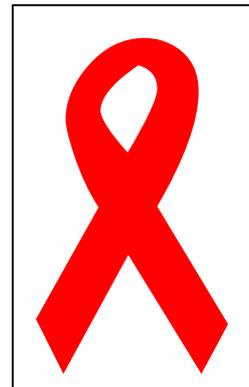
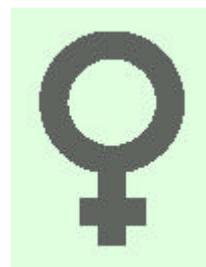
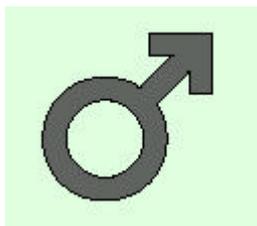


Gender & HIV/AIDS



**A Report of the International Workshop on
the Development of Empowering Educational
HIV/AIDS Prevention Strategies and Gender
Sensitive Materials**

Nairobi, Kenya, 9-13 July, 2001



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Held at the Methodist Guest House, Nairobi Kenya, 9-13 July 2001.

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UIE



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The Southern Africa HIV/AIDS Information Dissemination Service (SAfAIDS), a regional NGO based in Zimbabwe, promotes policy, research, information-sharing, planning and programme development on HIV/AIDS in southern Africa. The organisation's objective is to help establish HIV/AIDS on the development agenda and to strengthen responses for prevention, care and mitigation of the epidemic.

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Acronyms

CD-Rom	Compact disk read only memory
IEC	Information, Education and Communication
KANCO	Kenya AIDS NGOs Consortium
MAP	Medical Assistance Programme
MINEDAF	Ministers of Education of African Member States (UNESCO)
SAfAIDS	Southern Africa AIDS Information Dissemination Service
SAT	Southern Africa AIDS Training Programme
UIE	UNESCO Institute for Education
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF [ESARO]	United Nations Children's Fund Eastern and Southern Africa Regional Office

HIV/AIDS and Empowering Learning. Some Introductory Remarks

Werner Mauch

HIV (the Human Immunodeficiency Virus) is primarily transmitted through sexual intercourse. Transmission could certainly be reduced to a large extent if people just refrained from having sex as long as there is a risk of getting infected, or if they had sexual contact only on the basis of the mutually shared knowledge concerning whether the partner is infected or not. If anybody carries the virus, its transmission can be effectively avoided by means that are rather simple to use and easy to get. And if someone wants to be sure not to run the risk of becoming infected, he or she can take the necessary precautionary measures. So what is the problem?

Firstly, HIV infection occurs within a sphere that can be seen as the most personal and intimate one for human beings: their love and sex life, and their sexuality – a universe of the most extensive feelings and experiences of both togetherness and individuality, of sharing and communication, of vitality and happiness. At the same time this sphere is often characterised by a vast number of traditions, regulations, roles, norms and taboos, all factors that shape considerably the potentials, possibilities and processes of learning that can take place.

Secondly the conditions to bring about change in HIV preventive intentions are not automatically available, either on a personal or societal level. The advice to stop having sex, since it might be dangerous, could be helpful only for those who are entirely aware of the risks, and also in full control over their decisions and guided by rationality. There are many reasons why people do not know whether they are infected, perhaps because they have not thought about it, or perhaps because there is no opportunity for anonymous testing free of charge, or they simply do not want to know about their “sero status” for different reasons. The idea that sexual intercourse takes place only when both partners agree upon it, or that there is at least space for negotiation is simply unrealistic for many people in this world, especially women. To use condoms and apply techniques of safer sex requires at least that they are easily available and applicable to the partners involved.

The good news, however, is that people confronted with HIV/AIDS are willing and able to change themselves as well as their environment, and such change can be brought about through learning.

This is why HIV prevention is a field determined by key concepts such as “knowledge”, “learning” and “change” and, consequently, by power relations, spaces and capacities for empowerment. Only if people know about the

existence and characteristic features of HIV/AIDS and how the virus is transmitted, and when they learn about the possibilities and means of avoiding infection, can they meaningfully handle HIV/AIDS in their personal sphere. Only then can further growth of infection rates be stopped or even reversed on a larger scale.

HIV/AIDS prevention work usually aims at enabling women and men to act responsibly towards themselves and others, and concretely to avoid any infection. This requires promotion of more or less complex learning processes about medical, social, political, cultural and economic facts and circumstances, which includes a wide range of understanding of oneself and one's environment. The ideal outcome of such learning is an enhanced capacity to deal with HIV/AIDS in general and to avoid infection by the virus in particular. Such promotion of learning will take into account the specific life contexts of the learners, use their own language and build on their curiosity, experience, responsibility and autonomy.

One dimension that deserves specific attention in this regard concerns the suitable ways and means of communication and the materials that are used in order to bring about the desired results in terms of learning processes and related change of behaviour. The gender dimension is key to HIV prevention work in all world regions. Without addressing gender questions the desired changes regarding awareness, sensitivity and behaviour will remain rudimentary and rootless. The need to apply a gender perspective and to use gender-sensitive approaches and materials in prevention work has been underlined by many experts, decision makers and activists.

The gender dimension is especially relevant for Africa where unprotected heterosexual contacts are the main reason for HIV infections and where women represent the majority of infected persons, whereas men are the major transmitters of the virus. Three major factors – all interconnected – can be identified that place gender issues at the core of the HIV/AIDS pandemic in Africa:

- 1) risk and vulnerability to HIV/AIDS are substantially different for men and for women
- 2) the impact of HIV/AIDS differs markedly along gender lines, and
- 3) tackling the AIDS pandemic is fundamentally about behaviour change, aimed at effecting a “transformation” of gender relations and roles in Africa¹. It is this transformation that can represent the critical effect of learning, i.e. transformation that involves both individual and societal aspects.

¹ see "The Gender Dimensions of HIV/AIDS. Putting Gender into the MAP" (draft), Africa Region Gender Team, The World Bank, from:
<http://www.reprohealth.org/reprohealthDB/doc/The%20gender%20dimentsions.pdf>

Against this background the UNESCO Institute for Education (UIE) started in 2000 a project on "Empowering Educational Strategies and Gender-sensitive Materials". Two regional workshops took place, one in Changmai (Thailand) for Asia, and one in Nairobi (Kenya) for Africa from which this report results. The basic objective was to analyse existing prevention practices in different countries with a focus on the gender perspective and to elaborate, on the basis of this analysis, guidelines for designing gender-sensitive materials accordingly. We expect that the work started through this African workshop will be continued and deepened and that the network will be strengthened in the coming activities of the project.

Acknowledgements

Our thanks go especially to all the workshop participants from a wide range of organisations active in prevention work in Africa and Europe. Their expertise represented the indispensable basic resource for the fruitful exchange and discussions during the five days of the workshop. Roy Clarke and Vicci Tallis were highly skilled and extremely valuable resource persons. Dr. Magdallen Juma (African Virtual University, Nairobi) and her staff were competent and helpful partners in all organisational and content matters. Their draft report provided a core element of this publication. Special thanks go also to all colleagues from UNESCO-PEER (Nairobi) – without their assistance and tireless support the workshop could not have taken place. Last but not least our thanks go to UNAIDS for the generous co-funding of this project.

Background

The sub-Saharan region is the region with the highest prevalence of HIV worldwide. In 1998 the *Durban Statement* adopted by the MINEDAF VII Conference of African Ministers of Education stressed the urgent need of joint efforts to combat the devastating effects of HIV/AIDS “with all means at our disposal”. The *Dakar Framework for Action* adopted by the World Education Forum in April 2000 underlined that “programmes to control and reduce the spread of the virus must make maximum use of education’s potential to transmit messages on prevention and to change attitudes and behaviours”. During the World AIDS Conference held in Durban, South Africa in April 2000, the great importance of effective HIV prevention work has been underscored as well as the urgent need for specific gender sensitive approaches. UNESCO’s Strategy for HIV/AIDS Preventive Education is based on the principle that “prevention is not only the most economical response – it is the most patent and potent response, i.e. changing behaviour by providing knowledge, fostering attitudes and conferring skills through culturally sensitive and effective communication” and is directed towards five core tasks: advocacy at all levels; customising the message; changing risk behaviour; caring for the infected and affected; and coping with the institutional impact of HIV/AIDS.

The relevance of prevention work

The importance and relevance of prevention work is generally uncontested. Prevention work aims at strengthening the knowledge and capacities of people (both infected and uninfected) to avoid the transmission of HIV. However, problems in openly addressing and discussing sexuality and sexual practices as well as existing gender stereotypes often hamper effective changes in sexual behaviour that would be desirable in terms of preventing its spread. To induce learning processes that address respective gender issues that are often deeply rooted in people’s traditions and culture is a sensitive task that needs to take into account the underlying aspects of power distribution and power relations. Empowerment in relation to prevention work would mean to enable people, both women and men, to act responsibly to themselves and to others, to foster mutual relations in a spirit of equality (while respecting differences) and, consequently, to overcome obstacles in this way.

International workshop on developing empowering HIV/AIDS prevention materials

This workshop brought together about 25 representatives from governments, NGOs and regional agencies active in HIV/AIDS prevention work who are involved either in the formulation of educational strategies and/or development of IEC materials. Participants represented the seven regional countries of Botswana, Kenya, South Africa, Uganda, Tanzania, Zambia and Zimbabwe. A

resource person from the Netherlands also shared his experiences in prevention work with men who have sex with men.

Building on their experiences and expertise in the prevention field, the workshop participants concentrated on two different but interrelated topics:

- 1) development of empowering prevention strategies with a focus on gender issues
- 2) elaboration of guidelines for the production of gender-sensitive materials.

A concrete follow-up plan summarised the activities to be undertaken after the workshop, especially in terms of material production and dissemination.

Workshop Objectives

The workshop had the following key objectives:

- To analyse HIV-relevant gender issues, and to translate this into educational materials
- To analyse existing IEC practices in Africa
- To assess the relevance of empowering strategies for effective prevention work
- To develop guidelines for gender sensitive prevention materials.
- To formulate a post-workshop action plan for improved gender orientation of IEC materials.

Based on the experiences presented in the workshop, participants identified relevant gender issues that affect prevention work and elaborated strategies to tackle them effectively, resulting in principles of empowering prevention strategies. Informed through such principles, proposals for the production of a set of gender-sensitive material were elaborated; and a preliminary action plan laid down concerning the procedures and responsibilities for subsequent production and dissemination of materials.

Opening Address

Professor J.C. Kiptoon, Permanent Secretary, Ministry of Education, Science and Technology, Republic of Kenya

The address underlined the importance of the workshop, noting that:

- The sub-Saharan Africa region is by far the most affected by HIV/AIDS, with 25 million out of the 36 million infected by the disease.
- Since the President of the Republic of Kenya declared the disease a national disaster in 1999, the National AIDS Control Council was formed to co-ordinate HIV/AIDS programmes.
- Although many organisations have been formed to fight the pandemic, efforts are being made to establish HIV/AIDS control in all ministries of Government to mainstream the disease as one of their key functions.
- The Kenyan Ministry of Education, Science and Technology has not only already established such a unit, but has also embarked on ways of influencing behaviour change in respect of the large number of young people under its care. This is being done through the introduction of the HIV/AIDS curriculum, in-servicing of teachers, and strengthening of the guidance and counselling services among others.
- These efforts are also in recognition of the fact that the education sector has been affected devastatingly by HIV/AIDS through decline in enrolments, increased dropout rates, decline in completion rates and the loss of teachers, among others.

Observations and comments following the opening address

It was noted by some of the participants that:

- There is a need in the workshop programme to provide opportunities to participants to visit a few grassroots home based HIV/AIDS programmes especially one in the Kibera slums of Nairobi.
- Some greater focus on cultural practices that work counter to HIV/AIDS prevention programmes is required.
- There is need in the prevention programmes to address communication barriers, especially getting down to the level of breaking resilient taboos in the use of the mother tongue in reference to sexual organs and practices.
- It is important in focusing on prevention strategies to discuss some of those that failed as much is also learnt from failure.

Overview of Experiences/Projects on HIV/AIDS Prevention and Gender Issues

The session adopted a groupwork approach for the purposes of providing participants the opportunity to exchange their experiences on HIV/AIDS prevention projects with a specific focus on the gender issues.

From the five groupwork discussions, some of the emerging issues included:

- Most projects/programmes had a shared mission/vision, namely halting the spread of HIV/AIDS.
- Many policies appear clear, but at times not readily implementable as a result of certain gaps. Policies often lack specific goals and benchmarks.
- Some projects/programmes fail to address gender issues as well as cultural factors and power differential between the genders.
- Projects/programmes have not succeeded in some countries because of the failure to openly acknowledge the existence of the HIV/AIDS pandemic.
- A general recognition that given the broad diversity of participants in the workshop, it would be unlikely that we could draw up common and unanimous HIV/AIDS strategies that would be applicable across countries of the region.
- We can all benefit from sharing our experiences and learning from each other.

The Status of HIV/AIDS and Prevention Strategies in Africa

Dr Magdallen N. Juma

The status of HIV/AIDS in Africa

The HIV/AIDS epidemic continues to pose a major threat to Africa:

- In 2000, 2.4 million Africans died of HIV/AIDS related illness. A further 3.8 million adults and children became infected with HIV.
- 80% of global AIDS death occurred in Africa and 72% of new infections.
- The highest rates of HIV infections occur in the countries of Eastern and Southern Africa.
- More than half of the countries in Sub-Saharan Africa (24 out of 43 for which data are available) are experiencing a generalised epidemic.
- With the adult HIV infection rates exceeding 5% at the end of 1999, the countries experiencing a generalised epidemic include countries with large populations, such as Nigeria, Ethiopia, South Africa and the Democratic Republic of Congo.
- HIV/AIDS is unravelling hard won development gains and exerting a crippling effect on future development prospects.
- Repercussions of the epidemic are such that the worst-affected countries are already experiencing major development reversals.
- If the epidemic goes into a more rapid expansion phase in less severely affected countries, the trend will be the same.
- Immediate effects of HIV/AIDS are experienced at the individual and household levels.

The effects of HIV/AIDS have many facets:

- illness
 - physical and psychological pain and suffering
 - health care and costs
 - income loss
 - reduced household productivity
 - death and funeral costs
 - mourning and grief
 - increased poverty
 - increased vulnerability of women
 - growth in the number of orphans, the social dislocation of those who survive, and the ultimate disappearance of households.
- For the first time, it is now being projected that AIDS will lead to negative population growth, with Botswana, South Africa, and Zimbabwe experiencing population decline by 2003.

- Countries, such as Lesotho, Mozambique, Namibia and Swaziland, will be experiencing a zero growth rate leading to a negative decline, whereas in the absence of AIDS they would have been growing at the rate of two percent or more.
- One outcome of this AIDS mortality will be a reduction of the number of persons to be educated. Recent World Bank projections for four countries document the large reduction in student numbers that AIDS is expected to cause.

Impact of HIV/AIDS on the health sector

- Africa is the world's poorest region with the lowest access to and quality of health care.
- The way hospital beds and services are being increasingly given over to AIDS patients is impacting heavily on the health sector.
- The very high levels of morbidity and mortality among health care staff are reducing capital to provide care and treatment.
- There are prohibitive costs of scaling-up HIV/AIDS health programmes to adequate levels of acceptability.

Impact of HIV/AIDS on the education sector

- Reducing the number of children in schools.
- Increased drop-out rates.
- Reduction in the provision of educational resources.
- High levels of morbidity and mortality among teachers.
- Quality of education is being eroded, e.g. frequent teacher absenteeism, intermittent student attendance, low teacher morale and increased number of orphans.

HIV/AIDS prevention strategies

These mainly fall into two categories: firstly national HIV/AIDS programmes, and secondly non-government organisation and private sector prevention strategies. They vary and include the following:

- Providing accurate information on transmission and prevention of HIV.
- Electronic and print media campaigns.
- Training in and practising psychological skills.
- Development of appropriate IEC materials.
- Direct social marketing of contraceptives and barrier methods.
- Implementation of voluntary counselling and testing services.
- Implementing youth friendly service for young people.
- Peer education programmes.
- Linking families of HIV/AIDS patients to health-based care programmes.
- Promoting community based responses.

- Providing support and out-reach services.
- Streamlining traditional sexual and reproductive health education.
- Family life education in schools.

Common features of effective national responses

- Political will and leadership.
- Societal openness and determination to fight against stigma.
- Multi-sectoral and multi-level action.
- Community based responses.

Some key issues in HIV/AIDS prevention

- Lack of strong commitment.
- Competing priorities.
- Insufficient resources and inadequate capacity to mount the necessary level of response.
- Cultural norms or religious beliefs.
- Lack of gender sensitive prevention strategies.
- The vulnerable position of women in society.
- Lack of gender-sensitive IEC materials.
- Lack of understanding of the context of HIV/AIDS and the vulnerability of the girl child.
- Lack of focus on short-term prevention strategies.
- Inadequate focus on power relations among the genders.

Some Observations on the Overview of HIV/AIDS in Africa

- The overview was an impressive analysis of the HIV/AIDS status and some of prevention work that has so far been carried out. A poor commitment by many African government to the prevention of the HIV/AIDS pandemic is also reflected in their failure to set up think tank mechanisms to oversee/monitor the implementation of policies.
- Cultural factors remain one of the key obstacles to the HIV/AIDS prevention strategies and programmes as culture means different things to different groups and communities. Religion is also a major obstacle in various ways, as certain biblical materials tend to advocate the conformity of women.
- Prevention strategies are also hampered by some definitions and use of terms, for example when the term 'sex worker' is often associated with women when it should apply to both men and women. Prevention programmes/strategies often tend to target women as the vulnerable target group, while men are equally vulnerable.
- The overview also needed to have given a greater focus on some of the community-based prevention and assistance strategies, especially the involvement of people living with HIV/AIDS.
- There is a general tendency to focus on men, especially 'sugar daddies' as the transmitters of HIV to the exclusion of the issue of 'sugar mummies' in some of the countries. This is linked to the problem of intergenerational sex motivated by the '3Cs' – i.e. cash, clothes, and cars (the get-rich-quick mentality) among the youth. Institutions of 'higher learning' particularly universities are becoming places of rapid spread of HIV/AIDS through inducements made by teachers in the grading of students assignments.

Using a Gender Perspective – gender gaps, discrimination and oppression

Vikki Tallis and Roy Clarke

The presentation avoided delving into the generally unhelpful attempt to define gender issues in terms of role differentiation and instead defined gender issues in terms of gender gaps. It was noted that where an important gender gap is established, there are usually underlying causes in terms of discrimination and oppression. Three key terms were identified, namely; ***gender gap, gender discrimination and gender oppression***, which were by no means mutually exclusive.

Gender gap

A gender gap was said to be a measure of gender inequality on any particular socio-economic indicator, and may be defined as a difference in any aspect of the socio-economic status of women and men. Gender gaps at the national level are due to *systemic gender discrimination* – discrimination that is fundamental to the most aspects of the social system.

Gender discrimination

Gender discrimination was defined as the different treatment given to one gender by comparison with the other, and is a consequence of gender gaps caused by different treatment given to girls and women, by comparison with treatment given to boys and men.

Gender oppression

Gender oppression was said to refer to the male monopoly of decision-making by maintaining male privilege and preserving male leisure. Underlying the systemic discrimination against women is the maintenance of patriarchal power: male domination of power within the home and government, for the purpose of maintaining male privilege. It is brought about through patriarchal control, interest and beliefs.

The presentation was followed by a groupwork session in which participants identified a gender issue arising from personal experience in terms of the three components described above:

1. Gender gap
2. Gender Discrimination
3. Power Differential

The issues identified and analysed were as follows:

Sexual harassment at work

1. Gender gap

- males are usually the bosses, more experienced and in charge
- younger, less experienced female employees are dependent on promises of opportunity.

2. Gender discrimination

- intimidation
- manipulation
- misuse of authority by male bosses.

3. Power differential

- males in power
- males can rule over employment status
- male exploitation at the expense of female employees
- satisfaction of male ego paramount.

Boy child preference

1. Gender gap

- without a boy there is nobody to carry on the family name
- without boys there is nobody to care for the family
- there is no one to head the family.

2. Gender discrimination

- girl children are not given recognition, therefore not considered for inheritance
- all benefits including inheritance go to the male children.

3. Power differential

- women have no control over reproduction as decisions made by the in-laws for the wife to continue with child bearing
- women have little “say” in affairs of the household compared to men.

Use of condoms

1. Gender gap

- it is not socially acceptable for a man to possess or buy condoms
- if the man does obtain condoms he has the exclusive right to decide whether to use them or not.

2. Gender discrimination

- women perceived to have no knowledge of the use of condoms.
- if they have the knowledge, they are considered promiscuous.

3. Power differential

- men have the power and authority to decide whether or not to use condoms
- women cannot ask men to use them for fear of accusations of infidelity.

Women's position in marriage

1. Gender gap

- sociocultural and educational gap between men and women
- men negotiate arrangements for marriage.

2. Gender discrimination

- different treatment given to males and females within marriage
- women are seen as the inferior partner.

3. Power differential

- patriarchal control and beliefs, attitudes and values favours men
- payment of bridewealth by men provides them with increased authority.

Sharing of African Prevention Materials

(Plenary/Explanation 'Gallery Approach')

Preparation for 'gallery presentation' was guided by a number of gender-oriented points for highlighting in the displays. These included:

- Any gender issues being addressed in the project/programme/materials.
- Any gender oriented strategies.
- Success in gender orientation of the programme.
- Identification of main obstacles to addressing gender issues.
- Any necessary suggestions for better gender orientation of the programme/materials.

Following some deliberation, it was agreed that it was not possible for all the displays to adhere to these suggestions as some of the participants do not work in specific gender oriented organisations. It was therefore agreed that displays exhibit activities of their organisations.

The displays generally fell into four categories by nature of their activities. These involve:

1. International regional organisations whose activities span several countries of the Eastern and Southern African region
2. National government supported activities,
3. Consortiums co-ordinating national HIV/AIDS programmes and
4. Country-based NGOs.

The brief analysis here focuses on some examples of the organisations and their activities in response to gender-related issues.

International and regional organisations

These international and regional organisations (UNESCO, UNICEF [ESARO], SAfAIDS, SAT and MAP) have among their objectives to mobilise and sensitise policy makers and the public in general on HIV/AIDS as well as developing materials and strategies based on a life skills approach, dealing with knowledge, values, attitudes, skills and behaviour, specific to particular socio-cultural contexts.

Awareness-raising on HIV/AIDS is key to most of these organisations' functions. This includes arranging training and sensitisation workshops and developing educational materials, including periodicals, occasional papers and books. Many of the materials were of a general nature although some gender oriented materials were included, such as:

- Mainstreaming Gender in the Response to AIDS in Southern Africa: A guide for the integration of gender issues in the work of AIDS Service Organisations (SAT).
- Men and HIV in Zimbabwe (SAfAIDS).
- Facts and Feelings About AIDS: AIDS in Your Community (MAP).

Government-supported programmes

Generally falling under the respective governments, or more specifically under the Ministries of Health, they are body co-operates formed to co-ordinate the HIV/AIDS programmes in the fight to control the spread of the pandemic.

The programmes aim at formulating policy sensitising communities and dissemination of HIV/AIDS materials, as well as the creation and training of core teams of resource personnel for co-ordination and effective implementation of HIV/AIDS education. Some of the programmes incorporate activities for the attainment of a good standard of health for the population in order to promote a healthy and productive life for all.

AIDS NGO consortiums

Kenya AIDS NGOs Consortium was the main representative here, providing an example of a national network of NGOs/CBOs and religious organisations involved in HIV/AIDS and STI activities in Kenya. Its mission is to provide and promote leadership, solidarity and collaboration among members towards collective action towards effective response to HIV/AIDS through the building of national and district networks. Among its major accomplishments has been the collection and dissemination of HIV/AIDS information (books, brochures, journals, newsletters, posters, videos, slides, audio tapes, CD-Rom-based databases among others) through the print and electronic media, exhibitions, and other forums such as workshops, seminars and conferences.

National NGOs

The HIV/AIDS prevention projects of the national NGOs have among their objectives to facilitate the provision of accurate information on HIV/AIDS, provision of sexual and reproductive health information to children and young people in order to increase their awareness and promote safer lifestyles, and to integrate gender issues into HIV/AIDS and sexual reproductive health in order to enhance gender and human rights. Organisations present included Padare/Enkundleni Men's Forum on Gender, Shosholoza AIDS project, Women and AIDS Support Network, Centre for Counselling, Nutrition and Health Care (COUNSENUH), Family Planning Private Sector (Kenya), Family Health – Anti AIDS Project and Triangle Project.

The displays depicted two general categories of NGOs, namely those focusing on the upgrading of health services and improving management of their activities and those directly involved in HIV/AIDS prevention.

They have carried out activities related to HIV/AIDS prevention through materials production, training of peer educators and adult facilitators, and in one case running a mobile video van on AIDS education and counselling.

Two key gender-related organisations were WASN and Padare. The Women and AIDS Support Network (WASN) has among its objectives to network, provide information, skills training and advocate for adolescent girls in sexual and reproductive health and rights; reduce STIs and HIV among adolescent girls and women in stable relations; advocate for policy changes, conduct research, network and disseminate information on HIV/AIDS and women; and develop gender specific reproductive health and rights tools for replication by other organisations and AIDS service organisations. The core programmes focus on women, youth and information advocacy and are community-based and driven. The Padare/Enkundleni Men's Forum on Gender is an organisation that addresses a wide variety of gender related issues in development.

Developing Gender Sensitive Materials

Roy Clarke

In developing gender sensitive materials, a number of key concepts were identified and explained. These included:

Gender blind:

A failure to recognise different roles, responsibilities and needs of men and women respectively in access to control of power, resources and information.

Gender awareness:

Being knowledgeable and able to recognise socially defined roles and differences between males and females.

Gender sensitive:

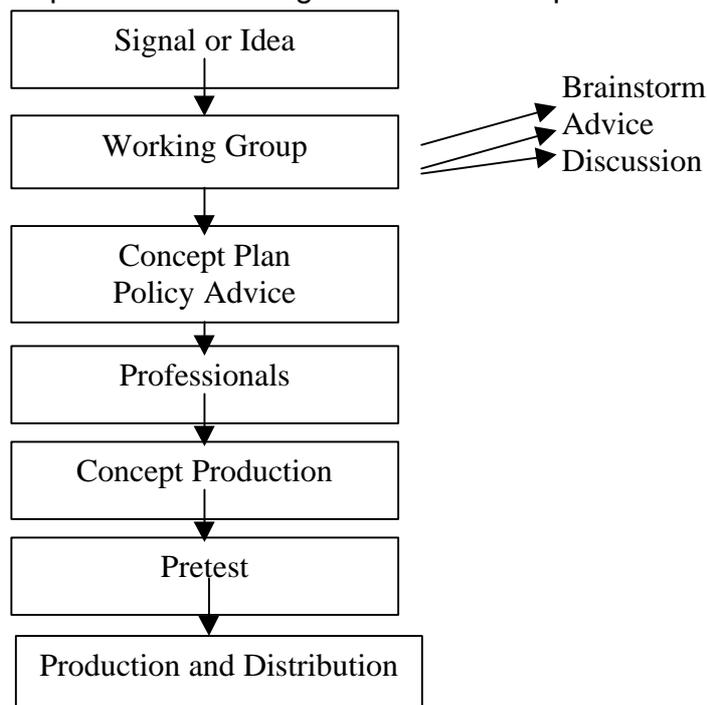
A recognition of the diversity of socially recognised roles and needs between females and males to bring about a positive change.

Gendered programmes:

Programmes that recognise and take into account diverse needs and incorporate them into all levels of programme design, implementation, monitoring and evaluation.

Process of producing materials

The following schematic presentation is a guide for material production.



In developing gender-sensitive materials the following guidelines were proposed:

- Consider the above steps (from idea to distribution).
- Consider the appropriateness of the materials.
- Consider the gender issues or questions that need to be discussed or addressed at each stage.

Identifying important gender issues and an empowerment framework

It was pointed out that a logical framework of a project plan, addressing a gender issue by an appropriate intervention strategy requires an understanding of the underlying causes of the issue. As already discussed in examining any gender issue it is important to *unpack* it in terms of an “underlying causes” framework of gender gap, gender discrimination and gender oppression.

In examining a project plan, the crucial question is whether the plan recognises the relevant gender concerns and issues that are part of the problem to be addressed and which therefore should lead towards gender-oriented objectives and strategies to address all the relevant gender issues. It was summed up that gender issues arise due to an unequal division in decision-making, which is likely to create disparities in the use of national resources in meeting women’s needs and concerns.

In identifying/programmes, it is important to define/identify it, followed by analysis and developing an intervention strategy through empowerment.

The empowerment framework is offered simultaneously as a method for analysing the elements of a gender issue and also as a way of conceptualising the process of empowerment by which women may collectively take action to address a gender issue.

Some Guidelines for Empowering Target Groups

The following were identified as the main steps to follow in developing guidelines for empowering target groups:

Developing guidelines for empowering target groups



An empowerment strategy focuses on the goals of empowerment: in enabling women to take more control of their lives, through decision-making, in order to improve their own well-being. Here the focus is on using the empowerment process as the means towards ending various forms of gender discrimination that stand in the way of overall project success, or which present major obstacles to women's general advancement. This strategy is therefore appropriate where social mobilisation is necessary to overcome patriarchal resistance. If we are to advise on how a project might better recognise and address gender issues, our first task is to evaluate the project in terms of the extent to which gender issues have been overlooked, or inadequately addressed.

In looking for the missing gender issues, the presentation focused on the questions we ought to ask at each stage of the project plan. In order to illustrate this method, the example of an HIV/AIDS information dissemination project was used.

HIV/AIDS information dissemination project and key questions

PROJECT STAGE	QUESTIONS	ANSWERS
SITUATION ANALYSIS	<ul style="list-style-type: none"> • What are the gender concerns which put male and females in a different problem situation? • Are gender gaps part of the problem? • Is gender discrimination part of the problem? 	<ul style="list-style-type: none"> • Project evaluation findings have so far revealed that information dissemination on HIV/AIDS is much better amongst males as against females (i.e. there is a gender gap in project coverage)
GUIDING POLICY PRINCIPLES	<ul style="list-style-type: none"> • Is the policy environment conducive for the gender problems to be addressed? • Is there any need to establish a new policy principle or goal so that the gender problems are recognised? 	<ul style="list-style-type: none"> • The National AIDS Council has now recognised the principle that AIDS information should reach females and males equally. This principle is consistent with the overall national policy environment on gender issues.
PROBLEM IDENTIFICATION	<ul style="list-style-type: none"> • Does the gender policy principle reveal a gender issue within the situation analysis? 	<ul style="list-style-type: none"> • No. Although the project document has reported gender gaps in information coverage, it is not clear whether this is a mere situation, or whether it is recognised as a problem.
INTERVENTION STRATEGY	<ul style="list-style-type: none"> • Is the intervention strategy well chosen to address the underlying causes of the gender gaps in information coverage? 	<ul style="list-style-type: none"> • No. The intervention strategy continues to be concerned with various forms of information dissemination at places of formal employment, quite overlooking that the majority of those in formal employment are males. • There is a need to consider alternative intervention strategies, using community groups, religious groups, and NGO participation, to reach sufficient females.
PROJECT GOALS	<ul style="list-style-type: none"> • Do the project goals recognise relevant gender issues, and address the gender issue as part of the problem? 	<ul style="list-style-type: none"> • No. The overall project goal states that all government institutions and other workplaces will be used to disseminate information on preventing AIDS transmission. • The goals are 'gender blind' in that they do not recognise the different proportion of males to females in the workplace.
IMPLEMENTATION STRATEGY	<ul style="list-style-type: none"> • Does the type of project intervention take account of gender concerns and issues arising at the implementation stage? 	<ul style="list-style-type: none"> • No. A main strategy of using posters has ignored the different levels of literacy between men and women.
PROJECT OBJECTIVES	<ul style="list-style-type: none"> • Given the implementation strategy, are the project objectives appropriate? 	<ul style="list-style-type: none"> • No. The main objective is to disseminate information using schools, where gender gaps are large. Other institutions have been overlooked.
PROJECT ACTIVITIES	<ul style="list-style-type: none"> • Given the project objectives, are the activities appropriate? 	<ul style="list-style-type: none"> • No. The implementation activities show no interest in the AIDS curriculum addressing gender issues in AIDS prevention and control.

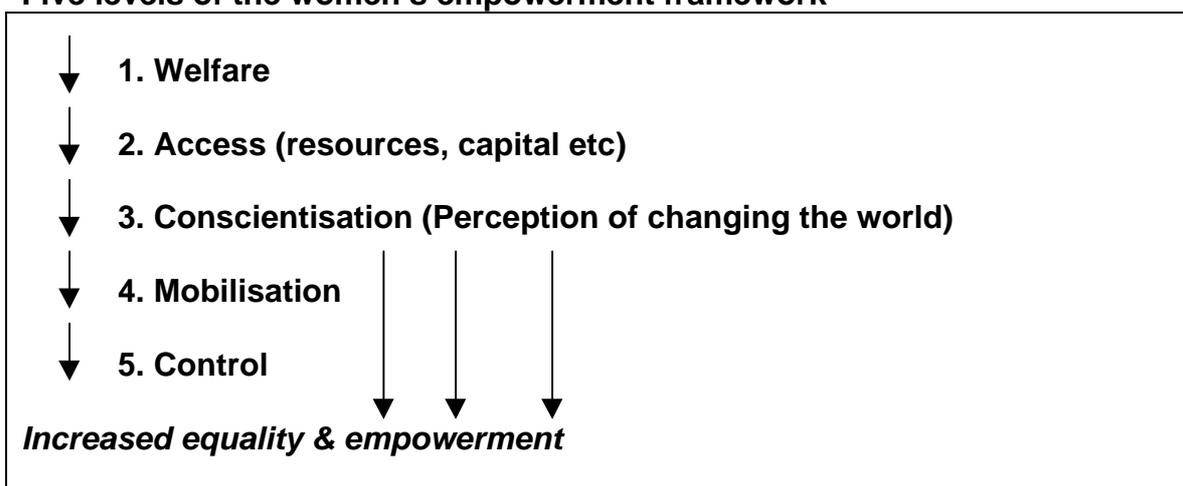
Women Empowerment Framework

Roy Clarke

The underlying question is whether women can ever be 'given' improved welfare and access to resources by 'benevolent' governments or other authorities, or whether women have to get organised to 'take' what is their due. If the latter is the practical situation, then the discourse should be about empowerment, and not merely about how to increase access to resources. Empowerment means increasing women's control over decision-making, and over access to resources, and therefore over their own lives. Empowerment is collective and based on community self-reliance.

The five levels of the Women's Empowerment Framework provided the evaluation criteria for a qualitative appraisal of the extent to which a project is concerned with addressing gender issues.

Five levels of the women's empowerment framework



There is a lack of attention to gender issues in many projects. It is quite typical that attention to gender issues 'fades away' during the planning process. In other words, a project plan may reveal some identification of gender issues within the situation analysis and problem identification, but this interest 'fades away' as the project plan proceeds to goals, strategies and activities.

In terms of the Women's Empowerment Framework, it is common to find that the project identification part of a project plan acknowledges the problem of women's lack of participation in decision making (i.e. a 'control' level problem), but the project activities are concerned only with 'giving' women increased welfare benefits, or increased access to resources.

Of course it may be that, in the planning process, many issues tend to 'fade-away'. But planners and implementers seem to have a marked reluctance to address

gender issues, so that a concern with gender issues seems to have a high 'fade-away' potential! This may arise in part from the planners' own patriarchal attitudes. But it may also be a questionable and defeatist response to the climate of patriarchal opposition within which planners have to work.

It was concluded that the way to intervene in a risky situation or group is to:

- Use the empowerment framework
- Evaluate gender complexity
- Drive ownership or conscientisation in the target group.

Key lessons learnt about the integration of gender into programmes

- Shift focus away from the 'man' into the 'couple'.
- Gender cannot be incorporated into a programme successfully without the active participation of men and the larger society.
- The attitude of society towards women, stemming from cultural orientation needs to change. In tackling HIV/AIDS, the woman also has to have a choice.
- The fear that women want to seize power from men needs dispelling.
- Projects should have a deliberate focus on gender right from the concept stage.
- There should be a review of all work in progress with a focus on gender.
- Entrenched attitudes and inadequate gender sensitivity need to be countered.
- Ensure both male and female participation in IEC materials development.
- Evaluate all existing IEC materials for gender gaps and ensure penetration of IEC materials to all levels of community.
- Train local project personnel on having a gender focus when distributing IEC materials.
- Introduce gender into all plans and enforce gender diversity in all projects.
- Review all literature on gender and HIV/AIDS that are used in all the current work in progress.
- Incorporate gender into policy making.

Materials utilisation for the implementation strategy

The following is an outline of essential elements of IEC for material utilisation for implementing a strategy.

- Identify the target group.
- Understand the micro economic and social dynamics of the group.
- Identify a local contact person.
- Consider the belief systems and attitudes.
- Identify strategies for incorporating a high gender element into the materials.
- Establish rapport and understanding.
- Form a working group that will suggest and develop the appropriate materials.
- Evaluate the relevance of the material to the audience and message.
- Check the language of the manuals.
- Deploy the materials.

Conclusion: Need for Gender Sensitive Prevention Strategies

Despite massive anti-HIV/AIDS campaigns and prevention strategies, infection rates continues to escalate at an alarming rate and many people continue dying in large numbers. This scenario calls for a thorough investigation of relevant gender issues that have been overlooked and impede effectiveness of prevention strategies. The following gender issues are relevant:

The vulnerable position of women in society

Although women's vulnerability is mentioned as a guiding principle in some prevention strategies, gender is not mainstreamed in national HIV/AIDS prevention plans and policies that remain gender-blind. For example, prevention materials hardly target women, except for maternal to child HIV/AIDS transmission.

Lack of gender-sensitive IEC materials

In the production of IEC materials there is little emphasis on gender-sensitive materials. For example, the promotion of "health seeking behaviour materials", do not focus on gender differences in health seeking behaviour, for instance issues relating to power relations inherent in heterosexual sex which make women vulnerable are not emphasised.

Lack of relevant gender-sensitive programmes

Although prevention efforts in Africa have been largely ineffective, there are a few good programmes in some African countries such as South Africa and Kenya, implemented by NGOs. However, the majority of prevention efforts consist of large scale, "one-off events" which promote the message of "abstinence, be faithful and use condoms". This kind of message does not target women and girls, and is generally blind to women's issues.

General lack of understanding of the issues

There is a lack of understanding of the context of HIV/AIDS and the vulnerability of the girl child. In addition, most prevention strategies tend to focus on awareness, assuming incorrectly that they will lead to behaviour change, while there is little focus on other strategies to reduce women's vulnerability, for example the development of microbicides. There is little in the way of challenge to the status quo and unequal power relations.

The inadequacy of gender role analysis is that gender role differentiation is only the surface manifestation of underlying discriminatory practices and beliefs. It is the injustice that arises from the gender division of labour that creates gender issues.

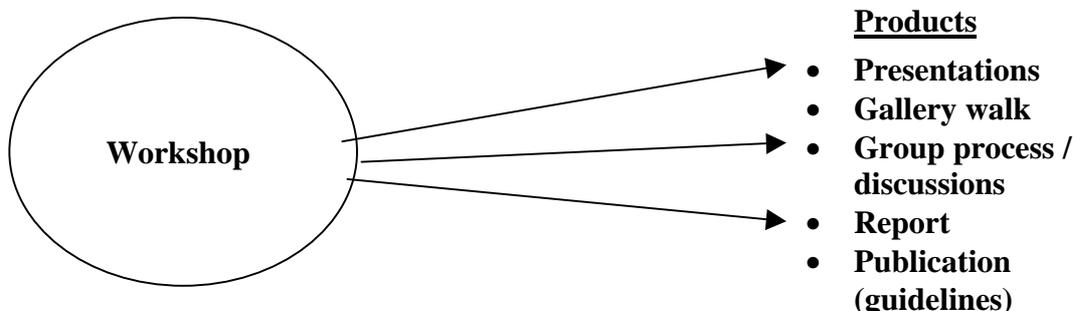
Furthermore, it is the underlying causes that are the deeper issues that have to be tackled.

Why a gender perspective?

Empowering strategies for groups at risk belong to the core instruments for effective prevention. Awareness of gender stereotypes, which play a substantive role in sexual behaviour, is certainly key for both women and men. It seems necessary, however, to review existing prevention strategies in the light of a gender sensitive analysis and learn from good experiences.

It is in this context that this international workshop on the development of educational strategies and IEC materials took place in Nairobi. It aimed to improve the participants' ability to recognise and analyse HIV-relevant gender issues, and to translate this into an ability to devise educational materials that enable the users to also recognise and address the gender issues that stand in the way of protection from infection. To a large extent this aim has been reached, and a follow-up action plan will be elaborated to secure the implementation of the developed strategies and guidelines.

The workshop was able to produce products in the form of the presentations, the gallery walk presentation of the work of the various organisations involved, while the group process led to some stimulating and productive discussions. A report of the workshop and this publication, which includes guidelines for the development of gender-sensitive materials were also produced.



Appendix One²: The Process of Addressing a Gender Issue – Longwe's Women's Empowerment Framework

The process of analysing a gender issue (by considering gender gaps, gender discrimination and gender oppression, see page 14) may seem rather bleak as it only provides a way of analysing a situation, in terms of the underlying causes. But it does not point to any process for overcoming the gender issue, apart from the obvious implication that the underlying causes should be removed.

In other words, we should hope that our analysis of underlying causes will automatically lead us towards an intervention strategy, to address these. But the deeper we look into discriminatory practices, and the underlying patriarchal practices, we are likely to feel that we are out of our depth. Or at least, we may feel that our little development project cannot challenge the whole of society!

We have to admit that most aspects of patriarchal society have to be accepted as 'given', as part of the social and political environment within which our project must operate. But we also need the more positive and strategic attitude that there are some gender issues that are essential to project success, and necessary for women's advancement. Some gender issues may remain 'out there'. But some of them are 'in here'!

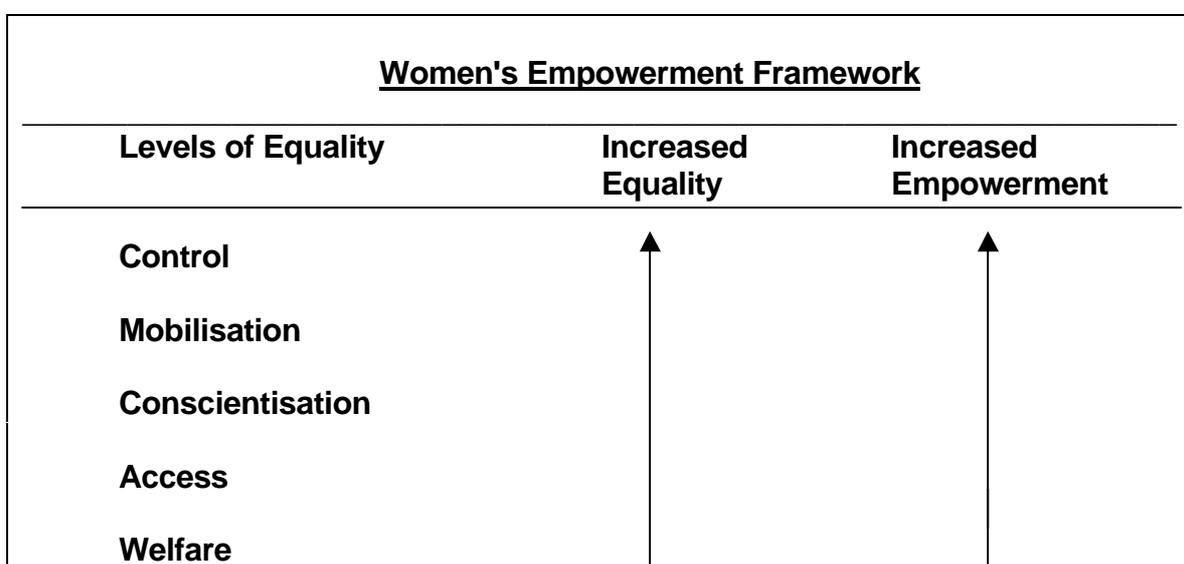
The underlying causes framework may improve our understanding of the situation, but it does not hold much prospect for improving our understanding of how to address the issues. What we need is a more *action-oriented* framework of analysis, which shows us the 'way in' towards action on relevant gender issues.

Development is more than increased access to resources and improved welfare, it is a *process* by which these benefits are obtained and sustained. The development process, as defined by most development agencies, entails members of the target group themselves being involved as participants in the development process. They should not be merely passive beneficiaries of project outcomes, but should improve their own capacity to recognise and overcome their own problems. There is need to combine the concepts of gender equality with that of empowerment for women's involvement in the development process.

² This 'Women's Empowerment Framework', was developed in 1988 by Sara Longwe, and is used as the basis for the UNICEF 1994 gender training manual Gender Equality and Empowerment which was also designed by Longwe/Clarke. See also Sara Longwe, 1991, 'Gender Awareness: The Missing Element in the Third World Development Project' in Tina Wallace and Candida March (Eds), Changing Perceptions: Writings on Gender and Development, Oxfam, Oxford.

If equality between women and men is intrinsic to the definition of women's development, this brings with it the necessary corollary of women's empowerment as the means to overcome the obstacles to women's equality in patriarchal societies. The diagram shown below suggests that women's advancement can be understood in terms of a concern with five "levels of equality", and that empowerment is a necessary part of the development process at each level, for women to advance towards equal status.

This 'Empowerment Framework' is therefore offered simultaneously as another method for analysing the elements of a gender issue, *and also* as a way of conceptualising the process of empowerment, by which women may collectively take action to address the issue.



Level One: Welfare

This is the level of the material welfare of females, relative to males in such areas as nutritional status, food supply and income. Here we describe gender gaps in terms of women as mere statistics rather than individuals capable of changing their lives – more as passive recipients of welfare benefits. The "gender gap" can be identified through the disparity between males and females on indicators of nutritional status, mortality rates, and so on. Women's empowerment cannot take place purely at this welfare level: action to improve welfare will entail increased access to resources – which involves addressing inequality at the next level.

Level Two: Access

The gender gap at the welfare level arises directly from inequality of access to resources. Women's lower levels of productivity arise from their restricted access to the resources for development and production available in the society – land, credit, labour and services. Relative to men, women have less access to education and wage employment, and less access to the services and skills training which make productive employment possible. The term "gender gap" refers to lower utilisation of

opportunities and resources – including access to their own labour. In almost all societies, a woman has such a high burden of domestic and subsistence labour in service of her family, that she does not have sufficient time to invest in her own advancement.

Overcoming gender gaps will mean that women have equality of access, according to the principle of equality of opportunity. Empowerment means that women are made aware of the differential situation and animated to take actions for gaining access to their fair and equal share of the various resources made available within the household, and within the wider system of state provision.

Within the framework, "equality of access to resources" is seen as a step towards women's advancement. But the next level of the Framework considers women's present lack of access to resources as a *result* of systems of gender discrimination. When women have tried to overcome the obstacles to access, they have confronted the systemic discrimination, which can be addressed only through the empowerment process of *conscientisation*.

Level Three: Conscientisation

Here the gender gap is not empirical, but is a belief-gap: the belief that women's lower socio-economic position, and the traditional gender division of labour, is part of the *natural order*, or is "*God given*". This conception of the gender gap is usually reflected and conveyed in everyday messages in the mass media and school textbooks. Empowerment means sensitisation to such beliefs and their rejection; it means recognising that women's subordination is not part of the natural order of things, but is imposed by a system of discrimination which is socially constructed, and can be altered.

This level of equality involves the individual's conceptualisation of the development process in terms of structural inequality: the realisation that women's problems do not derive so much from their own personal inadequacies, but rather women are subjugated by a social system of institutionalised discrimination against women and girls. This involves the ability to critically analyse society and recognise as discriminatory practices those that were previously accepted as "normal" or part of the permanent "*given world*" which cannot be changed. This involves the understanding of the distinction between sex roles and gender roles, and that the latter are socio-cultural and can be changed.

Above all, it means women's rejection of the "*given*" patriarchal perception of women, and their 'proper' role and place. Instead of accepting the male perception of themselves, women collectively come to a different understanding of their role, their worth and their rights. Women no longer seek success on men's terms, or seek a place as an 'honorary male' within a male dominated world. Instead they seek to enlarge female perception, find their authentic female voice, and pursue female gender interests.

Level Four: Mobilisation

The individual woman in the home is not likely to make much progress in challenging traditional assumptions. It is when women get together that they are able to collectively discuss gender issues. They need to analyse the burden of labour put upon them as women, the discriminatory practices that put them at a disadvantage, and the male domination of decision making that stands in the way of doing different.

Mobilisation is therefore the fourth and crucial stage of empowerment, which enables the collective analysis of gender issues, and the collective commitment to action. Mobilisation is also largely concerned with achieving *participation in decision making*. In a development project, it would mean women participating in the process of needs assessment, problem identification, project planning, management, implementation and evaluation. The empowerment paradigm assumes a "bottom-up" approach to development. Women's participation is seen as a necessary aspect of community participation strategies.

Level Five: Control

At the level of control the gender gap is manifested as the unequal power relations between women and men. For instance, within the household, a husband's control over his wife's labour, and of the resulting cash income, means that a wife's increased productivity may not result in increased welfare for herself and her children. In this instance the gender gap is the gap between effort and reward: the wife makes the effort but the husband collects the reward.

Women's increased participation at the decision-making level will lead to increased development and empowerment of women when this participation is used to achieve increased control over the factors of production, to ensure women's equal access to resources and the distribution of benefits. *Equality of control* means a balance of power between women and men, so that neither is in a position of dominance. It means that women have power alongside men to influence their destiny and that of their society.

It is equality of control that enables women to gain improved access to resources, and therefore enables improved welfare for themselves and their children. We should not think of welfare goals as being lesser or lower level goals; rather we should realise that equality of control is a necessary pre-requisite if we are to make progress towards gender equality in welfare provision.

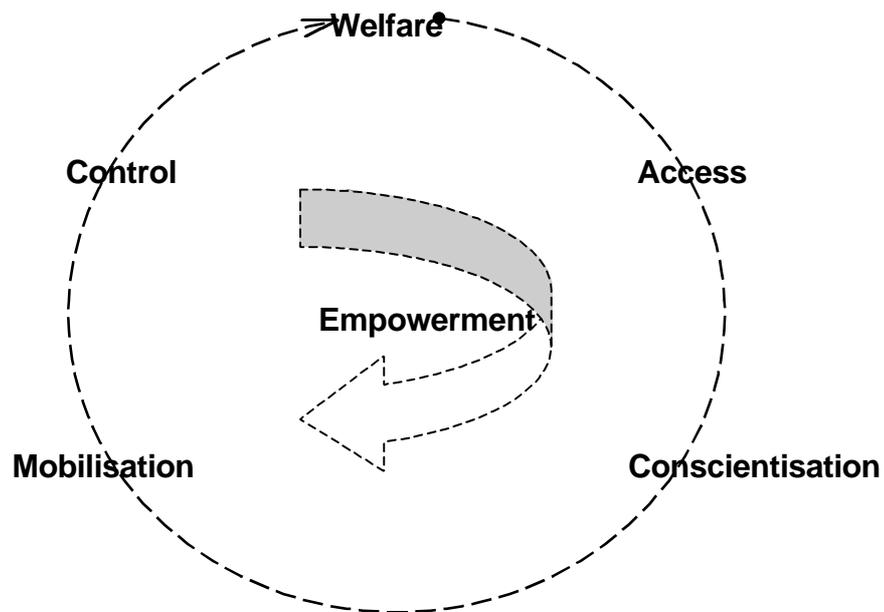
The Empowerment Cycle

The above explanation of the five levels illustrates how the discussion of inequality at one level naturally *leads into* a discussion of inequality at the other levels. Rather than viewing empowerment as a linear process, as in the previous diagram, we should rather see the levels as part of an inter-connected cycle as shown in the diagram below.

This Empowerment Cycle is intended to illustrate that all aspects of empowerment should lead to improved welfare, and to show the continuous and dynamic nature of the development process. The process of empowerment is self-propelling and self-reinforcing – success at one level provides a better basis for success at other levels. Empowerment is synergic process!

The 'levels' of the Framework are therefore *not* intended to be interpreted as 'steps in a linear sequence', but rather as inter-related elements in a cycle or spiral of self-reinforcing development process.

Empowerment is located in the *process* of development, or the *movement* round the cycle, rather than in the achievement of any particular outcomes. It is the process which is empowering, rather than the achievement of material benefits. Empowerment is essentially about the process of taking control, by countering discrimination and oppression.



Appendix Two: List of Participants

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Appendix Three: Programme: July 9-13, 2001

Time	DAY 1 Monday July 9	DAY 2 Tuesday July 10	DAY 3 Wednesday July 11	DAY 4 Thursday July 12	DAY 5 Friday July 13
9.00	Opening/Formalities Introduction of participants Workshop Objectives and Contents Working Method (Juma/Mauch/Devadoss)	Sharing of African Prevention Materials Plenary/Explanation of the Gallery Approach Preparation of Galleries by presentors/participants	Identifying the main gender issues hindering prevention HIV infection <i>Plenary/Group work</i>	Setting out a sequence of steps for gender orientation of IEC materials used in HIV/AIDS prevention programmes: Implications for material production <i>Plenary/Group work</i>	Post-workshop action plan: principles and possibilities of activities (<i>Plenary</i>) proposals for concretizing elaborated strategies (<i>Group work</i>)
9.30	Official opening of the workshop by PS Education				
10.30 BREAK					
11.00	Overview of experiences/projects (presentation /group work)	Gallery Walk 1	Presentation of group work results <i>Plenary</i>	Presentation of group work results <i>Plenary</i>	Group work ctd.
12.30 LUNCH					
14.00	Overview of HIV/AIDS in Africa – preventive work (presentation Dr Juma)	Gallery Walk 2	Identifying more appropriate and effective IEC strategies for addressing gender issues <i>Plenary/Group work</i>	Formulation of guidelines for better gender orientation of IEC materials <i>Plenary/Group work</i>	Presentation of results, discussion, finalizing follow-up plan
15.30 BREAK					
16.00	Why a gender perspective (presentation/discussion V. Tallis/R. Clarke)	Gallery Walk 3 Plenary: Winding up	Presentation of group work results Collecting principles of empowering prevention strategies <i>Plenary</i>	Finalizing of guidelines <i>Plenary</i>	Winding up Evaluation
18-18.30 Steering Committee/Core Group					Reception
19-20 Dinner					



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