



# Report

## 8th European Migrants Meeting: New Trends and Innovative Actions in the Field of HIV/AIDS

Lisbon, 29 September – 2 October 2005

Co-organised by:  
AIDS & Mobility Europe  
Alto Comissariado da Saúde – Coordenação  
Nacional para a Infecção VIH/sida (Pt)



## Colophon

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New Trends and Innovative Actions  
in the Field of HIV/AIDS  
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AIDS & Mobility Europe  
Alto Comissariado da Saúde –  
Coordenação Nacional para a Infecção  
VIH/sida

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June 2006

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**Foreword**

The preparation of the 8th European Migrants Meeting started with a first meeting of the preparatory committee in Lisbon in January 2005. From then, a whole European team was dedicated to making this conference happen by the end of September. The months in between can be seen as a learning experience, a journey towards the final meeting. This journey was only possible thanks to the input of many active participants, each of them with their own expertise. We would like to mention some of those who had a specific and important role during our experimental travels in Europe... but we, of course, thank every single participant for their openness, contributions and companionship!

The basic conditions for our journey were supported and arranged by our Portuguese partner, the High Commissioner for Health – HIV/AIDS National Coordination, coordinated by Professor Henrique de Barros. They offered Lisbon as a beautiful and pleasant destination of our journey. Accommodation was offered by Professor Zaluar Basílio and Professor Manuel de Almeida Damásio of Universidade Lusófona. And for our convenience, Carris sponsored everyone's local travelling. At the closing ceremony, the importance of the meeting was underlined by Mr Bernardo Sousa, representative of the Portuguese High Commission for Migration and Ethnic Minorities.

Our 'tour guide' was our wonderful colleague and friend Carla Martingo. She accompanied the journey from beginning to end in a heart-warming and professional way and with much dedication. Our other 'guides', Juan Walter, Paulo Nossa and Paulo Vieira were a great asset and together with Carla they formed a fantastic

European travel team. Simon Forrest came on board to write a 'travel' report on this special journey where colleagues became friends. Thanks to all your shared efforts we were able to invite religious leaders, Education & Entertainment performers, and participants with a wide range of ages and backgrounds, many of whom played an active role.

Our loyal colleagues Maureen Louhenapessy and Peace Kabushenga stood by our side during the course of our journey and Edwin Goossens Vaerewyck supported us once again with his reliable and skilled 'dream team' of interpreters: Kate Higgins, Monica Heras, Jaione Arregi, Annie Guardiola and Ludovic Slovenec. They assisted us in crossing language borders; a big help to improve communication among people originating from forty-nine different countries.

Jan Jansen, Linda Eduardo, Chris Canter, Georg Bröring, Pien van Leeuwen and Ineke Fontein supported us from back home at the NIGZ, dealing with the administrative hustle and bustle of European and innovative travelling.

Thanks to the genuine support of all the participants and the shared efforts of the speakers, facilitators, workshop rapporteurs and performers, this journey has been a wonderful experience, stimulating us to continue travelling and experimenting with innovative and effective interventions!

*Kathelijne de Groot & Astrid van Leeuwen*

# Introduction

We must never stop thinking about how HIV/AIDS affects the lives of migrant people in Europe. Every day, they have to struggle to find ways of getting by, and sometimes just to survive, in unfamiliar and often hostile socio-economic systems and cultures.

Because this issue never goes away, and in recognition of this struggle for survival by migrant people who live legally or illegally in Europe, AIDS & Mobility Europe organises a European Migrants Meeting in every project period. These meetings are designed to enable the exchange of experience, expertise and skills between non-governmental organisations (NGO's) and community-based organisations (CBO's) active in the field of migration and HIV/AIDS in Europe.

## The 8th European Migrants Meeting

From 29 September to 2 October 2005, the 8th European Migrants Meeting took place in Lisbon, Portugal. It was co-organised with our Portuguese partner, the High Commissioner for Health – HIV/AIDS National Coordination. Conference delegates were profiled to ensure that the meeting comprised equal numbers of males and females and that seventy percent of participants either had a non-Western background or represented a migrant NGO/CBO. The main target groups that were chosen to have a representation at the meeting were migrant people living with HIV/AIDS (PLWHA), young migrant people, religious leaders and health promoters working with migrant communities. In addition, two groups of young 'Education & Entertainment' performers were actively involved in the meeting. In the end, people from fifty countries of origin were present at the meeting, including the ten new EU member states in Eastern Europe. The Eastern European participation uncovered a 'new face' of Europe.

## New Trends and Innovative Actions

To encourage exploration and development of new and effective ways of working with migrant communities, we chose as the overall theme of the conference 'New

Trends and Innovative Actions in the Field of HIV/AIDS'. Feedback from participants at the end of the conference indicated that the meeting had revitalised and inspired them to approach their work in new and improved ways. We came to a broad agreement on the value of engaging in genuine partnerships in HIV/AIDS prevention and care – whether this involves working together with migrant communities, involving young migrant people as health actors and recipients of health messages, or mobilising religious leaders. The most important thing is to enable individuals and groups to take responsibility for themselves by, wherever necessary, freeing themselves from the constraints placed on them by social, legal and other factors which place them in positions of vulnerability, fear and disempowerment.

## Voices of migrant PLWHA

In advance of the main meeting there was an exclusive and confidential meeting for PLWHA. The attendees developed a common agenda around the challenge of finding new solutions to the problems PLWHA in Europe face on a daily basis. It turned out to be a constructive pre-event, during which the people for whom our interventions are designed could discuss and articulate their opinions. At the main meeting which followed, they put forward their suggestions for prevention, care and support. Their main point of reference was the importance of taking a rights-based approach. This is especially essential in the case of migrant PLWHA, because society tends to focus on their needs as refugees or ethnic minorities rather than identifying them as PLWHA. So, rather than pleading for support, treatment and care on the basis of vulnerability, PLWHA demanded what was theirs by right; putting the individual in the foreground and embracing the principles of self-determination and the right to dignity and equality of treatment, be it in relation to health, welfare or any other matter. Furthermore, the participants in the pre-meeting noted that the use of pre-meetings for PLWHA is not longer recommended in the current process of challenging stigmatisation and exclusion. Therefore, they suggested to incorporate workshops around issues related to PLWHA in general and migrant PLWHA in particular into the A&M meetings.

## Migrant youth participation

Unfortunately, the number of young migrants (aged under 30) living with HIV/AIDS continues to grow. These young people along with young migrants in general have specific needs regarding HIV/AIDS prevention and sexual health promotion. Because it can seem difficult to reach them, they are hardly ever involved in the development of interventions for them and their communities. There is a common need across European countries for experience with and knowledge of their needs and there is a lack of networks to support them. Young migrants in general and young migrant PLWHA in particular should be involved in all the different stages of HIV/AIDS prevention and sexual health promotion



## 2 Introduction



(development, planning, implementation, evaluation and policy) in order to support the development of innovative ways of working, build new skills, encourage the emergence of new leaders and improve the effectiveness of interventions. Through this meeting we learnt, despite the difficulties, a variety of ways of approaching them. We acknowledged that it is crucial to support real dialogue between younger and older generations of migrants in Europe. The conference was a big step forward toward more youth participation and youth & adult collaboration.

### Education & Entertainment

Promoting new and creative ways of working with young migrants in the field of HIV/AIDS prevention and sexual health promotion is one thing, but having the opportunity to experience them in a meeting is another. We included two plenary sessions which provided a platform for the theatre groups 'Pea de Teatro' from Lisbon and the 'Safe Sex Comedy Show' from Amsterdam. These are two examples of Education & Entertainment projects that have proven to be effective in reaching young populations with sexuality and HIV/AIDS-related issues. Most of them performed self-written acts, which illustrated that these young people have better ideas than adults about how to reach their peers with prevention messages. The performers from Lisbon actively engaged the audience in their original way of talking about sex and sexuality and after the Safe Sex Comedy Show there was space for discussion between the audience and the performers. Both shows brought a smile to our faces and we all keep good memories of these performances and consider them to be valuable to our work.

### Religion and HIV/AIDS

The conference also represented a forum in which we worked together with religious leaders to achieve more openness and constructive dialogue between HIV/AIDS prevention and faith-based organisations. A few religious leaders joined the conference, which was an eye-opening experience for participants and these leaders themselves. They accepted the invitation to contribute without hesitation because they saw in it a chance to correct negative

attitudes and to put forward their views about religious perspectives of HIV/AIDS to people who are confronted with it every day in their work in the field. Even though this was considered a good start in the dialogue with religious leaders, there is a long way to go to mobilise and educate religious communities and leaders, whose positive contribution is crucial to the success of other workers in preventing and containing this disease. The most important outcome of the contribution of the religious leaders to the conference was the realisation that faith-based organisations must not only champion faithfulness and abstinence but also must to incorporate discussion about sexuality and condom use into their teaching. We know too much now to 'bury our heads in the sand'.

### Plenaries and workshops

The meeting was designed with clear aims and outcomes in mind. Among these goals were promoting more active involvement of the participants and more collaboration between participants of different generations. So, we didn't promote long presentations in the plenary sessions and workshops, but encouraged extensive discussions between the participants. We organised workshops around skills and capacity building, each of which would be facilitated by two people and would promote active communication between participants. Even if we were too ambitious in terms of the number of speakers and facilitators we incorporated into the programme, the active input of a lot of participants was greatly appreciated. Most participants were not mere spectators and by taking on active roles as speakers, facilitators or reporters, they too felt a shared responsibility for the course of the meeting and were able to get to know their colleagues better. Participants felt that their work was appreciated and learned a lot from what they saw and heard from their co-facilitators and colleagues.

### A big European family

We are satisfied with the interaction between participants, and happy to reflect on the closing ceremony, where participants, performers, co-organisers and all those who were at the meeting became one big family, devoted to making real headway towards migrants' rights in Europe. It was a unique experience to see people talk openly, to see that there are great things that can be done to counter the spread of HIV/AIDS.

*Carla Martingo  
Paulo Vieira  
Paulo Nossa  
Simon Forrest  
Juan Walter  
Astrid van Leeuwen  
Kathelijne de Groot*

## 3 Pre-meeting: Migrants Living with HIV/AIDS in Europe

### 3.1 Background to the pre-meeting

The 8th European Migrants Meeting: New Trends and Innovative Actions in the Field of HIV/AIDS was preceded by a confidential meeting exclusively for people living with HIV/AIDS. This 'pre-meeting' took place at the Radisson SAS Hotel, Campo Grande Lisbon. It was organised around three themes identified through prior consultation with participants: tackling discrimination, enabling access to care and facilitating networking for migrant people living with HIV/AIDS (PLWHA). A summary of its main outcomes was presented at the opening of the wider conference (see below).

#### 3.11 Welcomes and introduction

The chair welcomed the participants to the pre-meeting and gave an overview of the programme for the day. There was a series of introductory activities in which participants disclosed their HIV status and mentioned their country of origin, country of residence and how their status is described in the country where they live. This provided an opportunity to see which countries were represented at the meeting. The process of making these disclosures revealed that not all that participants were HIV+ and led to discussion about the value and importance of having a special forum in which PLWHA could meet as part of the wider conference. The participants eventually suggested that the idea of special pre-meetings for PLWHA might in future be dropped, in order to help the process of challenging stigmatisation.

#### 3.12 Presentation: Stigma, discrimination and religion

The meeting heard a presentation which drew on a participant's personal experiences of stigmatisation and discrimination in order to illustrate the influence of religion on attitudes and responses to HIV/AIDS. The presenter gave an historical overview of the cultural and religious context in which he lived and worked. The overview emphasised the traditionally negative influence of the Catholic Church on attitudes towards sex, sexuality and HIV/AIDS and the recent shift towards a more tolerant, open and inclusive culture that does not stigmatise PLWHA. He noted that despite this shift, HIV+ people faced both structural and internalised blocks to achieving de-stigmatisation and hence, accessing services and support.

The presenter then described work of the organisation which he represented. This organisation grew out of a recognition of the need for a positive approach and for practical support. Practical support includes peer networks and services to PLWHA in order to counter the exclusionary forces of stigmatisation.

#### 3.13 Discussion: Stigma, discrimination and religion

There was a discussion in which participants were invited by the chair to respond to the presentation with their own experiences of social, political and religious exclusion due to their migrant and HIV status. The participants were also invited to propose means to minimise exclusion.

A number of participants gave accounts and examples of the nature and effects of social exclusion associated with religion. It was also noted that a sense of exclusion can arise, to some extent, from negative assumptions on the part of HIV+ people about the reactions of their community to their HIV status. It was suggested that PLWHA have an important advocacy role which can be fulfilled by being open about their status. The capacity to be open about one's HIV status however is highly dependent on a person's social resources. The more vulnerable and uncertain a person's migrancy status, the harder it is for them to disclose their HIV+ status. It was also noted that African people sometimes appear to feel less confident about disclosing their status in order to help to draw attention to exclusion and intolerance when they are living in Europe than they are when they are living in Africa. It was felt that in some cases social, political and religious leaders of African communities in European countries are less HIV competent than those in countries of origin. They held and expressed strongly stigmatising views about HIV/AIDS.

A number of participants noted that religious groups and denominations had been highly supportive both personally and organisationally.

Participants then engaged in a short reflective activity involving describing examples of action which might help prevent self-exclusion, religious and political discrimination and exclusion. In relation to action which might help to prevent self-exclusion the meeting proposed the following:

- Seeking peer support (x2)
- Engaging in meaningful activities
- Education on HIV issues (x2)
- More awareness
- Getting information
- Confidence-building
- Openness about our status
- Work on prejudices

In relation to action to prevent religious exclusion the following was proposed:

- Getting informed about different religions

- Working with and educating religious leaders on HIV issues
- Informing people about welcoming religious orders
- Involvement in peer work

In relation to action to prevent political exclusion the following was proposed:

- Learning about oneself
- Integrating into a new country
- Education for migrants on integration processes
- Educating nationals about the contribution of migrants
- Arranging repatriation for people with HIV but providing antiretroviral treatment
- More respect for human rights
- Communicating the conviction that HIV is a problem which concerns all humanity, not just HIV+ people
- Educating people about the disease
- Getting political support for migrant organisations
- Securing effective policies against prejudices
- Promoting HIV lobbies

#### 3.14 Discussion: Access to treatment and care

Due to time restrictions, there was fairly limited discussion about the question whether migrants have the same access to treatment and care as residents of the countries in which the participants live. A few countries were identified where this is nominally the case, including and Norway, Spain and Portugal. But it was noted that social, religious and political exclusion combined with HIV+ migrants' lack of awareness of their rights and concerns about the uncertainty of their legal position could have a negative impact on their ability to access treatment and care.

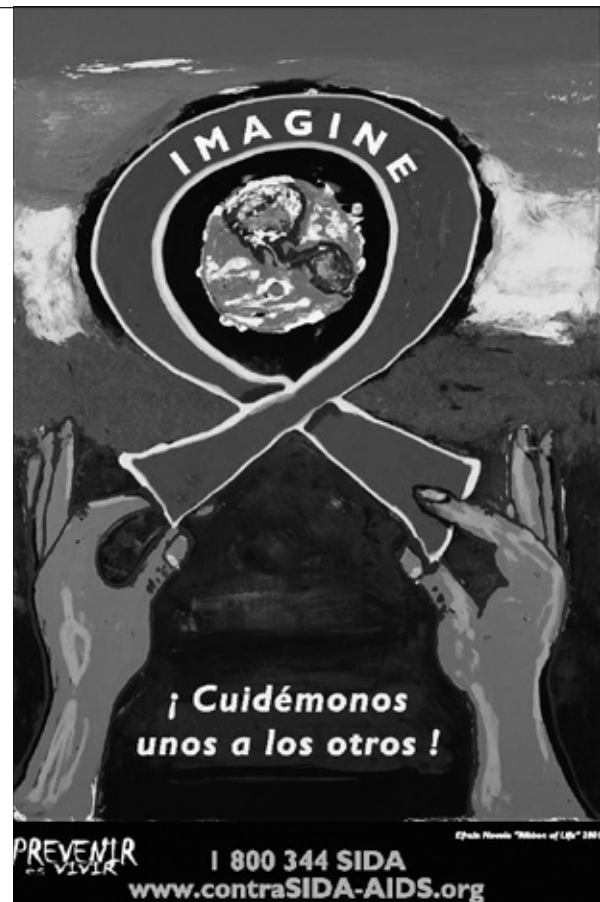
#### 3.15 Feedback to the plenary and future

The chair asked for volunteers to form a panel of four people – two men and two women – who would work with him on making this presentation. His proposal to include with this a list of all the nations represented and migrancy status was accepted. A further proposal to make a group disclosure of HIV+ status as part of this plenary was tabled and discussed. It was agreed that this would be a voluntary gesture.

There was some discussion about the value of proposing a series of recommendations to the main meeting given that this form of action had been ineffective in the context of other meetings. It was agreed that the recommendations would be attached to a demand for acknowledgement and action and that, in addition, the action points would be taken forward into the working groups through the participation of people attending the pre-meeting. A proposal to include in the conference report the list of the nations and migrancy statuses represented within this meeting was accepted (see appendix 8).

#### 3.16 Closing activity and evaluation

Participants were invited to write themselves a letter, which would be forwarded to them in six weeks time,



noting some action they felt motivated to undertake at this moment.

The meeting was closed with circle of evaluative comments which were as follows:

- So glad I can go outside.
- Thank you for everything.
- It was a pleasure to meet you all and I hope that you enjoy the rest of the conference with new ideas and inspiration to provide better services for their clients.
- Nice to meet you all and I look forward to the rest of the meeting.
- Privileged to be in a European forum for the first time and look forward to getting to know people over the next few days.
- Thank you for presenters.
- Thank you, it is my first time and I hope not the last. I look forward to hosting a meeting in my country.
- It was nice meeting everyone and I hope that we can keep in touch and realise our dreams.
- Thank you and I felt very comfortable and feel stronger for being in the company of HIV+ people.
- I was very happy to be amongst you, you were very friendly and taught me so much, all the problems that I thought I faced only locally I realised are global problems. I have learnt a lot.
- I think that the grassroots work is extremely important and I want to maintain contact with you and offer you the support and experiences of my organisation.



## 4 Opening session

### 4.1 Welcoming speeches

#### 4.11 Ms Kathelijne de Groot, coordinator *AIDS & Mobility Europe, NIGZ*

The venue of the Migrants Meeting was the Universidade Lusófona in Lisbon. Ms Kathelijne de Groot, coordinator of AIDS & Mobility Europe, opened the meeting extending a warm welcome to all participants. She noted how pleasing it was to see so many young faces especially in the context of the merger in 2003 of the AIDS and Youth network with AIDS & Mobility. (AIDS and Youth was a sister network also hosted by NIGZ which merged into AIDS & Mobility when it became clear that EC funding could only be secured to support one network. As a result, AIDS & Mobility has a strong youth focus.) Ms De Groot then took to a moment to thank all the participants who had agreed to contribute to the meeting as facilitators, interpreters and rapporteurs. She presented Ms Carla Martingo with heartfelt thanks for all her work as chair of the preparatory committee.

#### 4.12 Ms Carla Martingo, Alto Comissariado *da Saúde – Coordenação Nacional para a Infecção VIH/sida, Portugal*

Ms Carla Martingo also welcome participants to the meeting and to Lisbon and expressed her hope for a productive and enjoyable meeting.

#### 4.13 Mr Juan Walter, master of ceremonies

Mr Juan Walter briefly introduced himself as 'master of ceremonies' and a member of the preparatory committee for the meeting. He promised to try to entertain us and introduced Professor de Barros.

#### 4.14 Professor Henrique de Barros, coordinator Alto *Comissariado da Saúde – Coordenação Nacional para a Infecção VIH/sida, Portugal*

Professor Henrique de Barros congratulated the preparatory committee on their organisation of the meeting. He

noted that he was proud and pleased that the meeting was being hosted by Portugal and noted that Lisbon was a highly appropriate venue historically located at a crossroads of religions, peoples and cultures. He also hoped that the relatively recent Portuguese experiences of colonialism would be instructive in enabling the host country to be thoughtful and responsive to the needs and interests of migrant people. He closed noting that it was very valuable to be working with religious leaders in the context of the meeting. Given the current importance of this engagement with faith communities in Portugal he had special hopes for a productive meeting.

#### 4.15 Professor Zaluar Basílio, Universidade Lusófona

Mr Walter introduced Professor Zaluar Basílio, a Professor of the Universidade Lusófona (the venue of the Migrants Meeting). In representing the university, Professor Basílio stood in for his colleague Professor Manuel de Almeida Damásio, who was, for personal reasons, unable to attend. Professor Basílio hoped that the university would provide a welcoming and hospitable venue for the meeting and was proud to assist in staging the meeting. He noted that it was highly appropriate to be meeting in a venue which, in the normal course of events, was occupied by young people in the form of the student population.

#### 4.16 Mr Paulo Vieira, YouAct: European Youth Network on *Sexual and Reproductive Rights*

Mr Walter introduced Mr Paulo Vieira, member of the conference preparatory committee and member of YouAct. Mr Vieira described the aims of this youth network and emphasised the importance of listening to and involving young people as a matter of rights and expertise, especially given global demography and their vulnerability to sexual ill-health. He hoped that young people would be able, because of their representation in the meeting, to make an important contribution.

### 4.2 Video presentation

Mr Walter then presented to the meeting a short video, compiled for the Migrants Meeting. The video gave us a virtual tour of the sights and sounds of Lisbon, outlined the history of AIDS & Mobility meetings, and specified the range of contributors in terms of their ages, HIV status and the diversity of countries represented. It also contained several moving testimonies from migrant people about their view and experiences of living with and being affected by HIV/AIDS. The video showed the importance of education particularly on issues around sexuality, safe sex and gender, and the importance of a proactive stance on the part of religious leaders around HIV/AIDS issues. Contributors to the video also talked about the importance of increasing the accessibility of treatment and care, emphasising that ultimately the costs of failures in prevention, treatment and care were counted in human lives. The video concluded with a rallying call to the meeting to use the opportunity provided by it for a full and frank

dialogue between young people and religious leaders. See appendix 4 for some extracts from the video presentation.

#### 4.3 Oral presentations

##### 4.31 *Epidemiology, Migrants and HIV/AIDS*, Dr Julia Del Amo, Universidad Miguel Hernández de Elche

Dr Julia Del Amo gave the meeting an overview of the epidemiological data relating to HIV/AIDS and migrancy. She highlighted progress in reporting and recording of infections as well as some remaining problems with these data.

Dr Del Amo began by describing the important role played by health surveillance data in the development of public health activity. She noted the greater visibility of data relating to HIV/AIDS and migrancy in recent years and the clear evidence that this put into the public arena about the vulnerability of migrant people. She described some of the issues associated with bringing data of this kind into the public arena, noting that while it had the potential benefit of focusing public health activity on groups with particular needs and vulnerabilities it also generated the potential for stigmatisation of migrant people. She noted the need, in particular, to work with the media. These have a powerful influence on public perceptions of the links between migrancy and public health in the context of wider concerns about immigration, work and social welfare provision.

Presenting longitudinal data from Western, Central and Eastern Europe, Dr Del Amo demonstrated the explosive spread of injecting drug use-related HIV in Eastern Europe and noted how easily this might have been prevented by interventions. Looking at AIDS surveillance, she demonstrated the trends towards decreasing AIDS cases in Western Europe with the wider availability of antiretroviral treatment.

Looking specifically at data on the origin of new HIV infections, she illustrated the rise in heterosexual infections acquired abroad, mainly in sub-Saharan Africa, and the evidence that the burden of new infections is largely borne by younger people. While she warned that there are some problems with achieving total consistency when it comes to extracting exactly comparable data on HIV among migrant young people, Dr Del Amo pointed out that in their current state data suggest that differentials in rates of infection with HIV and conversion to AIDS are associated with access to treatment and care.

She noted that one effect of exploring epidemiological data in relation to ethnicity and migrancy seemed to be to show that highly active antiretroviral therapy (HAART) is making inequality in HIV care more visible in countries with free access to treatment and care. Dr Del Amo concluded with a call for action to achieving the following:

- Development of scientifically valid and culturally appropriate definitions of ethnicity and migrancy;
- Empowerment of communities to interpret and use data relating to HIV/AIDS and migrancy, and hence to influence the direction of funding;
- Working with the media to avoid stigmatisation.

##### 4.32 *Pre-meeting report*, Mr Julian Hows, Global Network of PLWHA

Mr Julian Hows presented some headlines from the pre-meeting for people living with HIV/AIDS (PLWHA). He noted that PLWHA should be allowed to be visible in society in order to be able to shoulder responsibilities for their health and the health of others. Achieving this visibility is entirely dependent on a commitment to meet their basic human rights to feel safe and socially included. Without this they have no position from which to embrace responsibilities for themselves and others.

Mr Hows went on to note that there had been many meetings which had produced many words and little action. Meantime that situation for migrant PLWHA was deteriorating, with tighter rules of immigration emerging across Europe and more barriers to access to treatment and care. He stressed that what was needed was commitment to adopting a rights-based approach so that rather than pleading for support, treatment and care on the basis of vulnerability, PLWHA demanded what was theirs by right.

Mr Hows noted that migrant PLWHA were doubly disadvantaged because all too often refugee organisations, including organisations arising from their own communities, tend to focus on their needs as refugees rather than identifying them as PLWHA, and HIV organisations tend to focus on their needs as PLWHA rather than as refugees and migrants.

He concluded by asking for the following four things from the meeting:

- Real partnership to create enabling environments that make a real difference;
- That participants consider if they are one of these partner organisations;
- That it accept the contribution of the pre-meeting into its workshops and other sessions;
- That people accept the opportunity to form a virtual HIV and migrancy network.

The presentation closed with a dramatic and emotional climax when, at the invitation of Mr Hows, several people began the process of challenging stigmatisation and exclusion by identifying themselves as PLWHA.



## 5 Plenary session 1: Youth & Religious Leaders

### 5.1 Introduction and welcome to the session

Mr Juan Walter introduced the first plenary session and as delegates assembled, played an extract from the video presentation compiled especially for the Migrants Meeting. It had not been possible to present this extract at the opening session due to technical difficulties. The extract emphasised the importance of the active engagement of religious leaders with HIV/AIDS issues. Following this presentation, Mr Walter welcomed everyone to the session and made some administrative announcements regarding the need for rapporteurs for each of the workshops, the organisation of the workshops and the exchange market. He introduced Mr Paulo Vieira as chair for this session.

Mr Vieira added his welcome to participants to the session and briefly introduced the presenters and panel members.

### 5.2 Oral presentations

#### 5.2.1 A Muslim response to HIV/AIDS,

*Mr Abbas Segujja, imam, Denmark*

Mr Abbas Segujja introduced himself as an imam originally from Uganda and now living in Denmark. He explained his role as an imam, emphasising the difference between the imam who is chosen as a religious leader by his community and the imam who has a religious qualification for his role.

Mr Segujja's presentation focused on the origins of the generally negative response of Islam to HIV/AIDS and the possibilities for change. He began his presentation by comparing this response to that of the ostrich when confronted by a threat, which, mythically at least, believes that it can dismiss a threat by burying its head in the sand. He went on to characterise the Muslim response in terms of a series of phases, passing from

denial of the facts to characterisation of the disease as a punishment from God affecting a variety of unholy or irreligious groups. Mr Segujja noted that this position became untenable when HIV infections began to emerge outside the bounds of these imaginary constraints and crossed racial, cultural and religious distinctions.

Mr Segujja sought to mount an argument for the incompatibility of these views through consideration of a series of rhetorical questions: If this is a disease of the unholy, then how is it that Muslims are affected as much if not more than other religions? How can Islam deny a supporting and helpful response to people affected because of their sexual behaviour/orientation? How can Islam account for the death of 'innocent' victims – the babies, children and so on? And, how can Muslims place themselves in a position of holding judgement over others when this is the prerogative of God?

Pointing out the tension between a view of HIV/AIDS as a divine punishment and the facts surrounding the epidemic, and pointing out the basic tenets of religious belief around compassion and humanity, Mr Segujja turned to a consideration of what barriers remained to block faith leaders and communities from engagement with HIV/AIDS. He identified the association of HIV/AIDS with sex and sexuality as the major obstacle, describing it as a taboo subject on which religions want to stay closed and which they are under-prepared to discuss. Drawing towards his conclusion by asking then, how it is possible in the context of religious belief to talk about subjects like prostitution, homosexuality and so on, Mr Segujja recommended that Muslims engage in processes of self-reflection and scrutiny of their scriptural sources to consider the following:

- The challenge of squaring their position with the sanc-

tity attached to human life in Islam;

- The challenge of squaring their position with the assumption of human dignity;
- The challenge of squaring their position with the need to provide information.

Mr Segujja noted the enormous potential of mosques as venues for education and the dissemination of information to young people and concluded with an appeal to the meeting that each participant remember their humanity, that they are not angels, but people characterised by shortcomings and to remember the Islamic law that states that necessity knows no rules and that when all our efforts to solve a problem have failed, we must look at some other unconventional ways solutions.

#### 5.22 Working with Roma populations (young & older generations), Mr Jozsef Bonifaz Solymosy, Hungary

Mr Solymosy began his presentation by providing the meeting with some background information on Gypsy peoples in Hungary. He emphasised their heterogeneity as a group comprising peoples who speak a number of languages and have citizenship in a number of countries. He also noted that despite their legal equality within Hungary, they are still subject to disproportionate levels of poverty, social exclusion and racial discrimination. In connection with this social marginalisation they are disproportionately affected by HIV/AIDS. He added that while these generalisations were true when gypsy peoples were considered en masse, it was important to note that particular communities within the sub-population were differentially disadvantaged. For example, the major issue for one sub-group might be access to housing while for another it might be access to health care. Mr Solymosy described religious adherence within gypsy populations in Hungary as characterised by diversity with some groups identifying as preponderantly Roman Catholic, others as Muslim, and yet others with a range of other faiths. Turning to wider social attitudes towards gypsy populations within Hungary, Mr Solymosy observed that there was a tendency for Hungarians to romanticise gypsy culture and focus on dimensions like their rich folk traditions rather than attend to their social and health needs. Mr Solymosy explained that both public policy and service provision tended to be aimed at addressing higher level needs and hence effectively discriminated against people, like gypsies, who experienced more fundamental needs. He concluded his presentation by briefly outlining an intervention aimed at gypsy children and young people with education, support and childcare through the provision of a summer activity camp. This intervention was run with and through a Roman Catholic church.

#### 5.3 Short presentations of other panel members

5.31 *An inter-denominational response to HIV/AIDS, Mr Ravi Chandran: Inter-denominational cleric, Denmark*  
Mr Ravi Chandran of the International Christian

Community introduced himself as an inter-denominational religious leader originally from Senegal now living in Denmark. He began his short presentation by affirming Mr Segujja's remarks about the difficulties faced by all religions in engaging with HIV/AIDS because of problems with discussing sexuality. He also acknowledged the existence of counterproductive tensions between faiths and described himself as working to ameliorate these. Mr Chandran argued for unity between faith groups on HIV/AIDS issues forged around a common agreement on human rights.

#### 5.32 Working with young male sex workers and religion, Mr Isidro García Nieto, Spain

Mr Isidro García Nieto introduced himself and described the main activities of his project – street outreach, peer-to-peer working and some limited workshop activities with young male sex workers aged generally between 18 and 19 and mainly from Brazil, Eastern Europe and Morocco. He emphasised the importance of acknowledging the cultural and religious background of the client group with which he works, particularly in relation to the way that it shapes their conceptualisations of homosexuality and gender. For example, some male sex workers do not see themselves as gay and therefore believe they are not at risk of HIV/AIDS.

#### 5.33 Working with young Roma people, Ms Katarína Jiresová, Slovakia

Ms Katarína Jiresová very briefly described the project in which she is involved which works primarily with groups of young people vulnerable to or engaged in injecting drug use or sex work. She noted that because of their social exclusion Roma people are over-represented in this group. Noting the short time remaining in the session she declined to give more detail and suggested instead people take the opportunity to ask her questions when the plenary was opened for discussion from the floor.

#### 5.4 Panel discussion

The presentations were followed by a short period of discussion directed by questions from the floor. In response to a question about whether religious leaders were involved in the work around PWHA by the World Council of Churches, Mr Ravi Chandran reported that he personally was working with colleagues towards this level of collaboration and strongly supported similar moves among other faith groups.

In response to a observation that differences between faith groups seemed to be an obstacle to collaborative work between different faith groups, Mr Chandran added that it was indeed the case that up to now attempts at inter-faith activity had been characterised by strive rather than agreement. The difficulty and its resolution lie in identifying and reaching agreement on basic principles. Mr Segujja concurred in relation to this point about basic principles which might be agreed by all faiths. He said

there also remains the important task of supporting different religions so that they feel able to consider how people might apply these principles in the context of their lives. He strongly argued that religious leaders had a duty not to establish principles which are too lofty.

Responding to this suggestion, a contributor from the floor noted that it is also important not to place demands on religious organisations and churches which conflict too strongly with doctrine and which they cannot meet. For example, it was possible, from their experience, to work with some faith groups on promoting sexual faithfulness as a means of minimising the risk of HIV infection even if asking them to promote condoms was impossible. By negotiating such means of collaboration it was also possible to direct HIV prevention messages in appropriate forms to members of faith groups via their religious leaders.

Mr Segujja acknowledged the benefits of this pragmatism but also noted that for faith groups with, for example, strong views on condom use, it might always be possible to work on a compromise when there is agreement on the greater importance of saving human lives. He went on to note that despite being undermined by socio-cultural change religious belief is thriving because, whatever its shortcomings, it apparently has something to offer people. The challenge is to identify what that positive point of engagement is and to work with that towards acceptance of HIV/AIDS issues.

Mr Solymosy was asked to elaborate on his views about the relationship of Roma people to HIV/AIDS services. He replied that this relationship is variable and that variability is associated with the level of connection between particular Roma populations and public services more generally. So, for example, where good relationships exist with schools these provide a vector for promoting other services, including HIV/AIDS services. He noted, however, that in relation to primary prevention activities aimed at young people, no vector of education is as effective as the family, which remains much harder to reach with interventions and services.

Invited to comment on this same issue, Ms Katarína Jiresová noted that low literacy is a challenge when working with Roma women. For example, some assume that the vertical transmission of HIV (mother to child) is inevitable, leading them to be fatalistic about infecting their children and acting as a deterrent to accessing services and in particular ante-natal treatment intervention. Ms Jiresová also noted that there are problems with professional incompetence and inexperience in developing effective communication with Roma people both within and outside the HIV/AIDS field. Asked to elaborate on cultural issues in working with Roma people, she noted that gender sensitivity is essential, as is confidence about discussing sex and sexuality. She added that in her experience, coming from outside a cultural context and ethnic

group can sometimes make it possible to raise issues and say things which people from within the community cannot articulate for themselves.

Contributing on this point, Mr García Nieto highlighted the value of peer education. He felt that this method could reach target groups better than any intervention coming from outside a cultural context. He also emphasised the importance of working at a strategic level with community leaders so that they are aware of messages being conveyed into a community and, it is hoped, can contribute to their endorsement.

Mr Segujja and Mr Chandran were invited to describe how they approached talking about HIV/AIDS within their own ministries and what kinds of response they met with. Both Mr Segujja and Mr Chandran confirmed that they both address HIV/AIDS issues in the context of their ministries and, moreover, in the context of their personal family lives. Mr Solymosy added that he liked to talk to his grandmother who always succeeds in encouraging him to ground his work in 'ordinary' life.

In response to a question asking how male sex workers related to the Roman Catholic Church, Mr García Nieto explained that in his experience they had no contact with the Church from which they felt excluded both because of their sexuality and because of their involvement in sex work.

Mr Paulo Vieira closed the session with an expression of thanks to all contributors.



## 6 Workshop session: New Trends

### 6.1 Descriptions and organisation of the workshops

The participants could attend four workshop sessions. Within each of these sessions, they attended one of six workshops (they had selected in advance of the conference which of the workshops they wanted to attend). Each workshop session provided an opportunity for participants to discuss the subjects which had been raised in a general way through the plenary sessions and to enter into a general exchange of experiences. Each workshop was facilitated by a presenter or presenters who prefaced the session with a short presentation introducing the theme of the workshop. There was also an opportunity for participants to introduce themselves and agree on ground rules. The facilitators' presentation was followed by questions and group discussion ending with the development, if possible, of some future actions points. For participants the goals of the workshops were to enable them to:

- Learn from other people about their experiences;
- Reflect on their own work;
- Identify successes in the field, and factors that make interventions successful;
- Identify needs for future activities;
- Formulate action point for future activities.

Three of the workshops in this first round related to skills-building and three to capacity-building. The overall theme of workshops within the first round was working with migrant youth and/or religious leaders and within that participants attended one of the following sessions. Reports on each workshop were compiled by rapporteurs and summaries are given below.

### 6.2 Skills-building workshops

#### 6.21 Workshop 1: Learning to work with religious or faith-based communities and developing new tools to engage religious leaders

Facilitators: *Juan Walter, Maureen Louhenapessy and Ravi Chandran*

Rapporteur: *Danica Staneková*

Participants: *Virginija Ambrazeviciene, Leyla Hussein, Asa Cronberg, Katarína Jiresová, Rosa Freitas, Joseph Asynyka, Peace Kabushenga, James O'Connor, Michel Mbulu Pasu, Omar Hallouche, Julian Hows, Paul-Gérard Bele, Thabo Sephuma and Abbas Segujja*

Following a round of introductions and a discussion about the ground rules for the session, Mr Ravi Chandran gave a presentation elaborating on his contribution to the plenary sessions in which he described his contribution to HIV/AIDS work. This led into a discussion on raising the awareness of religious leaders about the importance of engaging with HIV/AIDS issues; tack-

ling the barriers erected by senior ecclesiastical figures to this engagement; and supporting HIV+ people from faith backgrounds. It was suggested that the principle barrier faced in working with religious leaders from many denominations is enabling them to accept and talk about allowing condom use.

Participants in this workshop recommended that future action points should include:

- Improving awareness of HIV/AIDS prevention among religious leaders,
- Supporting religious leaders and social workers in finding consensus and in working together,
- Supporting religious leaders in finding ways of talking about and accepting condoms within the 'religious vocabulary'.

It was suggested that awareness-raising activities with religious leaders should include incorporating HIV/AIDS prevention and sexuality issues into the basic theological training. The workshop also recommended that religious leaders should be supported and encouraged to work in secular as well as non-secular settings. They should also be encouraged to be pragmatic, aiming to identify and support people in their communities in relation to their everyday experiences and needs around HIV/AIDS.

#### 6.22 Workshop 2: Learning to talk about sex; dealing with diversity, gender and intercultural communication issues

Facilitators: *Maria Pisani and Antonio Jester Medina*

Rapporteur: *Audrey Prost*

Participants: *Ricky Konolafe, Amílcar Soares, Agita Seja, Hamid Ouali, Isabel Looysen, Maeve Foreman, Moono Nyambe, Isabel Nunes, Olive Zuber, Nordine Frizi, Martina Zikmundova, Antje Sanogo, Michael Cruz, Fabrice Métayer, Pangiotis Damaskos and Isidro García Nieto*

Following a round of introductions by the participants, the facilitators explained the aim of the workshop as being to identify ways of becoming more effective in the context of cultural diversity, gender and sexual diversity. This led into a discussion mainly around the issues of self-awareness of cultural identity and background, the potential benefits of bringing outsiders into some cultural settings where it might be difficult for 'insiders' to raise issues around HIV/AIDS and sexuality, and the importance of considering and taking into account local cultural norms around HIV/AIDS and sexuality when designing and delivering prevention programmes and interventions. There was discussion about the usefulness of an interactive game designed by one participant in the workshop as a means of raising issues around sex and sexuality. Participants shared professional experiences around difficulties with raising HIV/AIDS and sexuality

issues in some cultural contexts. Also, participants discussed the importance of understanding one's own sexuality as an element of developing cultural competency.

*6.23 Workshop 3: Learning to inspire youth & adult collaboration – improving youth & adult partnership*

Facilitators: *Jozsef Bonifaz Solymosy and Hassen Ben Hidi Ghobghob*

Rapporteur: *Katarzyna Gajewska*

Participants: *Jacqui Aber, Rosaline M'Bayo, Ghirmay Assemahegn, Joanna Garnier and Marlies Geurts*

Following a round of introductions by the participants, Mr Hassen Ben Hidi Ghobghob gave a short oral presentation on his professional experiences of working with young people. Mr Solymosy gave a short oral presentation on using a network as a vector of information distribution to reach young people within a community. They mentioned the importance of youth participation in HIV/AIDS prevention interventions, and drew attention to some of the potential benefits and pitfalls and the difficulties with establishing genuine partnerships rather than tokenistic involvement. The presentations were followed by a discussion on the communication gap between young people and adults, the challenges of reaching target groups and the potential for peer education as a working method for HIV/AIDS prevention aimed at youth. It was suggested that several factors are important in establishing successfully participative youth projects including adopting a respectful and tolerant attitude towards young people, bringing and harnessing motivation and know-how within the target group, consideration of gender issues – particularly the ways in which gender roles and norms affect communication between the sexes among young people, the social and educational background and age of the young people involved, and the promotion of positive rather than negative messages.

Participants in this workshop recommended that future action points should include working on the gaps in provision and striving to establish genuine partnerships.

### 6.3 Capacity-building workshops

*6.31 Workshop 4: Capacity-building for new leadership – identifying possible collaboration partners*

Facilitators: *Andreas Berglöf and Mirka Mozer*

Rapporteur: *Evita Leskovsek*

Participants: *Georg Bröring, Kate Higgins, Gonzalo Mazuela, José Antonio Tchuda, Felicien Muhire, Carlos Gonzales and Monica Heras*

Following a round of introductions by the participants and an introduction of the topic by the facilitators, Mirka Mozer gave a short oral presentation on the project Cross-Over in Copenhagen, Denmark. This stimulated some questions about the work and led into a more general discussion around the challenge of identifying and secur-

ing human and financial resources both within and outside HIV/AIDS organisations to support and undertake prevention work. It was stated that successful collaboration is based on a range of factors including developing projects and interventions which are realistic in scope and have clear aims, objectives and outcomes. It was noted that market mechanisms can sometimes be helpful in formulating responses to the needs of funding bodies, communities and policy makers. It was noted that it is important to identify motivations for collaboration at a range of levels in order to appeal to actors across practice, management and policy-making contexts.

*6.32 Workshop 5: The challenge of involving boys and men in HIV/AIDS prevention*

Facilitators: *Elisabeth Ioannidi and Miran Solinc*

Rapporteur: *Melitia Weekers*

Participants: *Bernadette Mbala, Peter Wiessner, Mina Rhouch, Ana María Caro Murillo, Latsin Alijev, Fernanda Cardoso, Beauty Chanda Petersen and Sanvi Noel Ahebla*

Following a round of introductions by the participants and an introduction of the topic by the facilitators, there was a discussion on perceptions of gender and responsibility for sexual health among young people and especially migrant young men. Participants agreed that there is a need to enter into a better exchange of their methods for working in this area and that there is positive potential in the promotion of female condoms to all women as means of taking charge of their sexual health.

Participants in this workshop noted that it is important not to assume that a 'one-size-fits-all' approach to working with young men would be appropriate or successful.

*6.33 Workshop 6: Using creative methods in prevention activities*

Facilitators: *Marthe Djilo Kamga, Valantis Papatathanasiou*

Rapporteur: *Marc Wluczka*

Participants: *Fatou Coulibaly, Batulo Essak and Astrid van Leeuwen*

The participants introduced themselves and workshop facilitator Marthe Djilo Kamga gave some background and explained the development of a video which was then played. The video comprises a compilation of video letters between African communities in France and Belgium, which dealt with some of the taboos around HIV/AIDS and aimed to create an open debate. Valantis Papatathanasiou then showed two short videos which are used in Greece to raise awareness among the general public. The presentations of these videos were followed by a discussion which on the use audio-visual materials and other innovative materials.

## 7 Plenary session 2: Education & Entertainment

### 7.1 The Safe Sex Comedy Show, Amsterdam

In the afternoon the conference enjoyed a presentation by the Safe Sex Comedy Show from Amsterdam. The group comprised young men and women who treated us to a series of sketches illustrating a range of subjects around HIV/AIDS and other sexually transmitted diseases, sexual health, relationships and sexuality. Through this medium the conference heard from a range of characters each talking about these subjects in imaginary situations. The performances included representations of the nervousness and anxiety with which people approach their first sexual intercourse and especially the pressure boys feel because of the assumption that, '...you gonna know what to do'. We heard too about the career of 'Mr Herpes' and his family of sexually transmitted diseases; and about the desperation and isolation felt by young women abandoned in pregnancy by young men who, '...came and saw and ... disappeared' leaving them to become a woman who is still only, '...a child carrying and growing a child inside'. There was a call from a young woman to challenge sexism in social life and service provision. We followed a young man through his experiences of visiting an STI clinic and another who was 'Janet trapped inside the body of John' and another macho man ending with a challenge to deal with homophobia and sexism, and all other assumptions we make about other people's sex and sexuality, to 'mind our own'. More information about the Safe Sex Comedy Show is included in appendix 5.

### 7.2 Forum discussion

The performance was followed by a forum discussion in which the performers responded to questions and comments from conference participants. In reply to a question about how they had formed the group, the performers explained that they are all entertainers working in Amsterdam and they were convened into a group through word of mouth. Asked about whether they worked in schools and the reception the performances get, they noted that their experience was as yet limited to working in two schools where the show had been positively received. It was noted that they distributed condoms to students as part of the performance.

In response to a question about whether either a script or recording of the performance was available, the performers pointed out that a DVD may be accessible through Juan Walter but that there is no script available for circulation. They noted that they wrote their own scripts and



thought that they could not perform in the way that they did unless they spoke from their own hearts, although they emphasised that the development of material did involve consulting with other young people on a local basis so as to ensure cultural relevance. Replying to a question about whether audiences seem to find the material culturally relevant and to an observation that the material is both relatively explicit and heavily influenced by Black American culture, the group noted that there was no driving intention behind their work to achieve cultural inclusiveness but recognition. This they felt had been achieved since they recognised these references themselves as young people.

It was also noted that the performance could be modified to suit particular audiences. Another questioner concurred with this view but asked how teachers and parents responded to the performance. The performers noted that teachers were shocked about things that were said in the course of the show but they usually accepted that the response of young people was an accurate assessment of its relevance and appropriateness. They noted that this was reflective of a wider issue about generational differences and that the gap between what young people want and what adults provide is growing. They emphasised that in matters like HIV/AIDS, in their view there was no choice but to talk about sex and sexuality in ways that are understood by young people. Asked if the group itself was representative of young people from a strong religious faith background, the performers reiterated the point that the performance could be modified to reflect the specific needs and concerns of groups of young people and acknowledged that they would consider additional consultation or involvement with young people from a strong faith background in order to be able to represent their experiences faithfully.

Juan Walter provided some additional background information about the demand placed on him by supporting the show. He noted that the process involved providing education, supporting self-exploration, and helping with the development of material.

Since this segment overran significantly, a proposal to cancel the planned workshops for the afternoon was accepted and the session closed with the performance of two rap songs written by a member of the Safe Sex Comedy Show.

## 8 Plenary session 3: Innovative actions: PLWHA and access to treatment and care

### 8.1 Introduction and welcome to the session

Mr Juan Walter welcomed participants back to the meeting. In response to observations that there had been insufficient time in the workshop session of the previous afternoon for a full discussion, he suggested that those workshops which had begun yesterday morning would run again in the first workshop session of the day and those organised for the afternoon sessions would be collapsed together. He also informed the meeting about the information market (comprised of materials brought along by participants) and encouraged people to visit it and take materials. He concluded by introducing Ms Moono Nyambe as chair for this plenary session.

Thanking Mr Walter for his introduction and noting the importance of ensuring that the session produced points of action, Ms Nyambe proceeded to introduce the speakers and panel for the session.

### 8.2 Oral presentations

#### 8.2.1 *Running against HIV/AIDS: A sketch of Portugal and Portuguese women, Ms Isabel Nunes, Portugal*

Ms Isabel Nunes thanked for the opportunity to be present at the meeting. She presented a sketch of Portugal, from the perspective of a HIV+ woman, oriented around four principal themes associated with the transmission of HIV/AIDS; behaviour, mobility, ignorance and poverty. She began by providing an overview of the epidemiological data on HIV/AIDS in Portugal, which shows that around 27,000 people have been diagnosed with HIV/AIDS since 1983 (12,210 with AIDS; 2,448 with Symptomatic Non AIDS; and 12,355 asymptomatic) and that 321 new infections were reported in the last quarter of 2005.

Seeking to explain the continuing rise of HIV infections, Ms Nunes turned first to an analysis of the cultural backdrop against which Portuguese social attitudes towards HIV/AIDS were drawn. This backdrop consists in a conservative, Catholic tradition, a belief in monogamy and celibacy until marriage combined with a 'Latin temperament' which results in characteristics like displays of hyper-masculinity among men. Ms Nunes said that these aspects of the Portuguese character and social attitudes towards HIV/AIDS are influenced by the 'fado' culture (beliefs based on fate; "it happens only to others"). She noted too that Portugal, in the context of Europe, is a relatively poor country with relatively low educational achievement and rising unemployment.

Addressing next the issue of mobility, Ms Nunes pointed out that Portugal attracts large numbers of migrants as workers, legal and illegal, and tourists. She described par-

ticularly the risks associated with these different categories of migrants, noting:

- That migrant workers are often men separated from their families and hence at risk of engaging in casual sex with multiple partners,
- That illegal migrants are culturally uprooted and may struggle – particularly as marginalised people in an increasingly individuated society – to find work, feel secure and access services,
- That tourists are often uninhibited as part of their holiday experience.

She added that since Lisbon is often the ultimate destination for legal or illegal migrants, it is the epicentre of HIV/AIDS infections within Portugal.

Turning to the issue of the particular vulnerability of women to HIV/AIDS within Portugal, Ms Nunes drew attention to the variety of negative associations between femininity and sexuality and the lower social status and power of women in heterosexual relationships. This is coupled with lack of awareness of vulnerability and fatalism. She asserted that this often results in women having reduced self-esteem, fearing moral judgment and discrimination if they talk about their sexuality or HIV status and feeling unable to negotiate safer sex for fear of rejection by male partners.

Migrant women, Ms Nunes said, are even more vulnerable. They are subject to stereotyping and prejudice, they generally have lower education, they are often the victims of violence, they are more prone to take on illegal or irregular work and hence are over-represented in prostitution, and they are unable, if their status is illegal, to access emergency social services. These social characteristics are overlaid by a variety of cultural factors impeding access to sexual health promotion, HIV/AIDS prevention and other social/welfare services. Ms Nunes said that migrant women from ex-colonial states are also vulnerable to genital mutilation and may enter into polygamous relationships with men. Among Muslim women she noted more resistance to these practices and patriarchal attitudes, but reluctance to overtly challenge them for fear of losing the social support and status that they rely on men to give them.

Taking all this into account, Ms Nunes argued that effective HIV/AIDS prevention aimed at women in Portugal needs to acknowledge both socio-cultural and individual factors in order to understand women's vulnerability to infection and to develop appropriate responses. In relation to addressing social and cultural factors, she recommended paying attention to developing policies which acknowledge the diversity of women, both in terms of their sexuality and in term of their behaviours, and which seeks to reduce stig-



matization. She argued that these policy developments need to be predicated on an accurate assessment and acknowledgement of the experiences of women and to be flexible to their diversity. In relation to reaching the individual, Ms Nunes mentioned the importance of addressing women's sense of self-efficacy, response efficacy, response costs and bolstering their assertiveness skills.

She concluded her presentation with a call for action to achieve the following:

- Better quality of life
- More autonomy
- More self-esteem
- More resilience
- A critical attitude
- Assertive negotiation skills
- Improved preventive behavioural skills

She suggested that this might be accomplished through innovative action including:

- Self and social development
- Post-traumatic stress therapies
- Emotional freedom therapies

The chair thanked Ms Nunes for her presentation and drew attention to the importance of developing prevention activities which reach all people but acknowledged the particular vulnerabilities of women, especially migrant women. She introduced Mr Gonzalo Mazuela.

#### *8.22 Innovative action in targeting men who have sex with men, Mr Gonzalo Mazuela, Spain*

Mr Mazuela began his presentation by asking us to consider what is meant by innovation in HIV/AIDS prevention. He presented slides of several Spanish condom promotion posters, illustrating the differentiation of messages for different target groups. He pointed out that while this was somewhat innovative in terms of acknowledging different behavioural risks associated with different target groups, it lacked any deeper understanding of the factors which might militate against people being able to convert the message into action.

Turning to the specific issue of targeting men who have sex with men (MSM), Mr Mazuela explained that, in his experience, it is at least in part the nature of the cultural context which affected the ability of MSM to recognise,

internalise and act in accordance with these messages about safer sex. He pointed to the lowering of their self-esteem through the association of homosexuality with perversion, and suggested that campaigns simply extolling condom use and which do not take this into account are unlikely to be successful.

He elaborated this point turning to the issue of reaching drug users, noting that some terms used in media campaigns and interventions do not acknowledge the meanings attached to concepts within the particular target groups (for example, the positive connotations of 'risk' in the context of masculinity).

In Mr Mazuela's view, these examples illustrate that currently media campaigns promoting safer sex are not sufficiently empathetic or sensitive to the experiences of the groups which they are targeting. They tend, more than anything else, to address 'risk', which may not always be present, but to exclude pleasure, which usually is. He argued that it might be necessary, therefore, to reconfigure publicity campaigns so that they acknowledge that MSM may use drugs in order to boost their confidence and self-esteem, and that sex itself may then be self-affirming for them. He added that in this context giving and receiving sexual pleasure and the consequent boost to self-esteem may override any concerns with risk of exposure to HIV. He drew a comparison between risk of HIV infection and other risk activities like sports in which risk-taking is not always condemned but sometimes celebrated.

In conclusion, Mr Mazuela argued that there is a need to strengthen positive behaviour rather than stigmatise negative behaviour through media campaigns and other HIV/AIDS prevention interventions. He suggested that this requires more careful and sensitive attunement with the target group and the adoption of a less patronising position on the part of HIV/AIDS prevention workers.

Ms Nyambe thanked Mr Mazuela for his presentation. She noting that it served as a reminder that HIV/AIDS prevention aimed at gay men demands work to challenge homophobia. She then introduced Mr Julian Hows.

#### 8.3 Short presentations by other panel members

##### *8.31 PLWHA and access to treatment and care, Mr Julian Hows, United Kingdom*

Mr Hows gave a short presentation in which he argued for action to challenge inequalities in relation to access to HIV/AIDS treatment and care. He discussed the claims made by UNAIDS and WHO that in 2005, PLWHA in Western Europe had universal access to treatment and care and half of all PLWHA in Eastern Europe had access to treatment and care. Mr Hows held these claims to be misleading, since universal access was defined here as representing more the 80% of the population of HIV+ persons. He commented that it was his view that those excluded for access to treatment and care would include the most vulnerable and marginal groups of migrants,

## Saturday 1 October 2005: Innovative Actions

### 8 Plenary session 3: Innovative actions: PLWHA and access to treatment and care

injecting drug users, sex workers, and people living in a country but without rights of citizenship. Mr Hows argued that it is both a duty and a responsibility to raise awareness of what these data mean and to advocate on behalf of PLWHA who have a less powerful voice. He noted that lobbying should aim not only to achieve full access to (antiretroviral) treatment and care but also to ensure that PLWHA have access to appropriate counselling and support.

He went on to illustrate some of the barriers which exist to treatment and care, noting for example that in Latvia, which is described as offering universal access to PLWHA, injecting drug users wishing to obtain antiretrovirals must attend a hospital every day to receive their prescription. This effectively allows the authorities to claim that those who are unable to do so are disbarring themselves from treatment. Mr Hows concluded by reiterating his call for a sustained challenge to the misrepresentation of the degree of access to treatment and care available to PLWHA and appealed for participants in the conference to join GNP+ (the Global Network of People Living With HIV/AIDS) and to contribute to the survey on positive migrants' experiences as part of this lobbying activity.

#### 8.32 Working with migrant women, Ms Leyla Hussein, United Kingdom

Ms Leyla Hussein, who described herself as Somalian working with Somalian communities, gave a brief description of her work as a youth outreach worker in East London. She explained how she works with women who have been affected by female genital mutilation. She discussed the importance of adopting strategies which are friendly to young persons, and of demonstrating sensitivity and awareness to their experiences and needs of the kind demonstrated through the Safe Sex Comedy Show.

#### 8.33 Working with migrant African men, Mr Sanvi Noel Ahebla, France

Mr Sanvi Noel Ahebla briefly described his work as part of African association of HIV/AIDS prevention workers in Paris. He explained that he undertakes primary and secondary prevention activities within the community and works particularly with PLWHA on issues around living with AIDS. His organisation provides cultural mediation for hospitalised PLWHA and supports PLWHA to regain self-esteem and counter the exclusion that comes from stigmatisation. He concluded with an appeal for action to stop the expulsion of PLWHA to other countries, noting that this amounted to an act of inhumanity for which we would, one day, all pay the price.

#### 8.4 Panel discussion

These presentations were followed by a short period of discussion directed by questions from the floor. In response to a question about the relationship between low educational attainment and HIV/AIDS prevention with migrant young people in Portugal, Ms Nunes said that she acknowledged the important role sex education

in schools plays in HIV/AIDS prevention but provision is poor in Portugal. In relation to Mr Julian Hows' presentation it was observed that claims that it is possible to make antiretrovirals available to vulnerable communities are unsound. Migrants with no documentation are not recognised by governmental organisations and hence do not receive information or services.

In thanking Mr Hows for his presentation and noting the potential of GNP+ as a lobbying group, a questioner asked for his advice about what would be an appropriate response to someone posing as HIV+ in order to further lobbying. Mr Hows suggested that the questioner challenge this person about their status. Another contributor gave a short description of his work on HIV/AIDS prevention with migrant people and observed that their needs are often complex and more pressing than HIV/AIDS prevention. He cited, for example, needs for social, legal and welfare support as having priority over sexual health.

Another contributor commented that they had found the presentation on innovative approaches to safer sex promotion interesting and wondered if the reason that media campaigns have relatively limited success is that they fail by definition to address individual concerns. They recommended that prevention focus more closely on the family as an appropriate social unit for targeting. Mr Mazuela agreed with the potential benefits to be derived from focusing on the family as an arena for HIV/AIDS prevention. He added that the innovation he was suggesting was to acknowledge both cultural diversity, and within it, diversity of conceptualisations of risk and benefit. He said that he hoped the ultimate aim of HIV/AIDS prevention would be to mobilise individuals to accept responsibility for their actions and support them to assert their needs.

It was observed that HIV organisations themselves are sometimes poor at effectively reaching migrant people, providing information and services which are inaccessible to those who are illiterate or not fluent in the language of their host country. Mr Hows observed that some larger NGOs like the Red Cross are making attempts to respond to this problem. Mr Ahebla added that one way of achieving greater organisational awareness of migrants' needs and experiences is through role play. He described an activity undertaken in France whereby professionals for HIV/AIDS and other health and welfare organisations were asked to adopt the role of PLWHA and migrants in order to help their empathy with the position and experiences of migrant PLWHA trying to access services. He offered to forward information about this programme to any interested parties.

Ms Nyambe closed the session, thanking all the presenters for their contributions and noting that the session had provided food for thought around what innovation in HIV/AIDS prevention involves and how this might be influenced by considerations of cultural difference and diversity.

## 9 Workshop session: New Trends (continuation)



### 9.1 Organisation of the workshops

Following the suggestion of Mr Juan Walter, the workshop sessions which began the previous morning were reconvened at this point. In some cases the facilitators remained the same and in others those who were to have made their presentations within the workshops which were planned for the previous afternoon filled this role (see below).

### 9.2 Skills-building workshops

#### 9.21 Workshop 1: Learning to work with religious or faith-based communities and developing new tools to engage religious leaders

Facilitators: *Juan Walter, Maureen Louhenapessy and Ravi Chandran*

Rapporteur: *Danica Staneková*

Participants: *Virginija Ambrazeviciene, Leyla Hussein, Asa Cronberg, Katarína Jiresová, Rosa Freitas, Joseph Asynyka, Peace Kabushenga, James O'Connor, Michel Mbulu Pasu, Omar Hallouche, Julian Hows, Paul-Gérard Bele, Thabo Sephuma and Abbas Segujja*

This workshop resumed with a short reintroduction of the participants and a reprise by Mr Ravi Chandran of the substance of his presentation, with particular attention to his recommendations for improving working relationships between HIV/AIDS organisations and religious leaders. Further discussion centred on whether it is good to approach working with religious leaders less as a process of educating them, with its didactic and paternalistic overtones, and more as process of entering into dialogue and seeking to learn about their views and the rationale for these views. The latter could be a basis for mutual understanding and respect and, potentially, change.

There was also discussion about the applicability of arguments, often pitched by religious organisation and churches, for abstinence and faithfulness as effective HIV/AIDS prevention strategies. It was agreed that while

these remain a theological ideal it is important to help religious leaders see that they are not always lived up to. Participants further noted the importance of pointing out that there is no evidence that access to condoms leads to increased promiscuity and that sexual risk-taking is not dictated by access to contraception but by a range of attitudes, values and social circumstances.

In addition to the action points identified in the previous session of this workshop, it was agreed that it is important to identify and seek to work with religious leaders on HIV/AIDS prevention aimed at migrants. In the first instance it is necessary to:

- identify sympathetic religious leaders – those who acknowledge diversity, accept that human conduct does not always meet ideals enshrined in religious beliefs, and are open to communicating about the vulnerability of people to HIV/AIDS. This might include accessing networks like that run by Aegis which provides support for HIV+ religious leaders.

Further recommendations included:

- Improving communication between HIV/AIDS organisations and religious leaders;
- Improving cooperation between HIV/AIDS organisations and religious leaders;
- Improving networking between HIV/AIDS organisations and religious leaders.

#### 9.22 Workshop 2: Learning to talk about sex; dealing with diversity, gender and intercultural communication issues

Facilitators: *Michael Cruz and Hamid Ouali*

Rapporteur: *Maria Pisani*

Participants: *Amílcar Soares, Agita Seja, Isabel Looyen, Maeve Foreman, Moono Nyambe, Isabel Nunes, Olive Zuber, Nordine Frizi, Martina Zikmundova, Antje Sanogo, Fabrice Métayer, Pangiotis Damaskos and Isidro García Nieto*

This workshop resumed with a short introduction from each of the participants, a recapitulation of the theme and aims of the workshop and a brief oral presentation on his practice by Mr Hamid Ouali. The subsequent discussion centred on issues around developing practice which is sensitive to the cultural needs and norms of specific communities. Some surprise and excitement was noted at the degree of directness and explicitness about HIV/AIDS issues in Mr Ouali's work, particularly within outreach activities. There was discussion around the need to forge links with imams in order to access Muslim communities and to recognise the contradictions that may exist between people's public and private lives. Participants shared experiences of their practice with ethnic minorities and migrant populations and concluded that the common theme was involving the target group in order to ensure cultural sensitivity. It was noted that in Norway, Muslim children are being withdrawn from school-based sex education although talking about sex is not forbidden in the Koran.

In addition to the actions points identified in the previous session of this workshop, participants identified the followed action points:

- The need to facilitate sharing of models of community development (asking could this be done through the A&M website);
- The potential benefits of encouraging the pornography industry to produce films including safer sexual practices.

*9.23 Workshop 10: Epidemiological developments in HIV/AIDS in migrants and ethnic minorities*

Facilitators: *Ana María Caro Murillo, Carmen Martinez and Julia Del Amo*

Rapporteur: *Julia Del Amo*

Participants: *Moono Nyambe, Elizabeth Ioannidi, Katarzyna Gajewska, Gonzalo Mazuela, Jesús Edison Ospina Valencia, Katarzyna Gajewska, Hassen Ben Hidi Ghobghob, Jacqui Aber, Joanna Garnier, Felicien Muhire and Jozsef Bonifaz Solymosy*

This workshop began with a short oral presentation on the concepts of race and ethnicity and on the basis of this participants were asked to classify themselves. This exercise provided the stimulation for a discussion about how concepts of race and ethnicity are related to self-perception and how pejorative they can be. Participants discussed the utility of these concepts and their potential meaningfulness in public health and epidemiological monitoring of HIV/AIDS trends in different target groups. The main outcomes of this discussion were agreement that it is essential that classifications of racial/ethnic group takes into account the local historical background, for example, gypsies in Hungary and Blacks in the USA. Debate about whether the collection of epidemiological data by ethnicity can ever be justified, even where it is

with the express aim of helping particular communities, was unresolved. There was greater consensus that data on socioeconomic status, gender and age are valuable. Participants in the workshop identified the followed action points:

- The need to work with communities on the development of appropriate tools;
- The need to lobby to translate data into action and funding;
- The need to assess the validity and meaningfulness of ethnic/racial classifications with the groups to which they are supposed to apply.

Material generated in this workshop will be used by the facilitators as a contribution to a project report on Epidemiological Development.

9.3 Capacity-building workshops

*9.31 Workshop 4: Capacity-building for new leadership – identifying possible collaboration partners*

Facilitators: *Andreas Berglöf and Joseph Asynyka*

Rapporteur: *Georg Bröring*

Participants: *Julian Hows, Ashley Bernardina, Clay Toppenberg, Marlies Geurts, Amílcar Soares, Martina Zikmundova and Asa Cronberg*

This workshop resumed with a short introduction from each of the participants, a recapitulation of the theme and aims of the workshop and a brief oral presentation on his practice by Mr Joseph Asynyka. He described the work of the newly formed network NAMIO, a coalition of community-based organisations (CBOs) who have identified a common problem with lack of access for migrants to prevention, treatment and care. The formation of the coalition took place in the demoralising context of few resources and few sustainable policies and interventions for migrants and little active training around migrancy issues. NAMIO's objectives reflect the need, therefore, for cooperation and networking, training and guidance, and the promotion of healthy behaviour among migrants, so to contribute to the global fight against HIV. Mr Asynyka concluded his presentation by asking if and how NAMIO could contribute to the work of other NGOs, other agencies in the Netherlands and the international arena.

This prompted a wide-ranging discussion in which mention was made of the political environment in which migrant NGOs operate, which is often characterised by stigmatisation and discrimination. Participants also discussed the ability of marginalised groups to organise themselves, and the need for other general NGOs to support and stimulate migrant communities and groups by recognising their potentially valuable role in implementing HIV/AIDS prevention work. They were identified as being best placed to access the target group and to



assess and understand their needs. It was noted, however, that there are risks of obstruction to collaboration from bureaucratic systems and organisational territoriality which need to be acknowledged from the outset. It was suggested that networking between migrant CBOs and NGOs is a key mechanism for galvanising activity, and that this needs to take place in the context of a commitment to the empowerment of migrant communities.

Participants in the workshop identified the following action points:

- The need to accept the leadership challenge, especially among local, regional and international networks;
- The benefits of appointing a mediator at a national level to bring together and mediate between migrant NGOs/CBOs;
- The need for training and skills development programmes which equip people to develop and run CBOs which might be expedited by collating and disseminating evidence on current practice. The importance of targeting this dissemination was emphasised.

*9.32 Workshop 5: The challenge of involving boys and men in HIV/AIDS prevention*

Facilitators: *Valantis Papathanasiou*

Rapporteur: *Melitia Weekers*

Participants: *Bernadette Mbala, Peter Wiessner, Beauty Chanda Petersen, Batulo Essak, Leyla Hussein, Panagiotis Damaskos, Miran Solinc, Ghirmay Assemahegn and Antje Sanogo*

After the participants introduced themselves and the facilitators introduced the topic, there was a general discussion about the question of masculinities. Mention was made of the importance of considering ways to approach migrant men and the need for respect for diversity and difference between men as the context for effective HIV/AIDS prevention.

Participants in this workshop noted that it is important to develop interventions for boys and young men in the context of a detailed consideration of gender, sexuality and cultural diversity.

*9.33 Workshop 6: Using creative methods in prevention activities*

Facilitators: *Marthe Djilo Kamga and Isidro García Nieto*

Rapporteur: *Ricky Komolafe*

Participants: *Isabel Nunes, Monica Heras, Fernanda Cardoso, Audrey Prost, Astrid van Leeuwen and Hassen Ben Hidi Ghobghob*

After the participants in the workshop introduced themselves, Marthe Djilo Kamga described the development of a project involving the production of photo-story comics in Belgium-Walloon. She explained how the comic strips are a tool for working with African communities. A documentary on the life of a Brazilian male sex worker in

Madrid which is also used as an educational resource was presented by Mr Isidro García Nieto.

The focus of the subsequent discussion fell on how members of migrant communities and prevention agencies achieve effective communication and feedback on their respective activities and needs. It was noted that target groups are not homogeneous. It is important to use a variety of means of disseminating HIV prevention messages.

Engagement with the target group was held to be essential to achieve appropriate responses to needs. It was also noted that while materials which make use of photographs have a special impact, people can feel understandably reluctant to contribute and thereby run the risk of recognition and concomitant stigma and discrimination. There was a lively discussion on the use of written text, reasons to avoid it and the need to provide the target group with contact information. There was also a discussion about the impact of religious belief on attitudes towards prevention, treatment and care. It was noted that beliefs can sometimes militate against a realistic assessment of HIV risks. It was also noted that insufficient attention was been paid to cultural diversity, language and attitudinal issues in the early stages of the epidemic, resulting in many avoidable infections.

Participants in the workshop identified intensifying action to promote condom use and access to antiretrovirals as points for future attention.

## 10 Plenary session 4: Education & Entertainment



### 10.1 Pea de Teatro, Portugal

In the afternoon the conference enjoyed a presentation by the Pea de Teatro theatre group from Lisbon. The group comprised a young man, young women and a compere. They performed extracts from a play adapted from “Pas si simple... mais pas si compliqué non plus!” (‘Neither too easy... nor too complicated!’), originally created by the Paris theatre company “Entrées de Jeu” in collaboration with CRIPS Isle-de-France (Regional Centre of AIDS Prevention).

The company performed three short scenes, each introduced by the compere, which dealt with the experiences of a young couple from their first meeting and attempts to make a date to several months into their relationship. The actors demonstrated the mutual embarrassment experienced by boys and girls and the difficulties with being honest about one’s feelings. The next scene took us three months into their relationship and back to the boy’s house, where, with his parents out for the evening, he tried to persuade his girlfriend to have sex with him. We saw her rebuff his manipulative attempts to coax her into bed. Finally, we caught up with the couple on holiday. Now the girl had the difficult task of disclosing to her boyfriend that she had been unfaithful and might have an STI. We saw her struggling with the challenge of avoiding having sex with him rather than asking him to use condoms and thereby implying her unfaithfulness.

The performance was followed immediately by a theatre debate in which the cast demonstrated how the issues raised in the show would be followed through in the context of working with young people. They played extracts of the last scene again and invited members of the audience to interrupt the performance with suggestions about how the characters might have handled the situation differently. Two members of the audience were invited, in turn, to come onto the stage and take over the role of one of the characters and demonstrate their suggestions with hilarious but thought-provoking consequences. The

exercise illustrated the complexity of the situations and the many ways in which they might play out.

### 10.2 Forum discussion

The performance was followed by a short general discussion in which participants in the conference were invited to ask questions of the performers. The male actor was asked why he presented the male character in the last scene – the victim of piece, in the view of the questioner – as a relatively ‘soft’ personality. The actor pointed out that presenting the male character in this way, rather than, for example, as aggressive and intolerant, gave the audience more scope to develop his responses to his girlfriend’s disclosure of unfaithfulness.

A further question related to the wider context in which performances of this play are situated when they are delivered in schools. In response the cast pointed out that they like to deliver the show in the context of a programme of sex education which provides a means for following through on the issues that it raises. They also noted that the show could be staged productively at the start of such a programme as a stimulus for further discussion and identification of themes which the programme could address in more depth. The cast were also asked what differences they detected in responses to the show according to age group being targeted. They noted that younger students tended to see it as pertinent to their current experiences of relationships. However, the show worked just as effectively with older groups, like university students, who related the content to the early part of their romantic and sexual careers.

# 11 Workshop session: Innovative action

## 11.1 Organisation of the workshops

Following the proposal made earlier in the conference, both workshop sessions planned for this day were collapsed into this one session. The workshop on epidemiological developments was the exception, running for the second time but with new participants.

## 11.2 Skills-building workshops

### 11.21 Workshop 7: Learning to work with a community-based approach – and mobilising the community for prevention activities

Facilitators: *Rosaline M'Bayo and Mina Rouch*

Rapporteur: *Rosaline M'Bayo*

Participants: *Mirka Mozer, Beauty Chanda Petersen, José Antonio Tchuda, Olive Zuber, Jozef Bonifaz Solymosy, Martina Zikmundova, Agita Seja, Fabrice Métayer, Thabo Sephuma and Hamid Ouali*

After a round of introductions and a brief discussion about the ground rules and aims for the session, an overview of the theme of the workshop was provided. The presenters stressed the importance of understanding a variety of systems and traditions which affect migrant communities. They drew attention to a range of social practices associated with religious beliefs which have bearing on HIV/AIDS prevention including polygamy, female genital mutilation, difficulties with discussing and promoting condoms, and gender issues including the sexual double-standard which permits pre- and extra-marital sex among men but not women. They also mentioned difficulties with discussing sexuality where HIV/AIDS remains a taboo subject, women may be driven into prostitution by poverty and many myths surround the use and effectiveness of condoms as protection against infection. Attention was drawn to structural and systemic obstacles to accessing health care relating to residency status, health services bureaucracy and inadequate support with translation and cultural mediation. In response to these difficulties the presenters suggested adopting a range of strategies including the following:

- Building partnerships within communities to expedite information and knowledge transfer, challenge social practices which increase vulnerability to HIV/AIDS and break down taboos around sex and sexuality. They acknowledged that lack of capacity and resources and insufficient commitment to partnership working could all negatively affect this work;
- Networking with health service providers and migrant organisations to challenge discrimination, and to ensure development of prevention and care services which are culturally appropriate and facilitate knowledge transfer;
- Building capacity in the form of CBOs and NGOs which can undertake these activities.

Most of the discussion which followed the presentation

concerned identifying innovative ways of facilitating communication between communities, services and CBOs involving Education & Entertainment and networking. It was suggested that it is important to achieve this by working with the target group on intervention development, empowering the community and engaging role models such as football players and musicians.

Participants in the workshop identified the following actions points:

- The importance of learning from experiences in other countries through effective networking;
- Improving community participation through better needs assessment and identification of local resources;
- Building robust channels of communication with and within communities;
- Developing skills within the community through knowledge transfer and exchange of experiences and views.

### 11.22 Workshop 8: Learning to empower collaboration between PLWHA and health actors

Facilitators: *Maureen Louhenapessy and Marthe Djilo Kamga*

Rapporteur: *Valantis Papathanasiou*

Participants: *Noel Sarvi Ahebla, Joseph Asynyka, Peace Kabushenga, Amílcar Soares, Fernanda Cardoso, Bernadette Mbala, James O'Connor and Jacqui Aber*

After a round of introductions and a brief discussion about the ground rules and aims for the session, an overview of the theme of the workshop was provided. The facilitators provided an analysis of the factors which define the needs of migrant PLWHA, highlighting the importance of understanding the social structural, interactional and cultural dimensions of identity and need. They argued that a person's age, social class, gender, and sense of place in the country to which they have migrated, the nature and context of their sexual interactions and the wider cultural norms and relations in which they function all have a bearing on their views of themselves and their vulnerabilities and needs. Drawing the canvas a little more widely, they identified a range of determinants which influence the health and attitudes of migrant communities. These determinants include the routes and experiences of and motivation for migration, migrants' socio-economic and political status, and the cultural norms relating to HIV and health.

The facilitators then reviewed a range of factors which obstruct effective communication around HIV/AIDS with migrant communities, including language issues, legal and social barriers, and cultural and religious norms, and a range of obstacles within health services, including lack of acknowledgement of migrant communities, inflexibility and bureaucracy. The facilitators gave a sum-

mary of the social problems faced by migrants including the limitations on the rights of people without residency, mental ill-health, stigmatisation, involvement in illegal work including sex work, and poor access to education. In conclusion they reviewed some of the cultural determinants bearing on effective targeting, including language issues, lack of social visibility, disrupted family structures and networks, gender roles and religious beliefs and norms.

Participants talked about their experiences of working around this issue of the relationship between health actors and migrant communities. The negative representation of migrants and the reluctance to acknowledge diversity were identified as major stumbling blocks. The workshop then formulated the following needs:

- Additional funding for CBOs;
- Training around diversity for health actors;
- More effective networking between NGOs;
- Support for greater cooperation between NGOs and CBOs;
- More effective lobbying on behalf of CBOs.

*11.23 Workshop 9: Learning to challenge legal, political and practical issues in order to increase access to care for undocumented people and asylum seekers*

Facilitator: Peter Wiessner, Paul-Gérard Bele and Batulo Essak

Rapporteur: Marc Wluczka

Participants: Latsin Alijev, Moono Nyambe, Bartulo Essak, Asa Cronberg, Isabel Looyesen, Leyla Hussein, Michel Mbulu-Pasu and Clara Opoku

This workshop took the form of a discussion, following an exchange of experiences, around the question of how undocumented people and asylum seekers (are forced to) take responsibility for HIV/AIDS issues in the absence of any lead from within the EU. Participants discussed specific national difficulties with access to treatment and care for undocumented persons or asylum seeker. The participants also noted the particular difficulties of working in an environment where the focus on supporting migrants in accessing HIV/AIDS treatment and care adopted by NGOs is in tension with governmental discourse around controlling immigration.

Participants noted the following points of action:

- That steps should be taken to ensure that no-one is denied asylum because they require treatment and care for HIV/AIDS;
- That steps should be taken to ensure that no-one is denied access to health care because they are undocumented.

11.3 Capacity-building workshops

*11.31 Workshop 10: Epidemiological developments in HIV/*



*AIDS in migrants and ethnic minorities*

Facilitators: Ana María Caro Murillo, Carmen Martínez Fernández and Julia Del Amo

Rapporteur: Julia Del Amo

Participants: Julian Hows, Audrey Prost, Clarence Creepsburg, Joshua Walter, Jumoke Vreden, Jesús Edison Ospina Valencia, Isidro García Nieto, Ruben Keet, Gonzalo Mazuela, Omar Hallouche and Isabel Nunes

This workshop began with a recapitulation of the oral presentation on the concepts of race and ethnicity given in the first session and a repeat of the activity in which participants were asked to classify themselves. This exercise provided the stimulation for a discussion about how concepts of race and ethnicity are related to self-perception and how pejorative they can be. It was noted that participants in this session, who were generally younger than in the first, were more heterogeneous and their perceptions of self-identity more strongly linked to their current circumstances than circumstances which pertained at an earlier time in their lives. This formed the basis for a discussion about the utility of these concepts and their potential meaningfulness in public health and epidemiological monitoring of HIV/AIDS trends in different target groups. The main outcomes of this discussion were noting that it is difficult for people of mixed heritage to define their ethnic or racial background and, reiterating the outcomes of the earlier session, that socioeconomic status, gender and age are also valuable determinants in the development of HIV/AIDS intervention programmes.

No additional action points were identified. Material generated in this workshop will be used by the



facilitators as a contribution to a project report on Epidemiological Development.

*11.32 Workshop 11: Working toward an effective action plan against the expulsion of PLWHA – lobbying on a national level*

Facilitators: *Maeve Foreman, Antje Sanogo, Panagiotis Damaskos and Ghirmay Assemahegn*

Rapporteur: *Katarína Jiresová*

Participants: *Nordine Frizi, Abbas Segujja, Hassen Ben Hidi Ghobghob and Julian Hows*

This workshop began with a round of short oral presentations from participants on the situation in their country. It emerged from these presentations that the interpretation and application of the EU and UN Charters on Human Rights is inconsistent. Participants gave examples of cases where 'leave to remain' for asylum seekers was enshrined in law and other cases where the decision rested with government ministers. Each member of the group agreed to progress the discussion outside the context of the workshop by contributing a short description of the situation in their country to AIDS & Mobility for presentation at the meeting in Paris in October 2005.

Several points of attention were agreed including:

- That it would be useful to have a pan-European source of information describing the availability of treatment in 'countries of origin'. Currently, governments are thought to be acting on the basis of inaccurate and misleading information.

And, action was recommended on the following:

- That AIDS & Mobility Europe define what rights to treatment and care migrants should have as a guide to HIV/AIDS workers;
- That it would be useful if the conference could produce a Charter of Rights to which individual A&M groups could sign up.

*11.33 Workshop 12: Capacity-building for the A&M network*

Facilitators: *Georg Bröring and Kathelijne de Groot*

Rapporteur: *Noël Tshibangu*

Participants: *Fatou Coulibaly, Maria Pisani, Andreas Berglöf, Ricky Komolafe, Evita Leskovsek, Virginija Ambrazeviciene, Antonio Jester, Danica Staneková and Astrid van Leeuwen*

This workshop began with a short oral presentation on the history of the A&M network since 1992, including the impact of merger of the network with AIDS & Youth and the changes brought about by the enlargement of the EU. The relationship of the network to the EU, National Focal Points (NFPs) and NGOs was elaborated. It was explained that the network currently has about 1,300 contacts and facilitates five working groups on specific issues. The aims of the network were elucidated especially the focus on young people and migrants and the need to collate better data on the different situations and circumstances pertaining across European countries.

There was some discussion about the obstacles to achieving greater efficiency and effectiveness within the network, including difficulties with identifying human and material resources, relevant organisations and appropriate NFPs, and questions around A&M's position with its host organisation NIGZ.

Several points of attention were identified for achieving the aims of the network, including:

- The need to improve the research base;
- The need to improve organisational transparency;
- The need to help identify financial support;
- The need to continue to support the working groups;
- The need to empower others in order to improve their professionalism;
- The need for improved feedback from network members to A&M.

The following action was also recommended:

- Providing help to A&M to identify new NFPs;
- Forging closer ties with NGOs;
- Enhanced collaboration and partnership working.

## 12 Plenary session 5: Closing ceremonies

### 12.1 Video presentation: A Minute's Silence

Mr Juan Walter began the closing ceremony by presenting a short video celebrating the lives of those who have died because of AIDS. The video included a song by the group The Beautiful South:

#### *A Minute's Silence*

*With a minute's silence for the dead  
And a minute's silence for the long-lost lovers  
No one's really in the mood for beer*

*With a minute's silence for the child  
And a minute's silence for the grieving mothers  
There's not much talking going down here*

*With a minute's silence for the girl  
With a minute's silence for the younger brother  
Things have never been so clear*

*With a minute's silence for your friend  
With a minute's silence for your long-lost folk  
A minute's silence lasts a year*

*A minute's silence seems a year*

*And the park is filled with pain  
For this age has laid its claim  
And the street's about to cry  
Cos it longs for passers-by  
It longs for passers-by*

### 12.2 Short presentations and reports

#### 12.21 Mr Bernardo Sousa, representative of the Portuguese High Commission for Migration and Ethnic Minorities

Mr Bernardo Sousa, representative of the Portuguese High Commission for Migration and Ethnic Minorities, expressed his pleasure at the opportunity to address the meeting. Having briefly described the Commission's work he challenged participants to use the learning and experiences acquired during the course of the conference to enrich their work. He asked us to remember and apply all the innovative ideas which had been presented, with the purpose of working towards societies in which migrants, young people and PLWHA are fully integrated and respected.



#### 12.22 Mr Paulo Nossa, Universidade do Minho; Migrants and health: an old story with new policies

Mr Paulo Nossa, speaking on behalf of the conference preparatory committee, reminded the meeting that access to HIV/AIDS prevention, treatment and care has been a human rights issue for more than decade. He pointed out that an effective medical response to the epidemic requires proper adherence and commitment to achieving basic equalities. This should be done through the proper imposition of existing human rights legislation, coupled with challenging breaches wherever they occur. He challenged the meeting to recognise that sexual and reproductive health services are not culturally competent and that aid is too often based on charity rather than human rights. Mr Nossa added that he hoped that Portugal's good record on offering free access to treatment and care to people who are often without documentation would continue but reminded us that here, as in other countries, this depends on continued vigilance against existing and emerging structural and social barriers.

#### 12.23 Ms Jumoke Vreden, Safe Sex Comedy Show

Ms Jumoke Vreden gave a brief, constructively critical viewpoint on her perception of ways to improve the focus of future conferences. She suggested that in future greater attention needs to be paid to robust planning and ensuring that presentations and workshops are closely focused on questions as, 'What do we know; What do we need to know and What do we need to do as a consequence'. She suggested that networking and information exchange could be expedited by asking all participants to the meeting to prepare a short presentation which describes who they are, what they do and which problems they face in undertaking it. She left us with a clear instruction in the context of this conference and future meetings to think always; 'What were the questions; What were the solutions; What needs to be addressed next time?'



*12.24 Mr Simon Forrest, general rapporteur*

Mr Simon Forrest gave his brief impressions of the outcomes of the conference, acknowledging the candour which presenters and participants had brought to the discussion of potentially sensitive and difficult issues. He noted that the conference itself – bringing together religious leaders, young people, PLWHA, migrant people, CBOs, NGOs and representatives of GOs – represented an achievement of what so many people had been arguing for throughout it.

Mr Forrest identified several threads which ran through the conference. One relating to rethinking the links between the individual and the social both in terms of making effective prevention strategies and developing robust and humane public policy on access to education and particularly treatment and care. Another around forging partnerships hallmarked by mutual respect and ongoing dialogue. A third around continuing to lobby for a rights-based approach to HIV/AIDS prevention and especially access to treatment and care in order to enable partnerships to flourish. He concluded with three preliminary observations about the outcomes of the meeting:

- Broad agreement on the importance of engaging in genuine partnerships in HIV/AIDS prevention and care – whether this involves the education of religious leaders, young people as health actors and recipients of health messages, other organisations or migrant communities and groups.
- The importance of working from a rights-based approach which puts the individual in the foreground and embraces the principles of self-determination and rights to dignity and equality of treatment, be it in relation to health, welfare or any other matter.
- And, enabling individuals to take responsibility for themselves and their lives by, wherever necessary, freeing them from the constraints placed on them by social,

legal and other factors which place them in positions of vulnerability, fear and disempowerment.

*12.25 Mr Edwin Goossens Vaerewyck, interpreter*

Mr Goossens Vaerewyck, as is tradition at A&M meetings, made a contribution in which he noted that we are all someone else's 'other' because we have a different skin, hold different philosophies or adhere to a different religion but we are all human beings, worthy of respect and dignity. He asked that people leave the conference thinking about how we treat our 'others' and concluded by inviting us not to be silent in memory of those taken from us by AIDS but, since, 'silence is death and life is action', to make a noise.

*12.26 A Safe Sex Cabaret Sermon*

The formal part of the conference closed with another contribution from the Safe Sex Comedy Show. Donning choristers' outfits, they invited us all to join them in a final lively 'sermon' on safe sex. To the strains of 'Preacher man' we all waved torches in the air and proclaimed that we 'had seen the light' in relation to condom use.

*12.27 Presentations*

The meeting closed with Ms Kathelijne de Groot leading in making presentations of gifts to all the contributors to the conference – the Universidade Lusófona, the chairpersons, presenters, plenary panel members, facilitators, rapporteurs, performers, volunteers, interpreters and organisers. She brought them all in turn onto the stage to emphasise that we can only organise this kind of meetings with the help of all the people who actually work with the communities.



#### *Action points*

Each and every European Migrants Meeting is a very special and precious experience and we are convinced that AIDS & Mobility Europe should continue to carry out follow-up actions throughout Europe. Therefore, the preparatory committee adopted the idea to conclude the meeting with real actions points rather than recommendations. Below you will find an overview of the main action points that will be converted into actual activities in the coming two years:

#### *New trends & innovative actions*

- We will compare the main new trends & innovative actions that were visible at this 8th European Migrants Meeting with the trend reports that are currently being developed by the National Focal Points of A&M; summarising European trends and innovative actions at the A&M Main Conference at the end of September 2006.
- Participants expressed the urgent need for trainings on new ways of working with migrant PLWHA, young migrant people, religious leaders and religious communities and tools such as Education & Entertainment. Therefore, A&M will propose a training track throughout Europe in its application to the European Commission for the next project period.
- The plenary session and workshops on religion & HIV/AIDS led to the resolve to organise follow-up meetings concerning this issue in different EU countries. In May 2006, Belgium, Denmark and Netherlands will hold a joint meeting in Brussels. Other countries are debating similar events. The subject will also be included in the A&M application for the next project period.
- The demonstration of Education & Entertainment for especially young migrant people has been noted as very effective. For that reason we have submitted an abstract on Education & Entertainment to the World Aids Conference in Toronto together with the Health Service





Amsterdam. After consulting the National Focal Points, we may include this topic in the training track described in the application for the next A&M project period.

### *Migrant PLWHA*

- From now on A&M will take an advocacy-gearred, rights-based approach to every activity. How to actually embed this approach in the new project period is still being discussed. Up to now, there are two main suggestions: organising an expert meeting and developing more collaboration and links with networks of PLWHA. Other ideas include clarifying this approach on our website and dedicating one of our newsletters to this subject.
- Under the lead of GNP+, participants of the pre-meeting have started an online HIV/AIDS and migrancy network. A&M will be informed when important messages come out of their discussions and/or when actual meetings will be held and will make these known on the A&M website.

### *Migrant youth and adult collaboration*

- Youth participation and involvement – from beginning to end – in regard to interventions and policy matters will be integral to every activity of A&M. Also here, we are still discussing how to actually give form to this matter in a structural way.
- A&M will support capacity-building and support of new leadership by inviting young people to our meetings, starting with the policy meeting in January 2006; giving them a role in our meetings, starting with the NFP meeting in May 2006; and where needed we will send out letters of recommendation in support of their activities and jobs in the field of HIV/AIDS prevention, care and support.

- The A&M team has just hired a junior staff member of migrant origin and will employ, whenever possible, migrant staff members and migrant PLWHA of young and older generations.

### *Organisation of the next European Migrants Meeting*

- The next European Migrants Meeting will not include a special pre-meeting for migrant PLWHA. Instead we will organise workshops around issues that affect migrant PLWHA, which can be attended by all participants.
- The overall evaluation of the meeting was very positive; however, in order to improve our meetings, we need to plan fewer workshops and consequently fewer facilitators, so there is enough time for each workshop and participants can get maximum benefit from them.
- The organisers should not only rely on e-mail communication with the participants before and after the meeting, especially where it concerns the main informative documents.
- The proposal to organise the next European Migrants Meeting in one of the new EU member states in Eastern Europe will be examined and carried out if possible.

The A&M team:

*Zeina Dafesh  
Linda Eduardo  
Chris Canter  
Georg Bröring  
Astrid van Leeuwen  
Kathelijne de Groot*

## Appendix 1: Programme 8th European Migrants Meeting

<b>Thursday 29 September</b>	<b>Friday 30 September</b>	<b>Saturday 1 October</b>	<b>Sunday 2 October</b>	
10.00 – 15.00 hrs Start Pre-meeting PLWHA	9.30 – 10.30 hrs Plenary session on new trends	9.30 – 10.30 hrs Plenary session on innovative actions		
	10.30 – 11.00 hrs Break	10.30 – 11.00 hrs Break		
Continuation Pre-meeting PLWHA	11.00 – 13.00 hrs Workshops on new trends	11.00 – 13.00 hrs Workshops on innovative actions	11.00 – 12.30 hrs Closing session	
	13.00 – 14.30 hrs Lunch	13.00 – 14.30 hrs Lunch	Optional lunch	
Continuation Pre-meeting PLWHA	14.30 – 15.30 hrs Plenary session on Entertainment & Education	14.30 – 15.30 hrs Plenary session on Entertainment & Education	Departures	
15.00 – 16.30 Registration at meeting venue	15.30 – 17.30 hrs Workshops on new trends	15.30 – 17.30 hrs Workshops on innovative actions		
17.00 – 18.30 hrs Opening session				
19.00 – 20.00 hrs Welcome drink				
20.00 – 22.00 hrs Dinner	Free evening (No dinner planned)	20.00 – 24.00 hrs Dinner & social programme		

## Appendix 2: Workshop descriptions

Friday, 30 September

Overall theme: *'Working with migrant youth and/or religious leaders'*

Skills building workshops

1. *Learning to work with religious or faith-based communities - and getting new tools to involve religious leaders*

Religious leaders can sometimes be key people in helping to reach a target population in a community with a strong basis in faith. How can we involve them in our work or continue to work together respectfully?

2. *Learning to talk about sex – and dealing with diversity, gender and intercultural communication issues*

Raising awareness about HIV/AIDS risks involves more open communication about sexuality. Issues such as cultural diversity, gender and sexual diversity all have an impact on what and how we enter into discussion about this. How can we become more effective communicators in the context of this diversity?

3. *Learning to inspire youth & adult collaboration – and improving youth & adult partnership*

Youth participation is often referred to as an important component in HIV/AIDS prevention interventions. What are the pitfalls and benefits of collaboration between young people and adults? How can we establish genuine partnerships rather than ending up involving young people in a tokenistic way?

Capacity building workshops

4. *Capacity building for new leadership; how to identify possible collaboration partners?*

Many organisations strive to reach the same goal in HIV/AIDS prevention, each of them bringing their own expertise to bear. How can we identify which organisation to approach to develop a productive collaboration; how can we make more use of existing or alternative networks? How can we empower migrant youth in leadership development?

5. *The challenge of involving boys and men in HIV/AIDS prevention – Is empowering them around their responsibilities part of the solution?*

Many HIV/AIDS prevention activities target women and/or involve more women than men. How can we approach male migrant populations to stimulate their direct involvement in sexual health issues and activities?

6. *Using creative ways in prevention activities*

Possibility to show audiovisual materials of performances, Education & Entertainment, testimonies and/or other creative ways of reaching communities with prevention activities.

Saturday, 1 October

Overall theme: *'Working with migrant PLWHA and/or supporting access to care'*

Skills building workshops

7. *Learning to work with a community-based approach – and mobilising the community for prevention activities*

Communities have different traditions and systems. How can we develop activities in response to the needs of a community; working with them instead of for them?

8. *Learning to empower collaboration between PLWHA and health actors – how to break barriers in regard to myths and misunderstandings*

Stigma and discrimination against PLWHA in general and migrant PLWHA in particular still exist. How can migrant PLWHA effectively work together with health actors to minimise this?

9. *Learning to challenge legal, political and practical issues to increase access to care for undocumented people and asylum seekers*

Many undocumented migrant people and asylum seekers have trouble getting treatment and care from regular health systems. What are our experiences in this complex area; what concrete alternatives can we offer them to enable them to access treatment and care?

Capacity building workshops

10. *Epidemiological developments in HIV/AIDS in migrants and ethnic minorities*

Focus group discussions with the aim of exploring the communities' views on the following issues: How can population censuses, registries and epidemiological studies identify migrants and ethnic minorities without stigmatising the communities? How do people of different ancestries identify themselves? Which terms are to be used to identify health and social inequalities while empowering communities?

11. *Working toward an effective action plan against the expulsion of PLWHA – lobbying on a national level*

The laws relating to PLWHA (or people who are seriously ill) vary across European member states. How can we set up a pan-European lobby plan – working at a national level – that prevents migrant people being expelled and returned to their country of origin without access to care?

12. *Capacity building for the AIDS & Mobility network: How can we make A&M's communication line work; increase effective use of the NFP position & collaboration with CBO's*  
Governmental organisations (GOs) as well as non-governmental organisations (NGOs) and community based organisations (CBOs) are involved in the A&M network. The network's National Focal Point organisations (NFPs) are responsible for collaborating with and informing other organisations in their country. How can we make more effective use of the national networks in order to empower our European network?

## Appendix 3: The three daily newsletters

### Newsletter 1

#### *Welcome*

A big hello and welcome to Lisbon and the 8th AIDS & Mobility Migrants Meeting.

#### *Opening ceremony*

Our main conference meeting opened yesterday evening where you met your preparatory committee and especially our master of ceremonies, Juan Walter, and our most gracious host, Carla Martingo.

Alongside hearing from Juan and Carla we enjoyed welcomes from Kathelijne de Groot, coordinator of AIDS & Mobility Europe, Prof. Henrique de Barros, coordinator of the Health High Commission – HIV/AIDS National Coordination, Prof. Zaluar Basílio representing Universidade Lusófona, our host organisation for the meeting, and Paulo Vieira representing YouAct, European Youth Network on Sexual and Reproductive Rights.

Following these, Julia Del Amo from Universidad Miguel Hernández and Julian Hows of the Global Network of People living with HIV/AIDS gave us short presentations on the epidemiological situation relating to HIV/AIDS and migrancy in Europe and meeting the challenge of providing equal access to education, treatment and care in a political context where the ‘noose grows ever tighter’ on immigration issues.

#### *Epidemiology and the inequality of HIV/AIDS*

Julia highlighted for us the big increase in what we know about the massive impact of HIV and AIDS on migrant people within Europe and especially the fact that the rise in the number of AIDS cases among migrant peoples can be ascribed to a lack of access to treatment and care. As she said, we are in the uncomfortable position where as a consequence of the availability of HAART inequality in HIV care is becoming more visible in countries where access to treatment and care is free because of the weak social, political and legal position of migrants. For Julia a clear agenda exists around grounding our response to the epidemic in continuing with our open approach to epidemiology which elucidates this reality. We need, she said, to improve our understanding about the relationship between ethnicity and migrancy; to empower communities to interpret and use these data, and hence influence the direction of funding; and to work with the media to avoid stigmatisation.

The contribution of people living with HIV and AIDS Julian gave us an impassioned call to arms from the perspective of people infected and affected by HIV/AIDS. Speaking on behalf of the pre-meeting held on Thursday for people living with HIV/AIDS, he stressed the importance of enabling positive people to achieve greater visibility, allowing them thereby to accept their responsibilities as citizens and human beings, and above all, that

we collectively work to create partnerships in which we advocated for a rights-based approach to responses to HIV/AIDS which would help to create a safe space for positive people to come forward in.

Julian’s presentation was followed by the first of several particularly emotional and impressive moments when several participants chose to identify themselves as HIV+, to give voice and body to this ambition of becoming visible and working together.

#### *Young people – a video presentation*

For many participants, as I talked to them after the opening ceremony, the biggest highlight of all was the video presentation showing young people from across Europe sharing their views on religion, migrancy, sexuality, gender, safer sex and HIV/AIDS issues. Here there was no doubt what the conference meets for, our purpose and the challenge we face. To find ways of supporting, as one delegate put it, young people to put all the positive intentions, attitudes and hopes into reality in their experiences of their sexual careers.

#### *Friday morning – Youth and religious leaders*

After a great night, with a reception at the magical City Museum and a wonderful dinner, the meeting set to work this morning on the topic of young people and religious leaders. We were treated, under the chairmanship of Paulo Vieira, to presentations from Abbas Segujja, an imam, Jozsef Bonifaz Solymosy from Hungary talking about reaching Roma populations with HIV/AIDS education, treatment and care, Ravi Chandran, a Christian minister from Denmark, Isidro García, a young professional working with male sex workers in Spain, and Katarína Jiresová telling us about her work with the Roma population in Slovakia.

There were some striking and positive themes from across these presentations about the importance of taking culture and religion into account in our practice in HIV/AIDS prevention. For example, both Isidro and Katarína told us about how particular cultural and religious beliefs can affect how the people they work with see themselves, HIV/AIDS and, most importantly, what kinds of risk they are at.

#### *Religious leaders can make a contribution*

But the highlight was hearing our two representatives from religious groups, both of whom were saying something which fitted so well with the message from the opening ceremony. Both Abbas Segujja and Ravi Chandran reminded us that, for them, their religion is trying to catch up, to find a way to engage with HIV/AIDS and to take positive steps to prevent new infections and support those infected and affected. Abbas put it so neatly when he said that what is required from religious leaders is to rediscover their basic principles and relate these to the demands placed on them deal with issues like sex, sexuality and contraception. He and Ravi reminded

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us that although all religions have troubles with these issues, they prize above all the sanctity of human life, human dignity, and their role in supporting and informing and thereby protecting young people.

An agenda has been set for the partnership we demanded from the start of the meeting.

### *Administration*

Just to remind you that tonight is a free evening. Work hard, then go and enjoy Lisbon!

### **Newsletter 2**

#### *A little poem*

*HIV is very dangerous,  
Lots of people are dying  
Mostly young people  
Innocent children and dying  
Everyday in Africa  
Age between 25-40 years*

*And those people in Africa  
Who are dying,  
Have no one to help them  
There is no treatment!!*

*Here in Europe  
They get treatment  
So they can live long*

*HIV is bad  
It makes us sad  
People are dying  
And children are hurt*

*Uma, Lamair and Nimao  
15 years old from Somalia*

#### *Welcome*

Welcome to the second edition of our conference newsletter. Apologies that we have not been able to make this available to you in languages other than English but resources do not permit us to cover all the languages represented here – which are many given that participants come from over fifty different countries. By now, we have all had an opportunity to enjoy of some of the charms of Lisbon, to get to know each other a little better and really get into our meeting. Some of you may not be aware what a different kind of meeting it is from any previous AIDS & Mobility meeting especially in terms of the extent to which it represents the people whose interests we are discussing – young people, people from migrant communities and migrants themselves and PLWHA.

#### *Young people doing it for themselves*

The high point for many people was the presentation yesterday afternoon of the Safe Sex Comedy Show from Amsterdam. This was a really exciting and fresh injection of youth into many people's thinking about how to engage and reach young people with HIV/AIDS prevention.

As they said, we really began, in a most concrete way, to 'talk about sex baby...'. Through the medium of theatre we heard from young women and young men about some of the realities of their lives – the nervousness and anxiety with which people approach their first sexual intercourse and especially the pressure boys feel under because of the assumption that, '...you gonna know what to do to'. We heard too about the career of 'Mr Herpes' and his family of sexually transmitted diseases, the desperation and isolation felt by young women abandoned in pregnancy by young men who '...came and saw and... disappeared' leaving them to become women who are still only '...a child carrying and growing a child inside'. There was a powerful call to challenge this sexism and that of the whole health system in the chant for '...heroes'. We followed a young man through his experiences of visiting a STI clinic and another who was 'Janet trapped inside the body of John' and another macho man ending with a challenge to deal with homophobia and sexism, and all other assumptions we make about other people's sex and sexuality, to 'mind our own'.

I felt, like many others, deeply touched by the moments of recognition offered by this performance, by its sometimes brutal honesty. We were reminded that to speak directly to young people we should sometimes simply support them to do it for themselves.

#### *Workshops*

The first series of workshop meetings were the other main event of the day. Many people really enjoyed the opportunity to get into a smaller group environment, share their views, experiences and responses to the earlier part of the meeting. Of course, there was a feeling that the sessions were too short and there was, as always, more to say and do than could be fitted in. So much so that some people even came back to them in the time set aside for lunch. This is the place for a big thank you to our rapporteurs for all their help in recording these sessions and making it possible to identify some important highlights from across the sessions including:

- Broad agreement on the importance of engaging in genuine partnerships in HIV/AIDS prevention and care – whether in the education of religious leaders, young people as health actors and recipients of health messages, other organisations or migrant communities and groups.
- The importance of working from a rights-based approach which foregrounds the individual and the principles of self-determination and rights to dignity

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and equality of treatment be it in relation to health, welfare or any other matter.

- And, working towards the goal of enabling individuals to take responsibility for themselves and their lives by, wherever necessary, freeing them from the constraints placed on them by social, legal and other factors which place them in positions of vulnerability, fear and disempowerment.

### *PLWHA, access to treatment and care*

This morning all this was followed by an emotional and intense plenary session, chaired by Ms Moono Nyambe in which Isabel Nunes from Portugal, Gonzalo Mazuela and Julian Hows each gave us presentations on, respectively, HIV/AIDS in Portugal with special attention to the situation of women, innovative action in the field of HIV/AIDS prevention and access to treatment and care of PLWHA.

Isabel presented us with data on the state of the HIV/AIDS epidemic in Portugal and illustrated the particular vulnerability of women in general and migrant women in particular because of their social and relational conditions. She argued for action on the collective and individual level to address this, including the development of culturally sensitive public policy against stigma and in relation to prevention for specific groups, the mobilisation of communities and training of health workers coupled to targeted public awareness campaigns.

Gonzalo gave us lots of food for thought around defining and addressing risk, using the specific context of working with gay men and men who have sex with men as a vehicle for raising wider points of attention. He asked us to think about what risk is and how it is most often negatively construed in health campaigns and to adopt a broader, more individual approach which sees risk in terms of the specific needs, experiences and behaviours of the individual as a part of a wider social context.

Julian rallied the meeting with a passionate call for activism around the data on access to treatment and care in Europe provided by UNAIDS and WHO. Repeatedly he was applauded for reminding us of our duty to challenge claims that ARVs and care are available equally, and the shame we should feel that this is the situation in rich nations with twenty years experience of HIV/AIDS.

The presentations were followed by contributions from panel members Leyla Hussein and Sanvi-Noel Ahebla who outlined their work with migrant and ethnic communities in London and Paris respectively. We closed, after some discussion and questions from the floor, with the chilling and powerful reminder from Noel that the process of expelling PLWHA from European countries is a crime against other human beings.

### *Information market*

We also draw your attention to the information market in the room beside the workshop rooms and invite you to make sure that you make use of this facility.

### *And coming up...*

Enjoy your lunch and be prepared for more education and entertainment to come this afternoon when we are joined by a young group of actors from Portugal showcasing their work on HIV/AIDS.

## Newsletter 3

### *Welcome*

Welcome to this the third and final edition of our conference newsletter. We send it to you hoping that it conjures up a warm memory of Lisbon for you and, especially for those participants who were unable stay with us until the end, brings you up to date on events of the Saturday afternoon and the last day of the conference, Sunday 2nd October.

### *'Neither too easy... nor too complicated'*

We were treated to another theatrical performance on Saturday afternoon, this time from a group of Portuguese young people, who showed us three scenes from a play adapted from the French original created by the Parisian company "Entrées de Jeu" in collaboration with CRIPS Ile-de-France (Regional Centre of AIDS Prevention). First we saw a young heterosexual couple struggling against their mutual embarrassment to form a relationship, then, five months after they started going out together, dealing with negotiating their first sexual intercourse. In the third scene we met a couple on holiday facing the tricky task of talking about the risk of STIs they faced because one of them has been unfaithful. The plays were beautifully acted, gentle and engaging but what really made them effective was the workshop that the actors engaged participants in afterwards. Volunteers were brought onto the stage to act out their suggestions for how things might have gone differently. This provided us with considerable entertainment, but, more to the point, demonstrated how effective drama can be as a means of involving people in thinking out and practicing relationships skills for themselves.

### *'Party on'*

Saturday closed with the most wonderful social event organised by our Portuguese hosts who selected a charming venue above a fruit market on the harbour side where we enjoyed a fantastic buffet dinner and dancing into the small hours. It provided a great opportunity for people to socialise and, above all, to dance. There were too many electric performances on the dance floor to record, but a special mention has to go to some of the older partici-

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pants who showed their younger colleagues a few nifty and silky moves as they strutted their stuff to the lively Latin and African beats.

### *Closing the conference*

Sunday was taken up with the closing session of the conference. In an emotional closing session we heard from our most honoured guest, Mr Bernardo Sousa, representative of the Portuguese High Commission for Migration and Ethnic Minorities in Portugal, from Paulo Nossa of the conference preparatory committee, Jumoke Vreden from the Safe Sex Comedy Show, Simon Forrest, general rapporteur for the meeting, Edwin Goossens Vaerewyck summing up on behalf of the interpreters working on the conference and a rousing 'sermon' from the Safe Sex Comedy Show before closing with a distribution of gifts for all the contributors as chairpersons, presenters, plenary panel members, facilitators, rapporteurs, interpreters and organisers.

### *'A minute's silence'*

Emotions were already running high after long, hot and emotionally draining work over the previous two days and we were all touched still further by the opening of this last session of the conference with a short video presentation, to the strains of 'A minute's silence' by the Beautiful South honouring the memory of all those people lost to HIV/AIDS. A salutary reminder of the cost the epidemic counted in human lives and the purpose around which the conference convened.

### *Presentations*

Mr Bernardo Sousa took the podium to challenge us to use the learning and experiences acquired in our conference to enrich our work. He pleaded with us to hold on to all the innovative ideas we have been exposed to and to apply them in HIV/AIDS prevention and working towards societies in which migrant, young people and positive people are fully integrated and respected.

Next, Paulo Nossa reminded us that access to HIV/AIDS prevention, treatment and care has been a human rights issue for more than a decade. More than a medical problem, mounting an effective response to the epidemic remains a question of proper adherence and commitment to achieving basic equalities by imposing existing human rights legislation and agreements properly and challenging breaches wherever they occur. He challenged us to recognise that sexual and reproductive health services are not culturally competent and that aid is too often based on charity rather than human rights. He hoped that Portugal's good record on offering free access to treatment and care to people who are often without documentation continues but reminded us that here, as in other countries, this depends on continued vigilance against existing and emerging structural and social barriers.

One of the youngsters at the conference, Jumoke Vreden, spoke briefly giving us a constructively critical viewpoint on improving the focus of future conferences. She suggested that we ensure robust planning and ensure that presentations and workshops are closely focused on questions of, 'what we know; what we need to know and what we need to do as a consequence'. She suggested that networking and information exchange could be expedited by asking all participants to the meeting to compose a presentation comprising three slides which described who they are, their work and the problems that they face in undertaking it. She left us with a clear instruction to ask ourselves in the context of this conference and future meetings to think always; 'What were the questions, what were the solutions, what has to be addressed next time?' After a few words from Simon Forrest on his impressions of the conference, Edwin Goossens Vaerewyck addressed the session. He noted that we are all someone else's 'other' because we have a different skin, hold different philosophies or adhere to a different religion, but we are all human beings, worthy of respect and dignity. He asked that people leave the conference thinking about how we treat our 'others' and concluded by inviting us not to be silent in memory of those taken from us by AIDS but, since 'silence is death and life is action', to make a noise.

### *A 'sermon'*

The formal part of the conference closed with another contribution from the Safe Sex Comedy Show. Donning choristers' outfits they invited us all to join them in a final lively 'sermon' on safe sex. To the strains of 'Preacher man' we all waved torches in the air and proclaimed that we 'had seen the light' in relation to condom use.

### *Gifts*

The meeting closed with Kathelijne de Groot making presentations of gifts to all the contributors to the conference – the chairpersons, presenters, plenary panel members, facilitators, rapporteurs, performers, volunteers, interpreters and organisers; bringing them all on to the stage, to emphasise that we can only organise these kind of meetings with the help of all the people that actually work with the communities.

### *What happens next?*

Now the conference is over the work goes on. For our part that means preparing the report on the meeting and working with the network to support the implementation of ideas and plans arising from and stimulated by the conference. Please if you have any presentations or notes that you think would help us to do this, send them to us at the AIDS & Mobility staff!

## Appendix 3: The three daily newsletters

### *A final word*

The final word must be a huge thank you to all the participants in the meeting – you! And, for me personally, the feeling that here, in Lisbon we all contributed to creating a meeting which embodied so much of what we collectively argued for in HIV/AIDS work – bringing together religious leaders, young people, positive people and practitioners – as they say, we certainly ‘walked the talk’.

Lyrics from *A minute’s silence* by the Beautiful South

*With a minute’s silence for the dead  
And a minute’s silence for the long-lost lovers  
No one’s really in the mood for beer*

*With a minute’s silence for the child  
And a minute’s silence for the grieving mothers  
There’s not much talking going down here*

*With a minute’s silence for the girl  
With a minute’s silence for the younger brother  
Things have never been so clear*

*With a minute’s silence for your friend  
With a minute’s silence for your long-lost folk  
A minute’s silence lasts a year*

*A minute’s silence seems a year*

*And the park is filled with pain  
For this age has laid its claim  
And the street’s about to cry  
Cos it longs for passers-by  
It longs for passers-by*



## Appendix 4: Extracts from the video presentation

### Youth

“Everybody is free to choose their religion and to decide who they want to be in life.”

“We women should make an effort, and if we are given the chance to study, we can gain the freedom which will enable us to educate our children.”

“People should practise safer sex more, because people are ignorant I think. They just look at people and say oh, I think he or she has AIDS or not. And you cannot tell whether people have AIDS by looking at them.”

### Religious leaders

“We need, as human beings, the cooperation of everybody and that includes religious leaders.”

“This disease doesn’t differentiate; it has gone to all societies, all communities and all faiths.”

“Health workers and religious leaders should meet together and not focus on the differences, because these will always exist, but at least concentrate on the similarities.”

“Health workers as well as religious leaders are working towards the same goal, only approaching it from different angles.”

### Migrant people living with HIV/AIDS

“This disease, sometimes people are face to face with death, but I do not have that. For me the most difficult thing is the suffering caused by isolation. That’s what hurts.”

“I ask again for research and funding so we will be able to work more effective and to give hope to people who are ill.”

“All people who are ill have the right to medication and care.”

### Access to care and treatment

“It has to change, we must have access to all medicines and to funding. Because without this, we can continue to sensitise people until...”

“People can have complete access to knowledge, but what they lack is medication and materials.”

“I would like to see a balance between Africa, Europe and the USA concerning the care for people who are ill. That all people will be given the same level of care.”

### Message to the conference

“Share what we know and educate other people.”

“I hope that we will one day succeed...”

“Come together, contribute and make this world a better place.”

## Appendix 5: The Safe Sex Comedy Show

### Young people in control; doing IT safe

In 2002, young people from the so-called Urban scene (trendsetters in R&B and hip-hop music & lifestyle) in the Netherlands knocked on the door of the Health Service Amsterdam to set up a safe sex project in the capital. This initiative was taken because of high figures of teenage pregnancy, sexually transmitted infections (STIs) and HIV/AIDS among the multicultural young population in the Netherlands.

### Reaching young people

These young people, involved in the well-known stand-up comedy group The Comedy Lounge, wanted to use comedy as a vehicle to get the message across. Knowing how difficult it is to reach young people, the Health Service Amsterdam gladly accepted their offer. The project Young people in control; doing IT safe was born in 2002 and in 2003 the NIGZ became part of the project. Together, we set out some activities in the city of Amsterdam for which the young people themselves designed gadgets and flyers. In the meantime, we started training sessions for the development of Safe Sex Comedy Shows. A professional stage director has become part of the team, guiding the technical theatre details.

The project is based on two principles: in the first place it is a project 'by young people for young people'. Professionals are simply involved to help young people carry out their plans. Secondly, it is a project based on the community approach. To broaden knowledge and stimulate peer education within the Urban scene, we also started to train a group of thirty young people (aged 18-24) in basic information on birth control, STIs and HIV/AIDS. The project was first supported financially by the Dutch AIDS Fund, but was supported mainly by voluntary investments from the organisations of the professionals and young people involved.

### The Safe Sex Comedy Show

So far, the comedy group has performed three Safe Sex Comedy Shows, three evening filling events with good attendance and response. The acts include an opening song, comedy, spoken words, rap, dance and a short video. The young comedians, poets and rappers write their own pieces based on their own sexual experiences, using their talents and slang (sub-group language) to reach their peers. This way, the young audience will more easily recognise themselves in the performances and will be challenged to talk about sexuality in general.

Results of questionnaires and interviews among the young audience tell us that the Safe Sex Comedy Shows are considered realistic. The show is suitable for a larger group than young people from the Urban scene and is experienced as entertaining and educational. The comedians' level of knowledge and the amount of possible solutions they suggest to their audience are sufficient, and the programme is flexible for various audiences. The next step is to develop a show for teenagers in schools, for which we launched a try-out in a school in Den Haag, the Netherlands. Here, the response was very affirmative as well.

### Outcomes

At the moment, we are analysing the project in depth, together with the University of Leiden, the Netherlands. However, we can already say that through the above-mentioned interventions we get young people's attention: not only with a safe sex message, but also with some insight into their own behaviour and prejudices. From our experiences up till now we see that this helps to increase knowledge and reduce fear about STIs, and that it leads to healthy choices and attitudes within their relationships. For now, we are impressed with the refreshing enthusiasm of the young participants and their continued efforts to do this work on a voluntary basis.

And finally, we can say that we are learning from them with regard to one key question: ***How do you reach young people and their communities?***

### Theatrical debate in Portugal

One of the greatest ambitions of the HIV/AIDS National Coordination in Portugal is to permanently seek new methodologies of prevention, in order to maintain the proximity with the general population and ensure the effectiveness of prevention activities. The theatrical debate show has been a privileged means to raise in youth the will to expose the difficulties in communication that normally appear in the most problematic situations of life, especially the ones regarding sexuality. During the 8th European Migrants Meeting the theatre group Pea de Teatro from Lisbon provided a platform for demonstration of this 'theatre debate'. It has become clear that this form of Education & Entertainment has an immediate effect on young and older generations in relation to sexuality and HIV/AIDS related issues.

### The strategy

Our strategy is based on the play *Neither too easy... nor too complicated!*, a version of the play *Pas si simple...mais pas si compliqué non plus!*, created by the Paris theatre company "Entrées de Jeu" in collaboration with CRIPS Ile-de-France (Regional Centre of Aids Prevention). The theatrical debate show starts with the play, which is composed of seven short stories related to sexuality, portraying common situations in teenagers' daily lives. After the presentation, which normally lasts thirty minutes, the audience is invited to choose three scenes which are then performed again. At this stage, members in the audience can interrupt the performance, suggesting their own ideas to deal with the problematic situations generated in each scene. This second part has a limited time, which can never exceed ninety minutes.

### Requirements

The theatrical debate needs a pair of young actors accompanied by a moderator. In the Portuguese case, this is a health or education technician who presents the show and moderates the debate. These sessions are meant to be played in front of young people over fifteen. Ideally, there is an audience of between sixty and a hundred people. Theatrical debate is one original form of prevention. It doesn't have the pretension of teaching scientific lessons or preaching morality. Its objective is to provoke people and make them talk about the daily life of adolescents. Apparently the show always produces effects. The audience is amused, has fun and intervenes. But keep in mind... the theatrical debate isn't just an entertainment activity. These sessions can only achieve their objectives when integrated into a broader planning of prevention and education that promotes health... and promoting health is, in the end, nothing more than promoting life.

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 Denmark  
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 Germany  
 Ghana  
 Greece  
 Guinea-Bissau  
 Hungary  
 Indonesia  
 Ireland  
 Ivory Coast  
 Latvia  
 Lithuania  
 Malta  
 Mexico  
 Morocco  
 Netherlands  
 Nigeria  
 Philippines  
 Poland  
 Portugal  
 Russia  
 Rwanda  
 Senegal  
 Sierra Leone  
 Singapore  
 Slovakia  
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 Somalia  
 South Africa  
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## Appendix 10: Evaluation

### Evaluation form 1

(Thursday, 29 September and Friday, 30 September)

#### 1. Name and country (if you wish you may fill in the questionnaire anonymously)

With name	17
Anonymous	13
Total	21

#### Opening session

#### 2. Was the opening session on Thursday, 29 September, 2005, satisfying to you?

	Yes	Partly	No
	16	3	

#### 3. Which presentations were the most interesting to you?

Portuguese representative(s)	4
Paulo Vieira – European Youth Network	9
Video-DVD 8th European Migrants Meeting	9
Julia Del Amo (Epidemiological developments)	16
Julian Hows: Report of the pre-meeting	12

#### Plenary session Friday morning

#### 4. What is your opinion about the plenary session on Friday morning, 30 September, 2005?

	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
	12	7	1	

#### 5. What part was the most interesting for you?

Presentation 1: Abbas Segujja	13
Presentation 2: Jozsef Bonifaz Solymosy	6
The forum discussion	11

#### Workshops Friday morning

#### 6. What is your general opinion about the workshop in which you participated?

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
1	1	3	1	
2	1	4		
3		2		
4		1		
5	1	1	1	
6		1		
7				
8		1		

#### 7. Did the workshop meet your expectations?

Workshop	Yes	Partly	No
1	1	4	
2	1	4	
3		3	
4		1	
5	1	2	
6		1	
7			
8	1		

#### 8. How did you find the work of the facilitators?

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
1	2	3		
2	3	2		
3	1	3		
4	1			
5		3		
6		1		
7				
8		1		

#### 9. How did you find the collaboration with the other participants?

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
1	3	2		
2	1	3		
3		3		
4	1			
5		3		
6		1		
7				
8		1		



## Appendix 10: Evaluation

Other remarks:

- Spend more time on reflection.
- It did work out very well. We had a lot of interesting discussions and we still keep in touch. It was very interesting to see different reflections from other countries, and how much we are behind in our country, we have much to learn.
- As always: not enough time!
- The workshops were interesting but they were very badly organised, the beginning of all the workshops is at the same time and you had to choose between the subjects and others were cut to be present in the music session which is bad and let fall down the organisation.
- The time given to this workshop (1) was not enough. The subject itself was very interesting.
- Not enough time to exchange experiences. (1)

Plenary session Friday afternoon

**10. What is your opinion about the plenary performances on Friday afternoon, 30 September, 2005?**

Very satisfying	Satisfying	Not satisfying	Not satisfying at all
10	10		

**11. What part was the most interesting for you?**

Comedy performances	11
The discussion	8

Other remarks:

- Overall, an excellent conference, very well organised. The best of these meetings is a chance to meet with others involved in similar work; the most frustrating is the lack of time for talking about very complex issues! Thanks.
- I hope to hear from you, a big kiss.

### Evaluation form 2

(Saturday, 1 October and Sunday, 2 October)

**12. Name and country (if you wish you may fill in the questionnaire anonymously)**

With name			16
Anonymous			9
Total			25

Plenary sessions Saturday morning

**13. What is your opinion about the plenary session on Saturday morning, 1 October, 2005?**

Very satisfying	Satisfying	Not satisfying	Not satisfying at all
8	13	3	

**14. What part was the most interesting to you?**

Presentation 1: Isabel Nunes	14
Presentation 2: Gonzalo Mazuela	6
The forum discussion	11

**15. What is your opinion about the plenary performances on Saturday afternoon, 1 October, 2005?**

Very satisfying	Satisfying	Not satisfying	Not satisfying at all
11	8	1	

**16. What part was the most interesting for you?**

The theatre performance	15
The discussion	11

Workshop Saturday morning

**17. What is your general opinion about the workshop in which you participated?**

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
1	1	1	1	
2	2		1	
3				
4		1		
5		2		
6			1	
7	1	1		
8		2		
9	1			
10	2	2		
11				
12	1			

**18. Did the workshop meet your expectations?**

Workshop	Yes	Partly	No
1	1	1	
2	2	1	
3			
4	1		
5		2	
6			1
7	2		
8	1	1	
9	1		
10	3	1	
11			
12	1		

## Appendix 10: Evaluation

### 19. How did you find the work of the facilitators?

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
3				
2	3		1	
3				
4	1			
5	1	1		
6		1		
7	1	1		
8		1	1	
9	1			
10	1	2		
11				
12	1			

### 20. How did you find the collaboration with the other participants?

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
1				
2	2		1	
3				
4		1		
5		2		
6		1		
7	1	1		
8		1		
9	1			
10		1		
11				
12	1			

#### Other remarks:

- We needed more time.
- Interpretations were somehow inadequate, but anyhow people understand for the reason of long experience of working with HIV.
- time too short
- more focus (6)
- very good, very interesting (5)
- Discussion was interesting, but not directly about the issue. So, very developing. (10)

### Workshop Saturday afternoon

### 21. What is your general opinion about the workshop in which you participated?

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
1		1		
2				
3				
4				
5				
6				
7		3	1	1
8		1		
9	2	1		
10	3			
11				
12		1		

### 22. Did the workshop meet your expectations?

Workshop	Yes	Partly	No
1		1	
2			
3			
4			
5			
6			
7	2	2	1
8	2		
9	3	1	
10	3		
11			
12	1		

### 23. How did you find the work of the facilitators?

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
1		1		
2				
3				
4				
5				
6				
7		3	1	1
8	1	1		
9	2		1	
10	2			
11				
12		1		

## Appendix 10: Evaluation

### 24. How did you find the collaboration with the other participants?

Workshop	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
1	1			
2				
3				
4				
5				
6				
7	1	3	1	
8	2			
9	1			
10	1	1		
11				
12		1		

#### Other remarks:

- A co-facilitator was not in a stable condition to lead the workshop because of too many personal feelings. There were also some interruptions (between a reporter and co-facilitator) that made the situation stressful. However it was overall a good workshop due to the collaboration of the participants. The topic was very interesting and important.
- All countries involved in A&M Europe should get exactly the same measurement of support so that AIDS & Mobility will live longer. For instance, we have and get everything we need in Sweden. Swedish government takes problems in society in all categories into serious consideration.
- I chose to continue in the same working group for the benefit of my attendance. I was very satisfied. I received invitations to come to Belgium to explain my work.
- One facilitator and one participant took up all the time. (working group 7)
- It was impossible to arrive at conclusions, it's a very specific theme with specific parameters. (working group 10)

#### Closing session

### 25. Was the closing session on Sunday, October 2, 2005 useful to you?

	Yes	Partly	No
	18	3	

### 26. Which presentations were the most interesting for you?

Prof. Bernardo Sousa, representative of the Portuguese High Commission for Migration and Ethnic Minorities	9
Mr. Simon Forrest, general rapporteur	13
Mr. Paulo Nossa, Universidade do Minho	6
Closing words of Mr. Edwin Goossens Vaerewyck	12

#### General impression

### 27. What is your overall impression of the 8th European Migrants Meeting?

	Very satisfying	Satisfying	Not satisfying	Not satisfying at all
	10	12		

### 28. Did the meeting fulfil your expectations?

	Yes	Partly	No
	14	7	2

#### Main benefits

### 29. What are the main benefits you derived from the 8th European Migrants Meeting?

	Yes	Partly	No
New information	14	7	3
New ideas	12	10	1
New suggestions for interventions	17	6	1
Exchange of experience	19	4	
Meeting colleagues from other countries	21	1	1

#### Other remarks:

- The next meeting should be held in Denmark!
- I will definitely love to have it organised in Sweden, because of the fact that society's problems are very vital and the Swedish government cares much about it.
- Insufficiencies in the communication with illiterate people
- National network
- Not satisfied with organisation of working day – workshops after entertainment
- Plays were full of useful ideas. I also liked it that the meeting was focused on young people.

**30. Do you intend to organise/implement a follow-up of the Migrants Meeting in your country/organisation?**

- Yes! Networking helps and works with all people in need, regardless of their sexual orientation, sex, religious beliefs, political affiliations, nationality, race, citizenship and ethnicity. Networking follows the principles of creating partnerships with state organisations on all levels. Internal follow-up in our organisation. An interview with one of the participants and a report from the meeting. We are planning to have a workshop and a working group. Theatre performance for young people
- Working with religious communities (African pastors); sensitising them to AIDS so they can change languages like ABBA. I started my own work in October; it isn't easy to discuss sexual issues with pastors.
- Yes, I will ask French partner org. for Femidoms which are not possible to buy in the Czech Republic (and Sweden are asking for it), hopefully we will cooperate with Portuguese org. because we need materials in Portuguese (new sex workers from Brazil in the Czech Republic) and I can use Swedish experience and advice concerning making a national network (of organisation). Both performances were quite impressive, we should think about something similar, my organisation already does theatre performances with sex workers, but not so instructive!
- Not for the time being.
- Start up a project.
- Yes, with the African associations in France, Switzerland, Belgium.

Logistics

**31. What is your opinion about the logistics of the meeting?**

	Very good	Good	Fair	Bad
Rooms/accommodation	19	1	1	
Meals	19	4		
Conference rooms	15	6	1	1
Documents about the meeting prima	9	9	3	1
Daily newsletter	10	11	2	
Support from AIDS & Mobility before the Meeting	16	5	1	
Support from the organisers during the Meeting	15	7		
Interpretation services	16	4	1	
Social event on Saturday evening	18	2		

Other remarks:

- It was the most interesting meeting ever! I am very happy to be a part of it. It has given me a lot of inspiration and motivation to continue my work. Thank you A&M for your excellent work!
- BRAVO, on a logistic level everything was perfect.
- I love you.







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