

# FINAL REPORT

## Results of a Structured Dialogue among NGOs On a new pan European hiv/aids partnership

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**On behalf of: Stichting Aids Fonds**

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## Foreword

In November 2002, I was requested to develop a proposal for a European-wide inventory to investigate the needs, opportunities and support for a new European partnership on AIDS. This process of preparation required support, involvement and commitment for this initiative from as many organisations as possible.

The request is based on earlier discussions during the World Aids Conference in Barcelona 2003 and was taken forward by four leading AIDS organisations in Europe: National AIDS Trust (United Kingdom), AIDES (France), Deutsche AIDS Stiftung (Germany) and the Aids Fonds (the Netherlands).

A steering committee has been formed to monitor the project. The following organisations were part of this committee:

- Abraco, Portugal
- Aides, France
- Aids Fonds/StopAidsNow, the Netherlands
- Aids Foundation East West (AFEW), Russia
- Aras, Romania
- Deutsche Aids Stiftung, Germany
- National Aids Trust, United Kingdom
- Sensoa, Belgium.

End of January 2003, about 100 aids organisations (majority ngos) all over Europe have been approached to participate in a structured dialogue about a new pan European hiv/aids partnership. The preliminary results of this dialogue have been presented and discussed in a meeting of the above organisations. In May a few key players have been interviewed about these results. This report describes the approach, methods and results of the written inventory as well as the results of the interviews.

I would like to thank everybody who was involved in this process: the respondents of the different organisations in Europe as well as the members of the steering committee. It was an inspiring and challenging process, with great commitment of a large number of organisations. I am convinced that the input of these organisations will be extremely useful in the further development of a new, innovative and strong pan European hiv/aids partnership!

**Rinske van Duifhuizen**

Temporary co-ordinator, June 2003

# 1. Introduction

## *Background*

In the past few years the need for European collaboration and a new structure to arrange this has been discussed during various events by a number of organisations. Eurocaso was not always perceived as the most effective network to take the lead and CHANGE was also abolished after only a few years of existence. Lack of structural funding and resources were eminent in this as well.

Learning from these experiences it is felt it is time for a new European structure to collaborate more effectively and keep AIDS a priority on the European agenda. There currently is a lack of a clear and effective voice on the impact of HIV on member and other European states.

## *Method: fact finding through a structured dialogue*

A proposal was developed to consult various players in HIV/AIDS policy and practice in Europe in order to assess the needs, opportunities and support for a new European partnership.

The following methods have been implemented:

- a written call to a large number of NGOs (about 100);
- telephone interviews with a selected number of current European initiatives and other key players (e.g. relevant officials within the European Commission, representatives of key NGOs in Europe);
- meeting with a selection of representatives from NGOs and policy makers to identify targets for policy influencing within relevant institutions.

The written call for input consisted of a pre-structured questionnaire, which covered the following areas:

- background of the organisation
- existing European/international contacts, activities, projects, networks
- needs for a new European partnership
- feedback on priority areas and type of activities of a new partnership
- support for this new partnership
- membership, governance and structure of a new partnership.

The telephone interviews covered similar areas, with use of the results of the written consultation.

## *Contents issues*

In the preliminary discussions the following areas of priorities for European collaboration were identified. The newly to create structure should cover the current vacuum in advocacy, policy development as well as programmatic practice, on the pan-European as well as the international level.

1. *At the European level: the need for a strong voice on the impact of HIV in Europe and further improvement of the quality of the strategies and policies used.* Many countries in Europe face similar developments (e.g. increase of STD's, growing number of immigrants affected by AIDS, low interest in AIDS at the decision-making level, right wing political developments etc.) that have a strong impact on the further development of the epidemic in Europe and beyond. Based on these common denominators collaboration could result in a stronger position in advocacy and lobbying at the European and international level.
2. *North-South collaboration: need for coordination.* Many European AIDS organisations are also supporting (the same) developing countries, e.g. by providing technical assistance, organising exchange programmes etc. This could be more effectively arranged and closer co-operation would prevent overlap and duplication of efforts.

3. *Eastern Europe and former Soviet Union: need for support.* The AIDS epidemic in this part of Europe is quite recent and has a different character, NGO structures are lacking. The region could benefit largely from concrete support from other European countries (experiences, projects and campaigns).

## 2. Written consultation

The first part of this preparatory process was the implementation of a structured dialogue through mailing a survey to NGOs all over Europe.

### 2.1 Response

The target was to get input from at least 30 organisations, representing ten to fifteen countries from different parts of Europe. About 100 organisations were approached by the end of January. Responses were collected from February until early April and in total 34 replies have been received.

Organisations from 20 different countries have given input in this early stage in the process.

There was a good balance between regions (Northern/Western, Southern and Central/Eastern Europe) as well as among organisations from EU member states (twelve countries) versus non-EU member states (eight countries). The complete list of respondents can be found in appendix A.

The full details and results of the written consultation are summarised in tables in appendix B.

Most organisations that replied are national NGOs (29 out of 34), four are governmental services. Three of these included European projects. Most organisations cover a wide range of activities, from focussed prevention interventions to advocacy on human rights issues. Five organisations are representing people with HIV/AIDS (pwha).

In terms of funding most organisations receive money from different sources, mostly from national governments and private donors. Some organisations in CCEE hardly receive funding.

*The following remarks of organisations that responded, clearly shows their enthusiasm about the approach:*

- *good luck with this important initiative*
- *big thanks for the initiative & the inquiring*
- *very good and strong idea, especially for new EU members and CCEE*
- *thanks for involving us*
- *congratulations with this initiative, if well planned and open to broad participation it could definitely work*
- *thanks to all those who dedicated considerable time to develop this initiative*
- *it is very important to have such a network*
- *our funding is not secured, however we are very interested in participation and some of the initiators are part of our network*
- *congratulations with this new important and expected initiative*

### 2.2 Current European/international collaboration

Organisations were asked whether or not they had any collaboration with other hiv/aids organisations in Europe. Not surprisingly, 32 out of 34 had some kind of collaboration with a European partner organisation. However, This was not always very active, or on a concrete level.

Fourteen organisations are member of Eurocaso, 11 were former member of the Change network and most had any kind of bilateral collaboration (19) within Europe.

A large number of organisations (18) also participated in European projects or international networks/projects. Most frequently mentioned were: EATG (6), European Project Aids & Mobility

(5), European Network on Male Prostitution (four), Tampep/Europap (4) and the Integration Project (3). ENP+/GNP+ and UNAIDS/WHO each were mentioned twice. Current collaboration mostly means the exchange of experiences (27). Other areas that are covered quite often are: skills building/training (19), advocacy & lobbying (17), joint implementation of activities (13), funding (13) and developing joint publications (10).

Organisations were asked what would be the main reasons for them to join a new European partnership. Most frequently mentioned were:

- exchange of experiences/information (20) and related issues (3), total score 23
- strengthen/intensify advocacy & lobbying (5) and related issues (17), total score 22
- access to/information about (EU) funding (9) and related issues (5), total score 14
- skills building/training (4) and related issues (9), total score 13
- networking within (enlarged) EU (5) and related issues (7), total score 12.

### 2.3 Priority areas for a new partnership

Organisations were asked to indicate priorities within the three main areas given:

1. At the European level: the need for a strong voice on the impact of HIV in Europe and further improvement of the quality of the strategies and policies used
2. North-South collaboration: need for co-ordination.
3. Eastern Europe and former Soviet Union: need for support.

*Establishing a strong pan-European initiative on the impact of hiv/aids in Europe*

The top priority issues (high score on all three indicated levels) under this area are shown in the table below.

<b><i>Establishing a strong pan-European initiative on the impact of hiv/aids in Europe</i></b>	Priority?	
	<b>No</b>	<b>Yes</b>
Hiv/aids to get a higher priority on the European and national governments agenda	0	33
Human rights	3	28
Migration, mobility and hiv/aids	4	25
Addressing inequalities with regard to HIV/AIDS among EU countries	5	23

(N: varies between 28 and 33 answers)

The "yes" category was split in three 'levels': advocacy, policy development and programmatic practice. Top priorities got high scores on all three:

- hiv/aids to get a higher priority on the European and national agenda (advocacy 28, policy development 22, programmatic practice 18)
- human rights issues (advocacy 21, policy development 17, programmatic practice 14)
- migration and mobility (advocacy 16, policy development 19, programmatic practice 20)
- addressing inequalities among EU countries (advocacy 18, policy development 17, programmatic practice 16).

Many organisations are already active in this area; 28 out of 34. The areas of activities that were indicated: access to treatment (12), mobility/migration (8), drugs policies (8), outreach work (6), prisoners (6), human rights (6), prevention programmes (6), general public (5).

### *Co-ordination of North/South collaboration*

In general terms North/South collaboration has a lower priority than the European issues. This is closely related to the fact that fewer organisations have experience in this area (less than half of them).

<b><i>Co-ordination of North/South collaboration</i></b>	Priority?	Priority?
	<b>No</b>	<b>Yes</b>
Access tot treatment	7	23
Arrange joint efforts to get funding (from European and global funds)	12	16
Working with (international) development agencies	13	15

(N: varies between 28 and 30 answers)

Top priority areas, indicated by those who stated: 'yes' this is a priority, are:

- access to treatment (advocacy 18, policy development 18, programmatic practice 11)
- arrange joint efforts to get funding (advocacy 13, policy development 13, programmatic practice 12)
- working with (international) development agencies (advocacy 11, policy development 12, programmatic practice 12).

Developing specific programmes in relation to the South, and direct support to and partnerships with African NGOs got very low priorities. This is directly related to the fact that many organisations are focussed on the national agenda. A few organisations stated that they indicated "no" priority because they were not capable of doing anything in this area, however they thought it important to do something on the European level in this area.

Out of the 34 organisations only 14 are active in working with developing countries.

Activities of those 14 organisations include: access to treatment (3), prevention in South (2), lobby & advocacy (2), fund raising (2), general public (2), human rights (2), support (African) ngos (2).

### *Support for Central and Eastern Europe and the former Soviet Union*

<b><i>Support for CCEE and former Soviet Union</i></b>	Priority?	Priority?
	<b>No</b>	<b>Yes</b>
Hiv/aids to get a higher priority on national governments agenda	1	30
Capacity building for AIDS NGOs	1	28
Financial support for enlargement states	7	22
Human rights	4	24

(N: varies between 28 and 31 answers)

Top priorities of those responding 'yes', in this area are:

- hiv/aids to get a higher priority on national governments agenda (advocacy 24, policy development 17, programmatic practice 17)
- capacity building for NGOs (advocacy 17, policy development 21, programmatic practice 23)
- financial support for enlargement states (advocacy 16, policy development 13, programmatic practice 18)
- human rights (advocacy 16, policy development 14, programmatic practice 12).

Twothird of the respondents is active in working with CCEE and NIS. This collaboration mostly deals with: capacity building (9), access to treatment (3), general Public (2), lobby national governments, human rights, exchange of staff/experiences, migration, drugs (all mentioned twice).



To finish this section of questions, organisations were asked to indicate their own top-3 of priorities for a future partnership. The full list of issues is included in appendix B. Top priorities include:

Lobby/advocacy (5) and related issues (11), total score 16  
Access to treatment (8) and related issues (3), total score 11  
Capacity building (6) and related issues (4), total score 10  
Financial support (6) and related issues (2), total score 8  
Human rights (6)  
Migration and mobility (4)  
Drug policies (3).

## **2.4 Support for new partnership**

The consultation was concluded with a set of questions about possible support for a new pan European initiative.

Almost all organisations (31) indicated that they could provide capacity to implement campaigns, almost similar scores were found for the implementation of training programmes and production of educational materials. However, in all these three cases almost half of the organisations would need to be partly funded to provide this kind of support.

About twothird of the organisations would be willing and able to pay a membership fee, however the acceptable amount varying considerably (from 50 to 2000 Euro per annum) depending on the type of membership services they get in return.

Only one organisation is able to financially support the partnership, another six indicated that they could support specific projects of the initiative.

A long list of suggestions for potential donors was given, which included national, European as well as international donor organisations: EU (incl. B7-600 advocacy line), UNAIDS, DFID, Netherlands Aids Fund, Netherlands Ministry of Foreign Affairs, OSI, GFATM (Global fund to fight Aids, TBC and malaria), Stopaidsnow, (Pharmaceutical) Industry and Business, American Embassies, DAPHNE Programme, Elton John Foundation, Bill Gates Foundation, Soros Foundation, World Bank, ERNA (European Red Cross Network), Open Society Institute, Ensemble contre le Sida.

### *Type of services*

And finally organisations were asked to indicate what type of services they would like to get from a new initiative. Again, as in earlier questions, the priority very clearly lies with the advocacy activities:

- representation at international and EU meetings (27)
- organise meetings (24)
- exchange visits (24)
- electronic newsbulletin (22)
- advocacy materials (20)
- training (19)
- serve as a resource (19)
- discussion forums on website (15).

## **2.5 Comparison between EU/non-EU member states organisations**

Seen the historical, economical, social and political differences among organisations based in the EU and those organisations who are from non-EU members a comparison of results has been made where relevant. For the sake of this comparison Switzerland is included in the EU member states section.

In terms of funding:

- organisations in Central/Eastern Europe (CCEE) rely more heavily on funding from international donors, they have relatively little support from their national governments.

As for the priority issues in the first area (impact of hiv/aids in Europe):

- organisations from CCEE prioritise awareness campaigns for the general public and drug policies higher than the other organisations, human rights also score relatively high on the advocacy level.

As for the priority issues in the second area (North/South collaboration):

- organisations from CCEE give these issues a very low priority, hardly any of them has experience in this area.

As for the priority issues in the third area (support for CCEE):

- not surprisingly these issues get a very high priority by organisations from CCEE, especially financial support, general awareness campaigns, drugs policies and capacity building are top priorities.

In terms of the services required from the new initiative there is a relatively strong need for meetings, and capacity building (10 out of 12) among the organisations from CCEE.

### 3. Results Interviews Keyplayers

In addition to the written dialogue a number of keyplayers (mainly existing networks) has been approached for a telephone interview. Three organizations has been spoken to: EuroCASO Secretariat, EuroCASO Eastern European Partnership office and the UNAIDS Partnership Office. The itemlist used for the interviews is attached in appendix C.

- **Importance and relevance of a new European hiv/aids partnership**

*UNAIDS:* "It is extremely relevant. There should be a pan European structure, this the is worst pandemic that mankind has ever experienced, so no doubt there should be a strong partnership. Also, we cannot afford to compete and we should not exclude certain organizations. However it is very important to analyse in-depth why other efforts did not work, lack of money certainly is not the only reason".

*EuroCASO:* "It definitely is important. Former networks have not been able to work together and were not capable of implementing relatively simple initiatives together".

*EuroCASO Partnership Office CCEE:* "It is important because now there is no organization that could represent European AIDS service organizations. The importance of it will depend on the effectiveness of its work".

- **Lessons learned from the past with European hiv/aids networks**

*UNAIDS:* "Other regions might have positive experiences that are (partly) relevant. Europe is too fragmented. Essential is the inclusiveness. Aids service organizations should stop to be exclusive, they should collaborate more with other organizations such as the Red Cross, churches, women organizations, youth organizations, other civil society groups etc. Of course aids service organizations do have specific expertise and experiences to deliver. The challenge is to gain on partnering up with unusual partners (such as just mentioned)".

*EuroCASO:* "The new partnership should have modest objectives, but at least be able to implement them (realistic). The mission should be clear and very pragmatic. Organizations have been suspicious and defensive towards each other. But we should be able to merge existing big European networks. Accessibility is key to success of the new partnership, every group should have access to the information, and being able to exchange experiences. EuroCASO made a mistake of dealing to much with internal matters of representation, democracy, structure and secretariat. Complicated rules around membership, representation etc will be the end of a new partnership. A steering committee based on expertise rather than representation might be an option. A new initiative should deliver concrete services to a broad network of organizations (e.g. website, leaflets, advocacy campaigns). Little groups as well as large NGOs should be included".

*EuroCASO Partnership Office CCEE:* "It is not enough just to put members on the mailing list; if I understand correctly during the last years of EuroCASO existence the only activity of it that could be seen by its members was information sending via EuroList – obviously that was not enough. I heard of such cases that some members didn't even know that they were members. I think it happens when the organization itself does not feel the importance of the network. For example when the leader of an organization changes, the former leader does not feel it important to inform the new one about membership, or he can even forget to do it. And the new leader cannot find out of its membership, because of the ineffectiveness of the network;

Members of the network must be motivated to be members – must feel that their input is needed or that the membership is really helpful for them.

Set realistic targets: to define exactly what can be really managed (depends on available resources). Maybe it is better to start from smaller things - smaller scope, smaller objectives. Then the network should expand with more members after it establishes its position"

- **Three main short-term priorities for (activities of) such a new partnership?**

*UNAIDS:* "First of all: remobilising Europe for prioritizing hiv/aids (together with other civil society groups, funding comes in here as well). Secondly try to work on the eradication of stigmatization and discrimination. And thirdly work on solidarity with regions with high hiv incidence (CCEE, Africa)".

*EuroCASO:* "Lobbying is the top priority. Pressure needs to be maintained on the political agenda. Information should be made easily accessible to as many organizations as possible.

Quick campaign strategies by e-mail could be arranged, a website with relevant meetings, events, deadlines for applications etc. could be developed. The new initiative should be pro-active in this".

*EuroCASO Partnership Office CCEE:* "Define what resources available and then what can be done with them effectively (human resource, finance, in which languages will be communicated etc.). Define communication means – will the network be driven only by Internet access? Will it provide a possibility for non-internet access NGOs to participate in network? Launch the secretariat that could start making contacts, creating the network. A meeting of key persons to define those technical issues. When you define the resources and communication means: define networks strategic objectives and scope.

After the establishment of the organizations – some kind of Public Relations company for other international organizations and future members, should be hired to launch the new initiative. Maybe organize a meeting of potential members in order to analyze their needs, possible ways of collaboration. Explain clearly to potential members what they can and what can not expect from the pan-European partnership. Also, this meeting can be means for checking if the defined objectives are really the required ones".

- **Reaction to report and preliminary results of written consultation**

*UNAIDS:* "In terms of respondents there were very few from Northern Europe. Again it should be analyzed why earlier efforts did not work. The key words for a successful initiative are inclusiveness, transparency and accessibility. I do not believe in representation, which demands democracy that simply is not always there and there is no time for all kind of bureaucratic processes etc. Europe should get its act together, there is no time to loose"

*EuroCASO:* "The report was interesting to read and described the European reality. It is good that so many organizations support the initiative, the momentum seems to be good"

*EuroCASO Partnership Office CCEE:* "there was some confusion about the scope of such an organization. As the respondents were only from those CCEE that speak English. What about Russian speaking countries? (Belarus, Ukraine)? Apparently the problem was, that the Russian version of the form didn't appear. In terms of the services required from the new initiative there is a relatively strong need for meetings, and capacity building (10 out of 12) among the organisations from CCEE. The membership fee can be an obstacle for participation for NGOs from Eastern Europe"

- **Future collaboration with a new partnership**

*UNAIDS:* "UNAIDS is not a funding entity, we could hire an organization to do some work, but we can not fund structures etc."

*EuroCASO:* "EuroCASO will be collaborating or be integrated in some way in this initiative. Unfortunately due to circumstances the process for this has been slowed down"

*EuroCASO Partnership Office CCEE:* "Exchange information, news about the events in the region and other (not European) countries, funding opportunities. Collaborating in finding trainers for trainings in Eastern Europe/Central Asia. Maybe it is possible that even a person from Eastern Europe can be a source for western Europe, as his work is in adverse circumstances and he must ways how to overcome them. In producing training tools adapted for Russian speaking countries. If pan-European doesn't include Russian speaking Eastern European countries, then collaboration between EuroCASO Partnership Office for Eastern Europe and pan-European could be away to bring two regions (Eastern and Western) together, create opportunities for their cooperation"

- **What kind of services should the new partnership deliver?**

*UNAIDS:* "There is no need for getting together all the time, there are too many meetings already (eg. this year Africa hosts at least 6 major international meetings). Mobilization should again be the focus of the services of the new partnership. Sometimes they can be handled simply by e-mail. The focus should be on the use of e-media and telephone/video conferencing."

*EuroCASO Partnership Office CCEE:* "All those listed are important. Only for Eastern region the training programmes should be somewhere in the first three lines"

- **Final remarks**

*UNAIDS:* "It is a really good initiative!"

*EuroCASO:* "As a network, make clear what you are able to offer (and what not!). Communicate clearly to people and refer to others whenever relevant. Make choices and work with low-cost means as internet and e-mail"

*EuroCASO Partnership Office CCEE:* "If the goal is to include Eastern Europe, the following issues need to be considered: the management of Russian language (translating materials, news, information, website, translation during meeting); the internet access for some NGOs is very poor; Eastern European countries still report the lack of materials in Russian, especially training modules"

## 4. Conclusions & recommendations

Both the results of the written consultation as well as the telephone interviews strongly support the conviction of the group of initiators that there is an urgent need for a new pan European partnership on hiv/aids.

Most organisations support the outline as proposed in the documents that circulated and are keen to participate and contribute. More specific the following conclusions are drawn from the written consultation.

### *Commitment to the initiative*

The number of questionnaires returned as well as the input in each of it was impressive and shows that many different organisations all over Europe support the creation of a new European partnership. The three organisations that were interviewed all agreed on the importance of creating such a new partnership.

### *Reasons to join a new partnership*

The main reasons to join a new partnership are the exchange of experiences and information as well as strengthening and intensifying advocacy and lobbying.

### *Overall priorities*

The results very clearly give a direction in which the new partnership should operate in the three main areas as defined. A leading role in advocacy is desired especially when it concerns agendasetting with national governments and European institutions, creating broader access to treatment and human rights. In addition to these general priorities, organisations from CCEE strongly expressed the need for capacity building that got a very high priority.

### *Support*

Although all respondents strongly support the creation a new pan European partnership, this does not automatically mean that they are able to contribute financially. Especially organisations in CCEE, but not only those, lack possibilities to financially support the new initiative.

A membership fee would probably be feasible for most organisations, although depending strongly on the amount and the level of services that organisations can expect. A formula needs to be developed to define membership and fees.

### *Structure*

The interviewees were all very clear en explicit in stating that inclusiveness and accessibility of the new initiative is the key to its success. No bureaucracy, but a pragmatic, constructive approach is needed. As well as creating inclusiveness by using several languages (incl. Russian).

### *Services*

A new partnership should offer concrete tools and services to its 'members'. The focus should be on: representation at international and EU meetings, organisation of meetings and exchange visits, developing an electronic newsbulletin and producing advocacy materials and training programmes (all related to the priority areas as defined earlier on

Although new media might be relatively cheap, it should be taken into account that access is still not always easy in CCEE and the former Soviet Union.

## **APPENDICES**

A. List of respondents

B. Tables

C. Itemlist interviews

## List of respondents

## APPENDIX A

### Written consultation

#### **Austria**

- Aids Hilfe Wien

#### **Belgium**

- Sensoa

#### **Bulgaria**

- National Centre of Public Health

#### **Denmark**

- PRO-centre

#### **Estonia**

- Estonian Association Anti-aids

#### **Finland**

- Finnish Aids Council

#### **France**

- Survivreusida
- Ensemble contre le sida-Sidaction
- Solidarite Sida

#### **Georgia**

- Georgian Plus Group

#### **Germany**

- Deutsche Aids Stiftung

#### **Greece**

- Centre for Inspirational Living

#### **Ireland**

- Alliance Sexual Health Centre

#### **Latvia**

- Youth Against Aids
- Aids Prevention Centre
- DIA+LOGS

#### **Netherlands**

- Foundation Mainline
- Afapac Foundation
- Dutch hiv Association
- Aids Fonds/StopAidsNow
- Netherlands Foundation for STD Control

#### **Poland**

- Stowarzyszenie Wolonatriuszy Wobee AIDS 'badz z nami'
- Lambda Warsaw

#### **Portugal**

- G.A.T.

#### **Romania**

- ACCEPT
- Aras, Romanian Association Against Aids

#### **Slovak Republic**

- League against aids in Slovak Republic/National Reference Centre

#### **Spain**

- Cesida



**Switzerland**

- Aids Hilfe Schweiz

**Turkey**

- Aids Prevention Society

**United Kingdom**

- Terrence Higgins Trust

**European Projects**

- European Network Male Prostitution/AMOC-DHV
- AC Company/AMOC-DHV
- European Project Aids & youth/Aids & mobility (joint response)

**Respondents interviews**

EuroCASO/Florian Hubner

EuroCASO/European Partnership Office, Maria Subataite

UNAIDS Partnership Office/Calle Almedal

## APPENDIX B

### Tables

#### 1. Background of respondents

The following countries are represented among the respondents (21 in total).

<i>Country</i>	<i>Number of organisations</i>
Austria	1
Belgium	1
Bulgaria	1
Denmark	1
Estonia	1
Finland	1
France	3
Georgia	1
Germany	1
Greece	1
Ireland	1
Latvia	3
Netherlands	5
Poland	2
Portugal	1
Romania	2
Slovak Republic	1
Spain	1
Switzerland	1
Turkey	1
United Kingdom	1
European projects	3

#### *Type of organisation (more than 1 answer possible)*

National ngo	29
Governmental service/body	4
European ngo/project	4
Patient organisation	1
Donor organisation	1
Service provider	1

#### *Funding sources*

National governments	25
Private donations	22
Local governments	14
Industry donations	9
Other*	11

\* membership fees, project grants, charities, international foundations, European Commission, Soros, FHI)

## 2. Current European/international collaboration

Are you currently collaborating with other hiv/aids organisations in Europe? No 2 Yes 32

### *Kind of collaboration*

Eurocaso membership	14
(former) Member of Change	11
Bilateral collaboration	19
Participation in Eur./int. networks/projects:	18
EATG	6
A&M	5
ENMP	4
Tampep/Europap	4
Integration Proj.	3
ENP+/GNP+	2
UNAIDS/WHO	2
EAEN	1
ENAH	1
EPHA	1
Eur. Gay Prev. Netw.	1
GAP	1
A&Y	1
AC Company	1
IAMI Europe	1
HIV/Aids Alliance	1
Afr. Partn.	1
Family Health Intern.	1
Baltic States Task F.	1
Phase (women netw.)	1
SAA	1
Names Project	1

### *Type of collaboration*

Exchange of experiences	27
Skills building/training	19
Advocacy & lobbying	17
Joint implementation activit.	13
Funding	13
Joint publications	10
Treatment activism	1

## 3. Reasons to join a new partnership ('open' answers)

Exchange of experiences/information	20	
Exchange with CCEE & African groups		1
More effective exchange of lesson learned	1	
Keeping track of new developments	1	
Access to/info about (EU) funding	9	
Resource mobilisation	1	
Search for new funding opportunities	1	
Participate in Europ. Budgets	1	

Networking with (enlarged) EU	5	
Have more useful contacts	1	
Improve co-operation between exist. groups	1	
Co-ordination	1	
Network support	1	
Collaboration with other donor organisations	1	
Ongoing collaboration on European level	1	
Collaboration in projects/conferences	1	
Skills building/training	4	
Promote/share models of good practice	2	
Learning	2	
Improve capacity in prevention	1	
Learning about policy development	1	
Develop best practices	1	
Sharing best practices in treatm. advocacy	1	
Exchange of organisational development	1	
Strengthen/intensify advocacy & lobbying	5	
Lobbying the EU	3	
Create a strong, collective voice		1
Intensifying camp. access to therap.	1	
Pushing governments to prioritise hiv	1	
Advocacy on role of PWH in prevention	1	
Advocacy on criminalisation of PWHA	1	
Advocacy on asylum seekers/migrants laws	1	
Advocacy on human rights/PWHA	1	
Joint lobby activities (treatment)	1	
Maintain focus on hiv/aids as a global probl.	1	
Involvement in decision making	1	
Pan European awareness campaign	1	
Forming common power	1	
Strive for equality between nations	1	
Common lobbying	1	
Building effective partnerships	2	
Building East-West partnerships	1	
Bi/multilateral collaboration	1	
Policy development	2	
Tackling European-wide (legal/pol.issues)	1	
Joint implementation of prev. act.	2	
Joint projects on migrants issues	1	
Develop supranational programmes	1	
Access to treatment	1	

Gain experience

1

#### 4. Priority Issues

<i>Establishing a strong pan-European initiative on the impact of hiv/aids in Europe</i>	Priority?	Priority?
	No	Yes
Hiv/aids to get a higher priority on the European and national governments agenda	0	33
Migration, mobility and hiv/aids	4	25
Trafficking of women	11	19
Hiv prevention strategies and awareness campaigns general public	5	22
Drugs policies	7	20
Access to treatment	6	23
Hiv/aids and prisoners	9	21
Human rights	3	28
Addressing inequalities with regard to HIV/AIDS among EU countries	5	23

(N=34, if total is less this implies a few missing answers)

**Specified answers for those who stated Yes, this is a priority (the first column is Yes but without any specification), more than one priority possible**

<i>Establishing a strong pan-European initiative on the impact of hiv/aids in Europe</i>			
Hiv/aids to get a higher priority on the European and national governments agenda			
Yes: 5	Y: advocacy 28	Y: policy development 22	Y: programmatic practice 18
Migration, mobility and hiv/aids			
Yes: 5	Y: advocacy 16	Y: policy development 19	Y: programmatic practice 20
Trafficking of women			
Yes: 6	Y: advocacy 13	Y: policy development 11	Y: programmatic practice 13
Hiv prevention strategies and awareness campaigns general public			
Yes: 5	Y: advocacy 11	Y: policy development 13	Y: programmatic practice 17
Drugs policies			
Yes: 5	Y: advocacy 14	Y: policy development 13	Y: programmatic practice 15
Access to treatment			
Yes: 5	Y: advocacy 17	Y: policy development 18	Y: programmatic practice 13
Hiv/aids and prisoners			
Yes: 6	Y: advocacy 14	Y: policy development 14	Y: programmatic practice 15
Human rights			
Yes: 7	Y: advocacy 21	Y: policy development 17	Y: programmatic practice 14
Addressing inequalities with regard to HIV/AIDS among EU countries			
Yes: 5	Y: advocacy 18	Y: policy development 17	Y: programmatic practice 16

Yes= priority but area not specified

**Active in this area?** No: 6, Yes: 28

access to treatm.	12
mobility/migration	8
drugs policies	8
mobility/migration	8
outreach work	6
prisoners	6
human rights	6
prevention progr.	6
general public	5
harm reduction	2
policy making	2
young people	2
trafficking	2

funding projects	1
awareness campaigns	1
address inequalities	1
monitoring	1
peer education	1
nat. governm.	1
inequalities EU	1
prevention	1
advocacy criminalis.	1
supporting cbo's	1
support init. access to treatm.	1
research & development	1
women and STI	1
vulnerable groups	1

<i><b>Co-ordination of North/South collaboration</b></i>	Priority?	Priority?
	<b>No</b>	<b>Yes</b>
Working with (international) development agencies	13	15
Arrange joint efforts to get funding (from European and global funds)	12	16
Develop specific programmes in relation to the South	21	10
Access tot treatment	7	23
Hiv prevention strategies and awareness campaigns general public	14	15
Prevention to new technologies (ie vaccines and microbicides)	18	13
Hiv/aids and women	14	15
Human rights	12	18
Direct support to and partnerships with African NGOs	21	11

(N=34, if total is less this implies a few missing answers)

**Specified answers for those who stated Yes, this is a priority (the first column is Yes but without any specification), more than one priority possible**

<i><b>Co-ordination of North/South collaboration</b></i>			
Working with (international) development agencies			
Yes: 3	Y: advocacy 11	Y: policy development 12	Y: programmatic practice 12
Arrange joint efforts to get funding (from European and global funds)			
Yes: 3	Y: advocacy 13	Y: policy development 13	Y: programmatic practice 12
Develop specific programmes in relation to the South			
Yes: 3	Y: advocacy 3	Y: policy development 6	Y: programmatic practice 7
Access tot treatment			
Yes: 5	Y: advocacy 18	Y: policy development 18	Y: programmatic practice 11
Hiv prevention strategies and awareness campaigns general public			
Yes: 3	Y: advocacy 12	Y: policy development 10	Y: programmatic practice 10
Prevention to new technologies (ie vaccines and microbicides)			
Yes: 4	Y: advocacy 9	Y: policy development 8	Y: programmatic practice 5
Hiv/aids and women			
Yes: 4	Y: advocacy 11	Y: policy development 9	Y: programmatic practice 7
Human rights			
Yes: 5	Y: advocacy 13	Y: policy development 10	Y: programmatic practice 3
Direct support to and partnerships with African NGOs			
Yes: 2	Y: advocacy 5	Y: policy development 5	Y: programmatic practice 9

\* Yes= priority but area not specified

**Active in this area?** No: 20, Yes: 14

Access to treatment	3
Prevention in South	2
Lobby & advocacy	2
Fund raising	2
General public	2
Human rights	2
Support (African) ngos	2
Sida Magreb	1
Womens issues	1
Distribute funds to Subsahara Afr.	1
Programme dev. for the South	1
Working in Asia	1
Material development	1

<i>Support for Central and Eastern Europe and the former Soviet Union</i>	Priority?	Priority?
	No	Yes
Financial support for enlargement states	7	22
Hiv/aids to get a higher priority on national governments agenda	1	30
Migration, mobility and hiv/aids	6	24
Trafficking of women	13	16
Hiv prevention strategies and awareness campaigns general public	6	21
Drugs policies	4	22
Access to treatment	4	23
Hiv/aids and prisoners	10	18
Human rights	4	24
Capacity building for AIDS NGOs	1	28

(N=34, if total is less this implies a few missing answers)

**Specified answers for those who stated Yes, this is a priority (the first column is Yes but without any specification), more than one priority possible**

<i>Support for Central and Eastern Europe and the former Soviet Union</i>			
Financial support for enlargement states			
Yes: 4	Y: advocacy 16	Y: policy development 13	Y: programmatic practice 18
Hiv/aids to get a higher priority on national governments agenda			
Yes: 6	Y: advocacy 24	Y: policy development 17	Y: programmatic practice 17
Migration, mobility and hiv/aids			
Yes: 6	Y: advocacy 16	Y: policy development 18	Y: programmatic practice 4
Trafficking of women			
Yes: 5	Y: advocacy 10	Y: policy development 11	Y: programmatic practice 10
Hiv prevention strategies and awareness campaigns general public			
Yes: 4	Y: advocacy 13	Y: policy development 14	Y: programmatic practice 17
Drugs policies			
Yes: 5	Y: advocacy 14	Y: policy development 16	Y: programmatic practice 17
Access to treatment			
Yes: 7	Y: advocacy 16	Y: policy development 12	Y: programmatic practice 9
Hiv/aids and prisoners			
Yes: 6	Y: advocacy 10	Y: policy development 9	Y: programmatic practice 12
Human rights			
Yes: 6	Y: advocacy 18	Y: policy development 14	Y: programmatic practice 12
Capacity building for AIDS NGOs			
Yes: 5	Y: advocacy 17	Y: policy development 21	Y: programmatic practice 23

**Active in this area?** No 13, Yes : 21



Capacity building	9
Access to treatment	3
General Public	2
Lobby nat. governm.	2
Human rights	2
Exchange of staff/exp.	2
Migration	2
Drugs	2
Prevention	1
Trafficking	1
Peer education	1
Male prostitution	1
STI prevention	1

### **Suggested Top 3 priorities of a pan European initiative ('open' question)**

Access tot treatment	8	
Access to treatment in countries of origin/the South	3	
Financial support (enlargement states/CCEE/FSU)	6	
Funding ngos in CCEE	1	
Joint efforts for funding		1
Capacity building	6	
Capacity building CCEE/NIS	3	
Empowering pat. org. in CCEE	1	
Human rights	6	
Lobby/advocacy (countries with lim. Resources)	5	
Hiv/aids on nat. and Eur. agenda	5	
Campaign against criminalisation of hiv		1
Advocacy on harm reduction methods	1	
Lobby to improve pos. of PWHA	1	
Sharing strat. for political change	1	
Human rights in CCEE	1	
Joint advocacy to focus on CCEE/FSU	1	
Migration and mobility	4	
Drug policies	3	
Hiv prevention & awareness general public	2	
Gay men/MSM	2	
Youth	2	
Programmatic practice	2	
Coordination North/South collaboration		2
Policy development	2	
Workplace/labour and hiv	2	
Prisons issues	1	
Deal with legal issues for PWHA	1	
Include PWHA in programmes	1	

Support for PWHA	1
Promoting self advocacy of PWHA	1
Establishing a strong initiative	2
Promote models of good practice	1
Pan-European awareness campaign	1
Hard to reach groups	1
Guarantee medical insurance (regardless immigr. st)	1
Programme development to fight stigmatisation	1
Trafficking	1
Support CCEE access to treatment	1
Exchange of experiences East West	1
Research & development	1
Evidence based prevention	1
Improve migrants situation	1
Strive for equality between nations	1

### 5. Support for new pan-European hiv/aids partnership

Type of support	No	Yes definitely	Yes possibly	Yes if at least partly funded
Capacity to implement advocacy campaigns	3	6	7	18
Capacity & experience to provide training	1	11	5	17
Capacity & experience to produce educational materials	2	11	7	14

1 organisation missing

Is your organisation able to pay a membership fee for the new initiative?	
No	10
Yes, definitely	4
Yes, possibly, depending on amount*	20

\*maximum annual contribution, Euro: 50, 100 (3 x), 300 (3x), 500, 1,000, 2,000 (depending on services, what membership involves)

Does your organisation have the capacity to financially support such a new initiative?	
No	25
Yes, could co-finance general costs	1
Yes, could co-finance specific projects*	6

\* only with small amounts, only for advocacy projects

Do you have suggestions for potential donors who could support this initiative?	
No	16
Yes*	12

#### \* Suggestions:

EU (incl. B7-600 advocacy line), UNAIDS, DFID, Netherlands Aids Fund, Neth. Min. of For. Aff., OSI, GFATM (Global fund to fight Aids, TBC and malaria), Stopaidsnow, (Pharmaceutical) Industry and Business, American Embassies, DAPHNE Programme, Elton John Foundation, Bill Gates Foundation, Soros Foundation, World Bank, ERNA (European Red Cross Network), Open Society Institute, Ensemble contre le Sida

<b>What kind of services, support would you expect from such a new pan-European initiative?</b>	
Representation at international and EU meetings	27
Organise meetings	24
Exchange visits	24
Electronic newsbulletin	22
Advocacy materials	20
Training	19
Serve as a resource	19
Discussion forums on website	15
Other*	5

\*lobbying, legal/social/medical information other countries, models of measuring impact of prevention, models for evaluation of staff, material development for vulnerable groups, assistance on international fundraising, coordination body for international projects

#### **Additional remarks of respondents:**

- meetings to be organised in the weekend & cheap cities
- involvement of PLWHA essential
- position of CBOs in network should be eminent
- language issues need to be considered
- priorities should be relevant for all countries and clearly described
- meetings should have subregional character
- work should be complementary to existing networks and funding should be used as efficient as possible
- virtual communication should be stimulated (cheap, less human investment)
- good luck with important initiative
- meeting should have broad invitations to support desired transparency
- big thanks for the initiative & the inquiring
- strengthen capacity of existing networks and ensuring inclusiveness instead of building a new one
- very good and strong idea, especially for new EU members and CCEE
- thanks for involving us
- congratulations with this initiative, if well planned and open to broad participation it could definitely work
- thanks to all those who dedicated considerable time to develop this initiative
- it is very important to have such a network
- thanks for incorporating us
- our funding is not secured, however we are very interested in participation and some of the initiators are part of our network
- when you develop an e-bulletin or discussions this should be done in as many languages as possible
- congratulations with this new important and expected initiative
- suggested activities: a seminar in cross border issues and hiv, and a seminar on refugees and migrants and hiv on the regional level (Slovakia/Ukraine)
-

ITEMLIST

**Telephone Interviews hiv/aids partnership  
May 2003**

*Part 1: general*

- In general: how important and relevant is a new European hiv/aids partnership?
- What lessons can be learned from the past with European hiv/aids networks? (strengths and weaknesses with regard to structure and organisation as well as content issues, which mistakes should not be repeated, conditions for success)
- What would you define as the three main short-term priorities for (activities of) such a new partnership?

*Part 2: reaction to report*

- How do you interpret the results of our written consultation? (respondents, priorities, surprises? any issues missing?)

*Part 3: expectations*

- How do you view future collaboration with such a partnership?
- What kind of services should the new partnership deliver?
- Final remarks