



The aim of this session is to facilitate focused and systematic inclusion of a gender dimension as an integral part of the multi-sectoral approach to HIV/AIDS. The session therefore seeks to:

- ⓧ deepen the participants' understanding of the multi-sectoral response to HIV/AIDS at national and community levels
- ⓧ develop an appreciation for a Gender Management System (GMS) for HIV/AIDS
- ⓧ introduce basic tools for exposing gender gaps in processes of policy programme development, implementation and evaluation.

Once identified, these gender gaps serve as crucial points for further investigation on how the strategic needs of women and men could be addressed in a manner that should lead to improved impacts on their lives.

**Session Objectives** The session objectives include:

- ⓧ Analysing the multi-sectoral response to HIV/AIDS
- ⓧ Exploring a gender management system (GMS) for HIV/AIDS
- ⓧ Discussing tools for mainstreaming gender into HIV/AIDS policies, programmes and activities.



## Activity 1 Defining the multi-sectoral response to HIV/AIDS

### Activity objectives

- To define the multi-sectoral response to HIV/AIDS
- To identify the strengths and weaknesses of a multi-sectoral response to HIV/AIDS, and determine conditions conducive to its successful implementation.

### Materials

Flip chart  
Markers  
Adhesive putty  
Transparencies

### Time

60 minutes

### Method

Brainstorming and group discussions

### Process

Conduct a short plenary discussion on the multi-sectoral response to HIV/AIDS. Guiding questions can include the following:

- What do you understand the multi-sectoral approach to mean?
- What are some of the sectors that should be involved?
- How can it be applied to HIV/AIDS?
- Who are the key actors in HIV/AIDS?
- What resources would be needed in a multi-sectoral approach to HIV/AIDS?
- What are the essential success factors for a multi-sectoral approach to HIV/AIDS?

Record all key points from the responses on a flip chart for all participants to see.



<b>ACTORS</b>	<b>GOVERNMENT</b>	<b>BUSINESS</b>	<b>CIVIL SOCIETY ORGANISATIONS</b>
	<b>SECTORS</b>		
	<b>RESOURCES</b>		

**GOVERNMENT**

- Heads of state
- Government Ministers and MPs Political leaders at central and local government levels
- Civil servants at central and local government levels

**BUSINESS**

- Chief Executives  
Managing Directors
- Boards of Directors
- Managers

**CIVIL SOCIETY ORGANISATIONS**

- University and educational leaders
- Religious and community leaders including traditional and spiritual healers
- NGOs
- Trade union leaders
- Leaders of professional associations
- Traditional political leaders
- PLHA, people affected, orphans

**SECTORS**

- Health
- Education
- Social Welfare
- Water and Sanitation
- Finance
- Labour
- Transport
- Industry, Commerce,
- Agriculture
- Defence
- Culture and National Heritage
- Home Affairs
- Public Service
- Information and Broadcasting

**SECTORS**

- Insurance
- Banking
- Beverages
- Human Resource Development
- Construction
- Tourism, Pharmaceuticals
- Mining
- MFI, medium and small enterprises

**SECTORS**

- NGOs and charitable organisations
- Professional associations
- Religious organisations
- Traditional, community and cultural leaders
- PLHA
- Media
- Traditional healers

**RESOURCES**

- Human resources
- Physical infrastructure
- Funds

**RESOURCES**

- Human resources
- Physical infrastructure
- Funds

**RESOURCES**

- Human resources, immediate families and extended families

**? Questions**

- What are the missing components, elements or key players? Record them on a flip chart.
- Summarise the discussion by highlighting the need for gender and youth components for the multi-sectoral response.





## Transparency 2

### Framework for a multi-sectoral response at national level

session 3 Gender sensitive responses to the multi-sectoral approach to HIV/AIDS

<b>ACTORS</b>	<b>GOVERNMENT</b>	<b>BUSINESS</b>	<b>CIVIL SOCIETY ORGANISATIONS</b>
	<b>SECTORS</b>		
	<b>RESOURCES</b>		
	<ul style="list-style-type: none"> <li>• Heads of state</li> <li>• Government Ministers and MPs Political leaders at central and local government levels</li> <li>• Civil servants at central and local government levels</li> </ul>	<ul style="list-style-type: none"> <li>• Chief Executives Managing Directors</li> <li>• Boards of Directors</li> <li>• Managers</li> </ul>	<ul style="list-style-type: none"> <li>• University and educational leaders</li> <li>• Religious and community leaders including traditional and spiritual healers</li> <li>• NGOs</li> <li>• Trade union leaders</li> <li>• Leaders of professional associations</li> <li>• Traditional political leaders</li> <li>• PLHA, people affected, orphans</li> </ul>
	<ul style="list-style-type: none"> <li>• Health</li> <li>• Education</li> <li>• Social Welfare</li> <li>• Water and Sanitation</li> <li>• Finance</li> <li>• Gender/Womens</li> <li>• Labour</li> <li>• Transport</li> <li>• Industry, Commerce,</li> <li>• Agriculture</li> <li>• Defence</li> <li>• Culture and National Heritage</li> <li>• Home Affairs</li> <li>• Public Service</li> <li>• Information and Broadcasting</li> </ul>	<ul style="list-style-type: none"> <li>• Insurance</li> <li>• Banking</li> <li>• Beverages</li> <li>• Human Resource Development</li> <li>• Construction</li> <li>• Tourism, Pharmaceuticals</li> <li>• Mining</li> <li>• MFI, medium and small enterprises</li> </ul>	<ul style="list-style-type: none"> <li>• NGOs and charitable organisations</li> <li>• Women's organisations and groups</li> <li>• Professional associations</li> <li>• Religious organisations</li> <li>• Traditional, community and cultural leaders</li> <li>• PLHA</li> <li>• Media</li> <li>• Traditional healers</li> </ul>
	<ul style="list-style-type: none"> <li>• Human resources</li> <li>• Physical infrastructure</li> <li>• Funds</li> </ul>	<ul style="list-style-type: none"> <li>• Human resources</li> <li>• Physical infrastructure</li> <li>• Funds</li> </ul>	<ul style="list-style-type: none"> <li>• Human resources, immediate families and extended families</li> </ul>

- Participants should do a quick analysis of the positions of women, men, young and older persons.
- What implications does this have on decision-making, policy development and implementation?
- Propose ways of enhancing equitable participation in decision-making within the multi-sectoral response context for HIV/AIDS.
- To summarise the discussion use the Commonwealth framework (Transparency 2) for a multi-sectoral response to HIV/AIDS at national and community levels.

## Transparency 3

### Framework for a multi-sectoral response at community level



ACTORS	GOVERNMENT	BUSINESS	CIVIL SOCIETY ORGANISATIONS
SECTORS	<ul style="list-style-type: none"> <li>• Transport</li> <li>• Industry, trade and mining</li> <li>• Education</li> <li>• Health</li> <li>• Legal and justice</li> <li>• Community development</li> <li>• Culture</li> <li>• Youth</li> <li>• Agriculture</li> <li>• Information</li> <li>• Traditional, political, community leaders' associations</li> </ul>	<ul style="list-style-type: none"> <li>• Transport</li> <li>• Industry, trade, commerce and mining</li> <li>• Retailing</li> </ul>	<ul style="list-style-type: none"> <li>• Prominent individuals e.g. sportspersons, musicians</li> <li>• Professional associations</li> <li>• Cultural organisations</li> <li>• Religious organisations</li> </ul>
RESOURCES	<ul style="list-style-type: none"> <li>• Primary health centres</li> <li>• Schools and other government facilities</li> <li>• Funds</li> </ul>	<ul style="list-style-type: none"> <li>• Volunteers and mentors</li> <li>• Funds</li> <li>• Skills</li> <li>• AIDS aware workforce</li> <li>• Commodities e.g. condoms, drugs</li> </ul>	<ul style="list-style-type: none"> <li>• People</li> <li>• Trained professionals</li> <li>• Aware media</li> <li>• Community groups e.g. handicraft, income generation</li> <li>• Human spirit, inner strength</li> <li>• Families</li> </ul>



- Repeat the process as in Transparency 1 of analysing the positions of women, men and young persons for Transparency 2: Framework for multi-sectoral response at community level
- The exercise should be done in groups.

Conclude the session by sharing the following Commonwealth definition of a multi-sectoral approach.

### **What is a multi-sectoral approach to HIV/AIDS?**

*"A multi-sectoral response means involving all sectors of society – governments, business, civil society organisations, communities and people living with HIV/AIDS – at all levels – pan-Commonwealth, national and community – in addressing the causes and impact of the HIV/AIDS epidemic. Such a response requires action to engender political will, leadership and co-ordination, to develop and sustain new partnerships and ways of working, and to strengthen the capacity of all sectors to make an effective contribution."*

(Commonwealth Secretariat, 2001)

### **Analysis of a multi-sectoral response to HIV/AIDS**

This activity provides participants with the opportunity to do a quick analysis of the application of a multi-sectoral approach to HIV/AIDS initiatives. Participants will also focus on the strengths, weaknesses, opportunities and threats of a multi-sectoral response to HIV/AIDS. Divide participants into groups. Each group should attempt as many of the following questions as possible.

What current sector-based HIV/AIDS activities do you know of? Record these on the table on the next page::



SECTORS BY GROUP	ACTIVITIES	LEVELS (e.g. national or community)
<b>Government</b> <ul style="list-style-type: none"><li>• Education</li><li>• Agriculture</li><li>• Defence</li><li>• Finance</li></ul>		
<b>Business/Private</b> <ul style="list-style-type: none"><li>• Banking</li><li>• Construction</li><li>• Tourism</li><li>• Enterprises</li></ul>		
<b>Civil Society</b> <ul style="list-style-type: none"><li>• NGOs</li><li>• CBOs</li><li>• Care providers</li><li>• PLWA</li><li>• Tradition healers</li><li>• Faith healers</li><li>• Sex workers</li><li>• Religious organisations</li><li>• Professional associations</li><li>• Traditional and community leaders</li></ul>		



1. Are there activities that are implemented by more than one sector, within or across groups? (For example, within the government group – Education and Health, or across groups – Health and NGOs).

- Give examples of these common activities.
- What deliberate measures are being taken to recognise these commonalities in programme initiatives?

2. What steps are being taken to address duplication of programmes across sectors?

3. Are there activities that are exclusively implemented by certain sectors?  
Give examples.

4. What should institutions and organisations do to strengthen support for and improve service provision to people living with AIDS and affected persons?

5. How can networking and collaboration be made more strategic in order to enhance efficiency in the provision of services?

Discuss group findings in plenary. Record the key issues on a flipchart. Post on the wall for linking activities at a later stage.

For the Multi-sectoral scenario of activities refer to the Summary notes for the Facilitator for a conclusion to this sub-activity.

To conclude this activity participants should continue in their group discussions to answer the following questions:

1. What are the strengths of a multi-sectoral response to HIV/AIDS?
2. What are some of the challenges that are likely to be encountered in the implementation of a multi-sectoral response to HIV/AIDS?
3. How can identified challenges be addressed?
4. What conditions are necessary for the successful implementation of a multi-sectoral response to HIV/AIDS?

Discuss group reports in plenary and share objectives and key aspects of a multi-sectoral approach to HIV/AIDS as follows:

- To link HIV/AIDS to all poverty reduction strategies and other actions aimed at improving quality of life.

- To recognise that people living with HIV/AIDS (PLWHAs) must be central to responses and that their participation and empowerment to enable them to take effective action themselves and with others is essential to success.

- To promote political will and mobilise action to break the silence about HIV/AIDS, reduce discrimination and stigma, protect the human rights of PLHA, provide effective programmes to prevent, treat, care for and mitigate the impact of HIV/AIDS, and mobilise and make available resources for civil society organisations engaged in prevention and care.

- To pay particular attention to the specific needs of adolescents and young people, especially girls, in order to prevent them from becoming infected.

- To address the needs of vulnerable and disadvantaged groups, such as the majority of women and girls in developing countries, those living in poverty, street children, the disabled, migrants, refugees, sex workers, people in detention, those living in conflict zones, injecting drug users, and men who have



sex with men.

- To ensure that the needs of those caring for PLHA are taken into account.
- To promote policies that enable communities to take effective action themselves and with others to prevent HIV infection and to improve the quality of life of PLHA.
- To facilitate partnerships among all agencies at local, national and international levels, recognising the important roles that civil society and the private sector can play.
- To expand efforts and improve methods for prevention, treatment and care. This includes providing access to affordable drugs that alleviate the symptoms and opportunistic infections associated with HIV and reduce parent-to-child transmission, and vigorously pursuing innovative measures including vaccines, microbicides and traditional and complementary therapies that are appropriate and affordable for those living in developing countries.

Key aspects of a multi-sectoral approach to HIV/AIDS are to:

- Consider HIV/AIDS and its implications in all areas of policy-making
- Involve all sectors in developing a framework to respond to the epidemic
- Identify the comparative advantages and roles of each sector in implementing activities
- Encourage each sector to consider how it is affected by HIV/AIDS and how its actions impact on the disease
- Develop partnerships within government and between the public sector, private sector and civil society.

(Source: Commonwealth Secretariat, 2001)



## Activity 2 Mainstreaming gender into the multi-sectoral response to HIV/AIDS

### 📌 Activity objective

To explore basic principles of a gender management system and relate them to the multi-sectoral response to HIV/AIDS.

### 🗣️ Method

Presentation and interactive involvement of participants.

### 📋 Process

- Present the following using transparencies
- Elaborate on the presentation by giving examples
- Give participants an opportunity to ask questions for clarification and make comments to enhancing sharing of information

### What is a Gender Management System (GMS)?

- A Gender Management System (GMS) is a Commonwealth approach to gender mainstreaming. It is a network of structures, mechanisms and processes put in place within an existing organisational framework.

The structures guide, plan, monitor and evaluate the process of mainstreaming gender into all areas of the organisation's work, in order to achieve greater gender equality within the context of sustainable development. A gender management system can be established at any level of government or the private sector, or in institutions such as universities, intergovernmental organisations, NGOs, and CBOs.

- GMS aims to create an enabling environment within which gender issues can be identified and addressed in all development planning and programme implementation efforts. The system also promotes the advancement of gender equity through:
  - Demonstration of necessary political will
  - Forging of a active partnership of stakeholders including government, business/private

- sector and civil society
- Institutional/organisational capacity building to ensure effective gender mainstreaming for all policies and programmes, and
- Sharing of information based on experience, particularly regarding good practice.



- Essential elements of a Gender Mainstreaming System





### **Application of a Gender Management System to HIV/AIDS**

It is an established fact that unequal power relations between women and men fuel the spread of HIV. GMS principles can be directly applied to HIV/AIDS in an attempt to understand how these power relations manifest themselves, and to bridge the gender gaps existing in current strategies and interventions.

The purpose is to:

- Promote commitment, programme ownership and co-ordination at all levels for an integrated gender sensitive multi-sectoral response to the control and prevention of HIV/AIDS.
  - Increase understanding of the impact of culture, gender and social relations to the spread and prevention of HIV/AIDS.
  - Increase gender awareness and gender analysis skills required for designing gender responsive HIV/AIDS policies and programmes
  - Respond directly to the needs of women, men and young people infected and affected by HIV/AIDS
  - Take appropriate action particularly with regard to men's contribution to controlling the pandemic.
- Change women's and men's values, attitudes and behavioural patterns that fuel the pandemic.
  - Modify existing structures and systems (such as legal, educational, economic), which support the existing power imbalance between women and men in society.
  - Identify stakeholders and possible partners at all levels in order to strengthen efforts to combat HIV/AIDS.
  - Share experiences, resources, and exchange information, ultimately leading to better co-ordination and collaboration.
  - Prepare a plan of action with concrete activities at all levels in order to target women and men effectively, as well as girls and boys in the fight against HIV/AIDS.
  - Build capacities for a gender sensitive multi-sectoral response to HIV/AIDS within relevant government and non-government sectors, for greater efficiency.



## A gender sensitive multi-sectoral response to HIV/AIDS in a nutshell

### Background

How did GMS come into being?

- Efforts by countries to promote equality of opportunities and outcomes between women and men
- Some progress made in addressing gender gaps, gender mainstreaming efforts intermittent, lack of coordination, difficulties in determining national aggregate performance
- Mandate of 5 & 6 Women's Ministers' meetings

### What is a GMS for HIV/AIDS?

- A Commonwealth approach for gender mainstreaming in HIV/AIDS
- A network of structures, mechanisms and processes developed within an existing framework to address HIV/AIDS
- It should guide and encourage the planning, monitoring and evaluation process of integrating gender into all areas of work related to HIV/AIDS
- Should lead to enhanced levels of gender equality and equity so that both women and men benefit from HIV/AIDS interventions, within the context of sustainable development

### Who can use it?

It can be established at any level of government or institution, intergovernmental organisations, NGOs, CBOs, private sector, etc.

### Mission

To ensure gender equality and equity in the fight against HIV/AIDS through

- Promoting political will
- Forging a partnership of stakeholders
- Building capacity
- Sharing good practice

### Objectives

- To promote systematic and consistent gender mainstreaming into HIV/AIDS policies, plans, programmes and activities at all levels
- To assist state and non-state actors to acquire gender sensitisation, analysis and planning skills necessary for development and implementation of national HIV/AIDS strategies, policies, plans and programmes
- To strengthen the capacity of National HIV/AIDS Coordinating Agencies to direct, advise and coordinate national gender mainstreaming efforts in the area of HIV/AIDS

- To create an enabling gender inclusive environment in the fight against HIV/AIDS and address the differential impact of the pandemic on women and men at all levels.

### GMS stakeholder approach

Broad principles:



### GMS essential components

- Enabling environment
- The GMS process
- GMS structures
- GMS mechanisms



### Assumptions and risks

Application of GMS principles to HIV/AIDS is carried out with the assumptions that governments:

- Will adopt a multi-sectoral approach to HIV/AIDS, if they have not already done so.
- Have an obligation to promote gender equality and human rights as enshrined in international and regional human rights standards, and other mandates.
- Can put in place a constitutional and legislative framework to promote the gender equality and protect the human rights of women, address gender-based violence, and protect the rights of people living with HIV/AIDS.
- Have the political will at the highest level to do all that is necessary to promote gender equality and in particular, address discrimination against women in all HIV/AIDS interventions.
- Will be able to commit the human, institutional and financial resources necessary for effective gender mainstreaming in all HIV/AIDS policies, programmes and activities.

- Will increase the effectiveness of current strategies and control the HIV/AIDS pandemic by targeting women and girls.
- Will promote multi-disciplinary efforts and the implicit interdepartmental collaboration and co-ordination within and outside government structures. Successful implementation of a GMS in HIV/AIDS depends on joint and co-ordinated effort at different levels of government, private sector and with the civil society.
- Will increase women's involvement in decision-making processes in the political, public and private sectors, which is fundamental to combating HIV/AIDS.

The risks include:

- Focussing interventions towards women because of their vulnerability may lead to misconception that this is a woman's issue.
- Stereotyped attitudes and behaviours about men and women may prevent or ignore the need for gender specific interventions.
- Lack of information and lack of co-ordination and collaboration amongst

agencies and sectors may lead to duplication of efforts or adhoc responses with no/little follow up.

- The top-down approach typical of bureaucratic structures is likely to be imposed on all initiatives, and this may sabotage the multi-sectoral response to HIV/AIDS.
- The low priority given to gender issues is likely to impact negatively on the amount of resources allocated to promote a deeper understanding of the gender dimensions of HIV/AIDS and how these could be integrated into all policies and programmes.
- The inadequate representation of women at all levels of decision-making continues to limit their direct inputs into efforts to combat HIV/AIDS.



### Group Exercise

This exercise can be done in plenary or by small groups. The purpose is to consolidate a gender sensitive approach to the multi-sectoral response to HIV/AIDS. Several sectors could be discussed, depending on available time and level of group engagement in the exercise. If you decide to have small group discussions, each group can be assigned a sector.

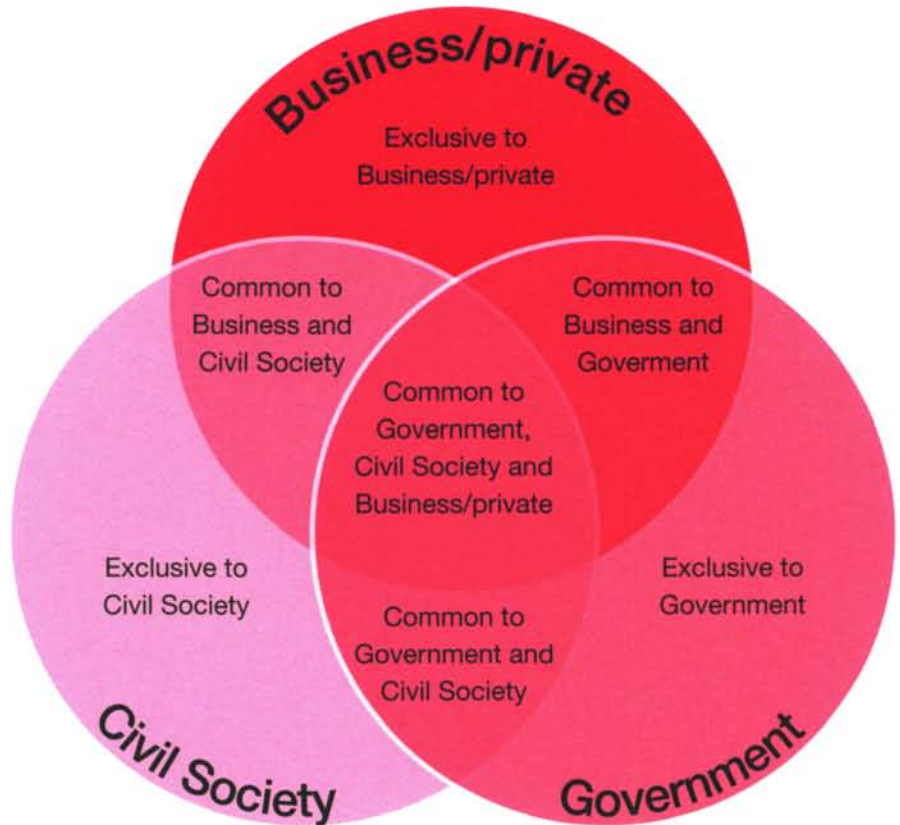
SECTOR	IMPACTS OF HIV/AIDS. WHO IS AFFECTED MORE? WHY?	OVERALL AND SPECIFICALLY TARGETED POLICY/ACTION
Agriculture		
Defense		
Education	Student absenteeism because they have to care for sick relatives. Girls are affected more.	Develop support structures for care provision to enable more girls to finish education
Business		
Home-Based Care**		



\*\* Special consideration

Conclude plenary discussions for this session by emphasising that as a consequence of the gendered impacts of HIV/AIDS, women and men, girls and boys experience the pandemic differently. As such all policy and programme measures taken to combat HIV/AIDS must necessarily be based on the actual respective experiences of women and men, girls and boys, and how these measures are likely to impact on their lives. This is the essence of gender responsive policy and programme development.

**Emerging Multi-sectoral Scenario of Activities**



This is a very simple illustration of a highly complex multi-dimensional programme intersection situation.

The diagram illustrates that various sectors within government, business and civil society undertake activities for the implementation of their respective HIV/AIDS programmes.

Respective groups, such as government, business or civil

society, may exclusively implement some activities. Other activities may be common across two groups, for example government and civil society, government and business, or civil society and business. There will also be a core of activities that will be common across all three groups.

It is important to appreciate that common activities will not necessarily translate into shared or complementary programmes. Therefore the multi-sectoral



# Summary points for the facilitator

response to HIV/AIDS is based on the following principles:

- Addresses HIV/AIDS as a development issue
- Considers the context of the epidemic
- Takes an integrated and cross-cutting approach to HIV/AIDS
- Involves all sectors
- Depends on effective leadership and co-ordination
- Builds on comparative advantages and existing strengths
- Means taking action at every level
- Means sharing responsibility
- Is based on working together for a common purpose and therefore thrives on finding new ways of working with different partners
- Depends on good communication
- Requires transparency and accountability
- Requires capacity building and resource mobilisation

- Is simply dynamic

### Mainstreaming gender into the multi-sectoral response

An understanding of the gender issues and dimensions of HIV/AIDS must be central to the analysis of causes and contributory factors.

It is vital that in developing and applying this multi-sectoral response, the concept of gender is included at every stage. Understanding gender issues and dimensions of HIV/AIDS must be central to the analysis of causes and contributory factors as well as to the planning and execution of responses, whether these are aimed at preventing transmission or mitigating the impacts of the disease.

Gender Mainstreaming calls for skills in gender-based understanding, analysis and planning; the capacity to collect and interpret sex-disaggregated data; a commitment by government to take action to achieve gender equality; and the availability of human, technical and financial resources.

Gender concerns have not been adequately addressed in existing multi-sectoral responses to HIV/AIDS, partly because there is a skills gap

in gender sensitisation and analysis among senior policy makers, middle level professionals and others involved in the design and implementation of these responses.

Gender Mainstreaming is missing in multi-sectoral responses due to lack of gender related skills, gender sensitisation and analysis for those involved in policy development and implementation.

- Building capacity for training in gender sensitisation and analysis
- Establishing system-wide processes in each sector to oversee programme development, implementation, monitoring and evaluation, taking into account women's and men's needs, interests and contributions
- Enhancing capacities for the collection, analysis and use of sex-disaggregated data.
- Gender analysts and decision makers need to factor in gender indicators in their preparation of policy guidelines. These indicators should be culturally appropriate.



- Policy makers must take into consideration the different impacts of messages on men and women, for example, the public message of promoting safer sex.
- Policies and programmes should attempt to reach vulnerable populations in a broad based way.
- Both short- and long-term gender sensitive strategies need to be developed from community to national level. The short-term strategies might focus on people's immediate needs such as information, support for home-based care and access to treatment for STIs. More long-term strategies need to address the underlying social and cultural structures that sustain gender inequality.

Examples of HIV/AIDS Issues and Responses by Sector (Refer to pages 64 – 76 of Gender Mainstreaming in HIV/AIDS: Taking a Multi-sectoral Approach)