of people and additional topics like psychosocial support, treatment, testing etc. had to be integrated.

Kate as a strong supporter of mainstreaming and multisectoral approaches advocated for broader thinking. For example a few years ago HIV and food security had been quite separate fields and resistance came up when programs started to link these two sectors. The Global Fund brought about a switch because of the fact that people are taking ARVs but were not recovering because they hadn't adequate food. It is our responsibility to have a broader awareness, to realize new trends and to consider the needs of the people on the ground. We don't have to become all experts in family planning or SRH but we should get a broader picture of humankind. She felt that aidsfocus.ch should go in the direction of linking HIV and SRHR.

The steering committee will follow up the discussion in the review of the strategy of aidsfocs.ch.

11. Thanks and farewell

Helena Zweifel expressed her thanks to Aagje and Kate for their valuable inputs and to all participants for their coming. Helena also thanked Linus who will retire at the end of this year for his commitment from the very beginning of aidsfocus.ch.

For the minutes:

Basel, December 2011

Martina Staenke Medicus Mundi Switzerland