

ANNEXE

Outcomes workshop and panel discussions

In a series of workshops, the Expert Meeting participants discussed issues of sexual minorities in different technical areas. The recommendations, opportunities and challenges identified by the working groups are as follows:

A. Workshops on implications for policies and implementation in terms of epidemiological facts, variances and absence of data, decriminalisation and destigmatisation in a hostile environment, and gender identities and sexual variances

i. MSM

Recommendations

a) Epidemiology

- Conduct community-centred, high-quality research
- Make use of research data for advocacy, programming and policy
- Ensure publication and dissemination of yet unpublished quantitative and qualitative research data

b) Hostile environment

- Be advocates/activists (risks and safety)
- Develop community-centred policies
- Work within existing national and international frameworks, for example the CCMs

c) Gender identities and sexual variances

- Know your culture and national/local context
- Be careful with and sensitive about terminology, language, identities, behaviours and practices
- Link agendas and issues, for example WSW and TG

Opportunities and challenges

- How to secure funding for community-centred research
- Capacity
- Lack of quality in research
- Funds to follow PPI/data

- Continuous stigma and discrimination
- Oppressive laws and policies, which create safety and risk issues
- Enabling laws do not always achieve results on the ground

- Embrace the complexity of diversity
- Ensure the commonality of purpose and issues

ii. WSW

Recommendations	Opportunities and challenges
<ul style="list-style-type: none"> • Engage women’s groups • Empower women’s involvement • Need to creativity in identifying WSW • Train medical providers • Inclusion of women in political process • Policy allowing sex education • Marketing the need for WSW programmes and services 	<ul style="list-style-type: none"> • Women are in the HIV forums but too often unable to be represented as WSW • Brazilian women have a strong access to political participation • Political advocacy and moment largely coming from MSM • Criminalisation laws • Political exclusion of lesbians (WSW)
Epidemiology	
<ul style="list-style-type: none"> • Increased community-level data • Increased empirical data on WSW • Needs assessments • Create women-friendly research tools • Internet tools targeting WSW 	<ul style="list-style-type: none"> • Gaps in data • Gaps in knowledge • Anecdotal data • Lack of programming for WSW • Myth that all risk is related to penetration
Gender identities and sexual variances	
<ul style="list-style-type: none"> • Create safe places for lesbians • Intergenerational partnerships amongst WSW • Education on safe use of sex toys • Integrate lesbian health messages into existing women’s health programmes 	<ul style="list-style-type: none"> • No terminology to express WSW in some cultures • Forced marriages • Women are viewed exclusively in relation to their male partners

iii. TG

Recommendations

- Investigate the position of transgenders and invest time and money in transgenders and their issues, for instance in the areas of legal status, ID documentation, access to medical services providers, and employment opportunities
- Remove all diagnostic categories referring to gender variances from DSM and transfer and move the diagnostic category currently used by ICD to the medical section
- Transgender issues shall only be addressed jointly, in partnership with transgenders
- Representatives of government institutions should be obliged to participate in awareness building about transgenders and their issues
- Educate the media about transgender issues
- Consider the involvement of female to male transgenders in MSM activities
- Consider the involvement of male to female transgenders in WSW activities

Opportunities and challenges

None provided

iv. General

Recommendations

a) Epidemiology

- Use existing networks and programmes to disseminate information aimed at MSM, WSW and TG

b) Hostile environment

- MSM, WSW and TGs should build partnerships and alliances with other human rights organisations

c) Gender identities and sexual variances

Opportunities and challenges

- HIV programmes need the participation of MSM, WSW, and TGs

B. Workshops on policy and prevention-programme development and implementation: effects and opportunities for organisations and specific target groups

v. Capacity building for up-scaling

Recommendations	Opportunities and challenges
<p>a) Policy development</p> <ul style="list-style-type: none">• To donors and NGOs: In policies regarding sexual minorities, use common sense language that expresses respect for the diversity, behaviours and identities of sexual minorities <p>b) Implementation Invest in the areas of:</p> <ul style="list-style-type: none">• Leadership• M & E• Communication & Community building• Initiatives• Organisational capacities, such as volunteers, education, skills <p>c) Research</p> <ul style="list-style-type: none">• Invest research for best practice models, which are needed to justify up-scaling in funding <p>d) Funding</p> <ul style="list-style-type: none">• Invest NOW, otherwise an opportunity to build the capacity of NGOs and CBOs will be lost	<p>Absorption capacity of NGOs/CBOs</p>

vi. Youth

Recommendations

a) Epidemiology

- Strong linkages East/West/South
- Look for more funding
- Peer educators
- “Be an expert”
- Need to generate more evidence
- Compliment and reward young people for their work
- Empower youth in all aspects of their lives
- Create platforms for young people to speak out

b) Hostile environment

- Positive information/education
- Address policy level: “they are not interested”
- Creation of safe places
- Role of human rights framework, also for youth
- Youth involvement
- Youth friendly counselling centres
- Involvement of religious groups in the discussion

c) Gender identities and sexual variances

- Learn that e.g. porn is for entertainment value but learn responsible behaviour
- Do not only talk to like minded people/organisations, also involve mainstream organisations, for example human rights organisations
- Work WITH youth instead of FOR youth

Opportunities and challenges

- Increase in drug use and criminalisation
- Confidentiality
- Economic dependance
- Lack of visibility/youth empowerment
- Lower age of counselling
- Influence of young people on policy development
- Use of internet – make it a safe place
- Globalisation (“sex tourism”)
- High infection rates of young people (xxx?)
- International agreement on content of life skills education

- Fundamentalism
- Conservative groups/media
- Dangerous for young people to have print media (parents, school might see them)
- Private schools (they are mostly religious)
- Other young people discriminate and form a threat

- Teachers are afraid to talk about sexual orientation

vii. PLHIV

Recommendations

a) Policy development

- Keep fighting stigma
- Decriminalise HIV transmission
- Evidence-based advocacy (additionally and complementary to programming)
- Decriminalise homosexuality
- Develop workplace policies on homosexuality and HIV
- Develop protective laws and policies against violent environments
- Increase the dialogue between funders and civil society) to learn from each other
- Recognise civil society's evidence and practical experience on MSM, WSW and TGs
- Implement GIPA and allow PLHIV networks to lead the response to the epidemic

b) Implementation

- Increase awareness about HIV
- Encourage peer support
- More campaigns around HIV transmission and decriminalisation
- Need to move from advocacy to implementation, i.e. translate the PHDP framework into concrete programmatic guidance at the country level
- Need to create a "community of practice" and capture best policy and practice examples
- Prevention activities for MSM need to be expanded
- Need for training of health care personnel
- Need for more programming tools

c) Research

- Develop programmes based on evidence and promote research that is PLHIV-centred

Opportunities and challenges

- Stigma impedes up-take of testing
 - Stigma fuels criminalisation
 - Stigma makes MSM a hidden group
 - Safe meeting places to bring MSM, PLHIV and policy makers together
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- It is difficult to reach HIV positive MSM
 - Insufficient access to ARVs, other medicines, condoms and lubrication
 - Peer to peer support more successful than from AIDS Centres
 - Health care providers continue to stigmatise TGs
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- How to address HIV among MSM who do not regard themselves as MSM?

- Develop research agendas that look both at MSM and PLHIV stigma issues

d) Funding

- Instead of competing, we should collaborate more, funding should be directed to fund joint MSM/PLHIV activities
- Not only provide funding for primary prevention, but also secondary prevention and access to care and support
- Funding priorities should include:
 - Peer support groups
 - Community groups
 - Psychosocial support
 - Addressing violence

- How to fight stigma against HIV and homosexuality?
- How to promote shared responsibility?
- There is insufficient knowledge among researchers with regard to TG issues

- Lack of funding for ARVs
- Obtaining long term funding is a challenge
- Positive prevention is not recognised
- How to prevent competition between MSM and PLHIV organisations?

viii. Sex work and drug use

Recommendations

a) Policy development

- Promote human rights issues around sex work
- Develop laws and policies that tackle violence not only against women but also men (and for substance abuse, i.e. harm reduction policies)

b) Implementation

- Train service providers on substance use
- Client management and outreach
- Integrate harm reduction into traditional HIV prevention activities for MSM

c) Research

- Data needed on risk behaviour related to substance use and sexuality

d) Funding

- Donor recognition of male sex work and need to distinguish it from female sex work

Opportunities and challenges

- Highlight the linkages between MSM/WSW/TGs without creating stigma
- How to effectively empower sex workers?
- Specific programmes for sex workers and WSW who use drugs
- Provide intramuscular needles

C. Workshop on recommendations for policy, implementation, research and funding, and opportunities and challenges for increased cooperation and partnership building

ix. Research implementation

Recommendations

a) General

- Attempt to understand the concept of risk from a lifecycle perspective
- Take into consideration new perspectives on prevention due to new developments, for instance ICT and youth

b) Research process

- Commit to long-term research
- Design research that ensures a continuum of research and implementation
- Implement comprehensive research. i.e. foster intercultural, interdisciplinary approaches
- Undertake capacity building of communities as part of the research process
- Be aware of validity of research, i.e. if the right ethnographies are captured
- Acknowledge the differences between researchers, policy makers, donors, and activists in terms of roles and accountability, for instance
- Be aware that the source of research funding can influence the freedom within the research process

c) Partnership

- Conduct research based on academic – practitioner collaboration
- Action oriented research needs to be built on (long-term) partnerships throughout the entire research process

d) Funding

- Engage intermediaries, for example donors, as intermediaries and funding partners for a broad range of funding agendas and approaches
- Be aware of the “politics of funding”
- Funding can limit research due to funding policies

e) Dissemination

- Disseminate research results widely and communicate the results clearly in lay terms
- Find ways to communicate research results more widely, including to communities

x. Partnerships

Recommendations	Opportunities and challenges
<p>a) Policy Development</p> <ul style="list-style-type: none">• Be clear about points of agreement and disagreement• Focus on key issues• Evaluate your partners• Know your roles and expectations• Examine your “equality”	<ul style="list-style-type: none">• Fragmentation (for example young versus old)• Need for a “two way education,” i.e. defining the purpose of the education, learn from each other and decide what you <u>do not</u> share
<p>b) Implementation</p> <ul style="list-style-type: none">• Build partnerships with participation at all levels• Develop work plans for strategic partnerships• Create opportunities for broader partnerships• Build partnerships based on respect	<ul style="list-style-type: none">• HIV money ??? impact on community• Resist objectivation• How to institutionalise partnerships by making them sustainable?• Share goals• Retain identity in mainstreaming• No personal problems in personal structure
<p>c) Research</p> <ul style="list-style-type: none">• Conduct joint needs assessments	<ul style="list-style-type: none">• Fund M&E activities and ensure that research results are applied back into the communities
<p>d) Funding</p> <ul style="list-style-type: none">• Design grants in a way that true collaboration is built in• Allow flexibility in funding for recipients• Allow time for consultation processes between funder and recipient• Put resources into partnerships	<ul style="list-style-type: none">• Be culturally sensitive, for example by not imposing certain concepts of language• Have an open and positive attitude towards local specificities• Engage in optimism

xi. Funding

Recommendations

For funders:

- Provide more multi-annual core funding for partners in the South
- Set up more long-term capacity building programs
- Increase coordination among funders to avoid unbalanced geographical spread of funding availability

For applicants:

- Know your funders
- Do not go where the money is but search for ways for the money to go where you want
- Have a continuous dialogue with your trusted donors

Main opportunity

- Recently, more bilateral and private funders are supporting issues of sexual minorities in the global South

Main challenge

- How to increase donor-coordination and develop procedures and mechanisms that cater to the need for sustainable core funding for LGBT organisations?

xii. Global Fund

Recommendations	Opportunities and challenges
<ul style="list-style-type: none">• Need to build community-led research into the proposal development process• Understand and use the role of other funders• Manage the process well so that it strengthens and does not damage communities• Do not underestimate the cost of proposal development and community strengthening• Develop good relationships and “use” the UNAIDS Country Coordinators and UNDP in the proposal development process• Do not look at Global Fund resources in isolation – also need to appreciate the proposal development process as a skills building process and a process to address stigma and discrimination through heightened visibility and professionalism in addition to ensuring that community capacity is being built• Clarify who is convening the process? This is an important question about how civil society speaks to itself and understands itself in relation to the convening agencies	<ul style="list-style-type: none">• In South Asia it cost USD 250,000 to develop a proposal worth USD 45 million - need to evaluate how much of the development of this helped build capacity and sharpened skills within the community – most money went into consultants• For regional proposals it can be challenging to demonstrate “regionality” and added value• Partnership processes involving money need a large amount of trust• Cannot eradicate stigma and discrimination in a five year funding cycle – but can challenge it and have some impact even at proposal stage – difficult to measure• Confused messages were reported from inside the Global Fund with different advice from different people – and resistance to the agenda by some Secretariat staff