



SUMMARY OF DISCUSSIONS OF WORKING GROUPS



CARICOM/UK CHAMPIONS FOR CHANGE CONFERENCE: TECHNICAL SESSION

Marriott Resort, St. Kitts and Nevis
22 November 2004

GROUP 1: FRAMEWORK PLAN OF ACTION

Background: Working Group considered the elements of a framework for a Plan of Action to be implemented by “Champions for Change” as a strategic response to reducing Stigma and Discrimination against People Living with HIV/AIDS (PLWHA) in the Region. The deliberations of the Working Group on this issue are summarized below.

CHALLENGES	RECOMMENDATIONS	FOLLOW-UP	
		RESPONSIBILITY	TIME FRAME
Identification of specific audiences to be reached in relation to reducing stigma, discrimination and human rights.	The main target audiences should be: <ul style="list-style-type: none"> o Political Leaders and Policy-Makers; o Opinion Leaders - private sector, community leaders at all levels, civic leaders, faith-based leaders; o Regional Leaders – CARICOM, PANCAP. 		
Defining the guiding principles to be pursued in planning for the reduction of stigma and discrimination	The Plan of Action for “Champions for Change” should be premised and built on: <ul style="list-style-type: none"> o The existing Caribbean Regional Strategic Framework on HIV/AIDS that calls for affirmative action on stigma, discrimination and human rights violations. o Caribbean countries subscribing to various international conventions and agreements related to protection of human rights and freedom from stigma and discrimination. o Recognition of the different stages in the process of ratification of international conventions and agreements by Caribbean countries. 		
Reducing gaps in knowledge and information for key stakeholders	(i) National Context: <ul style="list-style-type: none"> o Each country needs to better understand and document the existing forms, contexts and determinants of stigma and discrimination existing in the individual country. 		

CHALLENGES	RECOMMENDATIONS	FOLLOW-UP	
		RESPONSIBILITY	TIME FRAME
	<ul style="list-style-type: none"> ○ Each country needs to identify the issues and realities that confront the sub-groups within its borders. (ii) Capacity Building <ul style="list-style-type: none"> ○ Sensitize key professionals including media, health care providers and other service providers on stigma and discrimination and working with vulnerable groups. ○ Enhance knowledge on modes of HIV transmission. ○ High-level political and community leaders, bureaucrats, and national technical advisers on all key issues to be addressed with respect to stigma and discrimination. 		
Creating “buy-in” to the plan on the part of political leaders	<ul style="list-style-type: none"> ○ Leaders to “personalize” the plan of action and to remain receptive to sensitization. ○ Clear communication and documentation to leaders on the consequences of “not addressing” AIDS-related stigma and discrimination. ○ Leaders to be accountable for plan of action. 		
Support for legal and policy environment to support efforts to promote human rights and human dignity.	<ul style="list-style-type: none"> ○ Undertake legislative review: address existing laws that serve as barriers to access to HIV prevention, care and treatment programmes. ○ Repeal all laws that legitimize stigma and discrimination. ○ Support legal literacy for PLWHA. ○ Provide legal advice and mediation. ○ Train legal practitioners on AIDS-related human rights issues and issues affecting marginalized groups. 		

CHALLENGES	RECOMMENDATIONS	FOLLOW-UP	
		RESPONSIBILITY	TIME FRAME
	<ul style="list-style-type: none"> ○ Strengthen legal systems to ensure effective enforcement of applicable legislation. 		
Mainstreaming marginalized and vulnerable groups through the process of advocacy	<ul style="list-style-type: none"> ○ Each leader to promote open, honest and facts-based discussion on stigma and discrimination. ○ Each leader should recognize the rights of marginalized/vulnerable groups. 		
Reducing internal stigma on the part of marginalised groups.	<ul style="list-style-type: none"> ○ Empower PLWHA, marginalized and vulnerable groups such as men who have sex with men and sex workers. ○ Support NGOs working with marginalized populations ○ Ensure meaningful participation for the above-mentioned vulnerable/marginalized groups at the national level. 		
Developing information base on stigma and discrimination through research.	<ul style="list-style-type: none"> ○ Develop a research agenda relating to stigma, discrimination and associated human rights violations. ○ Share experiences and build common approaches. 		
Strengthening monitoring and evaluation mechanisms.	<ul style="list-style-type: none"> ○ Define indicators to monitor progress at national level. 		

GROUP 2: DEVELOPMENT OF ANTI-STIGMA TOOLKIT

Background: The Working Group considered the broad goals to prepare the Champions to become advocates of change in the fight against stigma and discrimination. The immediate objectives of these goals include:

- (i) Increased understanding and awareness of stigma and discrimination;
- (ii) Increased leadership capacity around diagnosis, programme and policy development; and
- (iii) Increased knowledge of information sources and existing tools.

It was agreed that Toolkits were required for various Target Groups. Consideration was given to a case study approach with regard to the following:

- Health workers;
 - Private sector, and tourism (given the regional quality tourism and sustainable tourism initiative that recognise economic importance – contribution to regional Income);
 - Educators;
 - Judiciary: legislators and policy-makers;
 - Religious leaders; and
 - Community groups .
- PLWHA (internal stigma)

CHALLENGES	RECOMMENDATIONS	FOLLOW-UP	
		RESPONSIBILITY	TIME FRAME
<p>Sustainability Issues:</p> <ul style="list-style-type: none"> • Resources to support champions. • Mentoring system, for example, the National AIDS Trust to provide information and offer support in difficult situations. 	<p>Identification of who should be involved: who should lead; who are the facilitators for capacity-building; etc.</p> <p>Key underlying socio-cultural practices, context and consequences to be addressed. More research to inform information resources.</p>		

CHALLENGES	RECOMMENDATIONS	FOLLOW-UP	
		RESPONSIBILITY	TIME FRAME
<ul style="list-style-type: none"> Resources – define resource requirements and where to source them. Communication and Information Exchange – to create/ensure a continuous feedback loop. Integrate the work of icons from various backgrounds to be in harmony and to build a multi-sectoral response accessing the community groups they represent and influence. Capacity-Building – trickle through effect to all other levels of community other than those that are represented and influenced by the champions. Catalyse advocacy at all levels. 	<p>Identification of specific sector and specific evidence needs.</p> <p>Identify what already exists, both regionally and internationally.</p> <p>Monitoring and evaluation: defining indicators.</p>		

Outline of the Development and Implementation of a Regionally Appropriate Toolkit

ELEMENTS	OUTPUT	CHALLENGES	TIMELINES
<p>Phase 1: Planning Phase</p> <p>Literature Scan: Regional—more focused on stigma and discrimination international (Toolkit)</p> <p>Building Partnerships:</p> <p>Making sure that indicators that are needed to evaluate this program are included in the larger regional effort (with NAP; UWIHARP; SIRHASC; CHRC; CAREC; USAID; Measure).</p>	<p>Compilation of information resources from regional and international evidence/research/PLWHA and choice of what information to adapt into a draft regional Toolkit to be piloted in Phase 3.</p> <p>List/Network of available resources persons/mentors for champions across multi-country sites.</p> <p>Proposal for Toolkit: outlining Phases 2 to 5</p>	<p>Ensuring that materials that are appropriate and adaptable for the Region are available within a short time frame</p> <p>Developing and maintaining a strong network of skilled and experience personnel to remain responsive to the needs of champions.</p>	<p>2-3 months</p>
<p>Phase 2: Development Phase</p> <p>Selection and adaptation of identified best practices/toolkits/approaches.</p> <p>Undertake rapid/formative research.</p>		<p>Identifying resources within desired timeframes.</p>	<p>12 months</p>
<p>Undertake stakeholders, participatory workshops to develop materials to validate and secure ownership of a regional product NGOs, PLHA networks, FBOs, private sector, youth, health workers, judiciary: legislators and policy-makers, educators, private sector and tourism, law enforcement.)</p>	<p>Validation of materials</p>		

ELEMENTS	OUTPUT	CHALLENGES	TIMELINES
Develop a core set of exercises in the toolkit (with assistance for resource persons/centres. Each sector/target group (e.g. FBOs, healthcare) will develop additional exercises that are sector-specific.	Best practice toolkits.		
Materials Production. Setting up a monitoring and evaluation plan/design: baseline, endline, indicators.	Indicators, database and plan developed.		
Phase 3: Pilot Phase : (2-3 selected sectors) <ul style="list-style-type: none"> • Training; • Implementation of pilot toolkit; • evaluation of pilot; • revised set of tools; and • mechanism for integrating into existing programs in sectors. 	<ul style="list-style-type: none"> - Sectors identified; - Training conducted; - Project implemented; - Evaluation conducted (reports disseminated); and - Mechanism developed. 	<p>Getting buy-in and cooperation.</p> <p>Responsiveness to problems identified in pilot phase.</p>	10-12months
Phase 4: Scaling up and integration into existing programmes in multiple sites/islands Stigma-reduction interventions implemented. Ongoing process, output, outcomes monitoring and evaluation.	Interventions implemented M&E reports produced periodically.	Identifying resources within desired timeframes.	Dependent on number of sites, individual country needs, readiness, etc. It should be noted that an intervention needs to run for at least a year to be able to measure change in stigma).
Training of trainers.	Cadre of trained persons produced.		
Impact evaluation of each interventions.	Report of impact evaluation.		

ELEMENTS	OUTPUT	CHALLENGES	TIMELINES
<p>Phase 5</p> <p>Revision and updating of regional toolkit and documentation of regional best practices.</p>	<p>Best practices. Revised toolkit for the Region.</p>		<p>2 months</p>
<p><u>NOTES:</u></p> <p><u>There will be ongoing dissemination and support of the champions throughout the entire development and implementation cycle to ensure continuity of the champions for change process</u></p> <p>Recommended structure for implanting the toolkit development processes:</p> <ol style="list-style-type: none"> 1. Regional Coordination Unit: (for example, PANCAP within which operate the administrative and overall reporting and technical coordination subunits). To include a full-time person to coordinate the effort with good institutional support. 2. National level representation: Steering/Advisory Committee/Board that includes all the key stakeholders to create ownership and move the agenda forward. 3. Implementing agencies (multi country sites - administrative and technical function): actual programs using toolkit and monitoring and evaluation. 			

GROUP 3: ROLE OF THE MEDIA IN ANTI-STIGMA ADVOCACY

Background: The Working Group considered the role of the media in anti-stigma advocacy and sought to identify elements of a media strategy for the reduction of stigma and discrimination against People Living with HIV/AIDS (PLWHA) in the Caribbean. Specific focus was given to the design of relevant messages, the production of such messages for presentation in the various sections of the media and the methodology for optimum delivery. The deliberations of the working group are summarised below.

- **Core Issues:** Media is not in the business of simply disseminating information. It is primarily driven by economic incentives and therefore this factor needs to be considered in any initiatives.
- Many opportunities are missed because planners are not aware of media procedure, function and structure.
- There is always the need to identify a focal point in newsrooms to sensitise them to the issues surrounding HIV/AIDS.
- The economic cost to the media house should always be considered in any media campaign.

CHALLENGES	RECOMMENDATIONS	FOLLOW-UP	
		Responsibility	Time Frame
Design messages on a variety of topics related to stigma and discrimination for specific target audiences and mobilise resources for their design and dissemination. Topics should not necessarily be on HIV/AIDS alone but on issues such as sexual health.	<p>Improve the quality of media performance through the conduct of training at the individual and organisational levels. Such training should include ethical standards in media training and take account of available manuals on non-discriminatory terminology. In this context, remove organisational obstacles as they relate to the lack of support and commitment of newsroom.</p> <p>Training should be ongoing to sensitise reporters to the appropriate language and approaches in covering stories on HIV/AIDS</p> <p>Prepare messages using various formats including news features, edutainment, soap operas, radio, street theatre, drama, television and print media taking account of the sensibilities of the Region.</p>		

CHALLENGES	RECOMMENDATIONS	FOLLOW-UP	
		Responsibility	Time Frame
	<p>Educative/developmental theatre includes various methodologies and there should be targeted community-focused interventions for the region e.g. using Ashe to cover the North and BARCAM to cover the South Caribbean Regions.</p> <p>Take account of the country differences as they relate to media type, technologies, literacy levels and cultural values and mores.</p> <p>The distinctions in each territory must be reflected in style of each message for each territory.</p>		
<p>Reduce stigma and discrimination among adult and youth populations. Involve PLWHA and relevant stakeholders at all levels.</p>	<p>Recognise that strategic communication is a relevant issue which includes the media. The communication strategy should adopt a multidisciplinary approach and take account of the various audiences including adults, youths, employers and professionals.</p> <p>a) The concept of partnerships needs to be aggressively pursued recognizing that CARIMAC, CMC and CBU are media vehicles to be tapped. In addition, CBU needs to be targeted since it is a representative body for all the region's broadcasters who already have established infrastructures.</p> <p>b) Advertising Agencies should also be targeted to sensitise them to the importance of their message and formats</p> <p>Target professionals, employers and youth placing emphasis on greater involvement of PLWHA.</p>		

CHALLENGES	RECOMMENDATIONS	FOLLOW-UP	
		Responsibility	Time Frame
	<p>Design guidelines for use of PLWHA as well as journalists to facilitate interviews between the two groups.</p> <p>Conduct national and regional indigenous research on the identification of key influencers of behaviour with regard to stigma and discrimination and how to work with those identified to reduce stigma and discrimination.</p> <p>Prepare strategy to evaluate effectiveness of messages and campaigns.</p> <p>ACTION:</p> <ol style="list-style-type: none"> 1. Launch a Media Campaign specifically on Anti-Stigma and Discrimination in partnership with organisations like the CBU, PSI, Advertisers etc. This campaign should be properly tested with target groups and should use the appropriate language in order to facilitate the appropriate conversation with a commitment by all entities. 2. All Caribbean festivals should be utilised to disseminate these campaign messages. 3. CARICOM/PANCAP should be utilised as Coordinating agency to build capacity of focal points at the national level to better relate to the media and take advantage of opportunities they provide to help with campaign. 4. HOWEVER, MORE FINANCIAL AND HUMAN RESOURCES WILL BE REQUIRED FOR THIS TO BE PROPERLY DONE. 		