



July 2011

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Dear valued partners, friends and supporters of AIDS&Mobility europe!

Welcome to the 12th and last Newsletter of the 2008-2011 AIDS&Mobility Europe Project. In this edition we bring you some preliminary results from the evaluation of the community group sessions conducted by our A&M mediators, more personal stories as well as brief overviews of some other important products and results of three years of A&M project work: the A&M Policy Recommendations and some examples of sustainability strategies implemented by the project partners around Europe. As always, you will also find articles about other interesting initiatives as well as references to further reading and upcoming conferences.

Don't forget that the A&M Master Toolkit contains everything you need to start your own transcultural mediator project and it will be available soon. One of its components, the updated and improved A&M Guidebook, now under the title "Let's talk about HIV: In our Language", is still being translated into the project's 15 languages. If you would like to receive the toolkit, please register your interest with Ana Lucia Cardoso at analucia.cardoso@eatg.org.

We hope that the past 12 editions of the A&M project newsletter have been useful to you. The A&M project team wishes you all the best for your future work on HIV prevention with migrants, mobile populations and ethnic minorities.

6th AIDS & Mobility Capacity Building Meeting held in Hanover

In May 2011, the A&M associated project partners came to Hanover for a final meeting to share their work, discuss their experiences and to get ready for the final project reports.



A big part of the meeting was taken up with a presentation and discussion of the analysis of community information session data. A&M Evaluation work package manager, the National Institute for Health,



Migration and Poverty (NIHMP) in Rome, presented the preliminary results of the statistical analyses and is now preparing the evaluation report. We have included some of the findings in the next article.

The group also updated the project's sustainability plan, and partners were pleased to see that the majority of the sustainability strategies planned until June 2011 had been implemented. Some of the main strategies are also listed in this newsletter.

Data Analysis and Evaluation

The preliminary statistical analysis of the questionnaires filled in by community information session participants tells us about some basic characteristics of the overall group of young migrants reached by the project in the six European sites:

- Half of the participants were male, half female, with a small proportion of transgender people (1%)
- 59% were under 25 years old, and a further 22% were under 35
- 66% were born in Europe, 17% in Asia and 14% in Africa
- 74% of those who answered the question identified as heterosexual, 12% as gay or bisexual, but 12% ticked the box "do not want to say", and 10 of respondents did not answer the question at all

It also gives us some insight into the success of promotion, knowledge and attitudes:

- 79% came to the session because another person had talked to them about it, either face to face or over the telephone, only the remaining 21% heard about it through some

form of advertising (13%) or the internet (8%)

- 50% of respondents believed that HIV can not be treated
- only 38% reported that they had used a condom the last time they had sex, but 70% said they would use a condom with a new partner
- only 44% said they would share their office with a person living with HIV, and only 20% ever had an HIV test themselves

This means that the project was successful in reaching young men and women, and that personal communication was the most successful method of promoting community group sessions. The data on knowledge, attitude and behaviour requires some more analysis, but it can be said that this group has limited knowledge in some areas, that condom use and HIV testing are not high and that attitudes towards people with HIV should be a focus for future work. Based on the feedback at the capacity building meeting, NIHMP will now further their analysis of the data for the final project report.

More Mediator Stories

Here are some more personal experiences from A&M Mediators, this time from Hanover:

Fode Mohamed Camara (29 years old)

"The AIDS & Mobility Europe project was a totally new experience for me. I am from Guinea originally and am mainly interested in this topic because of the situation in Africa, where people don't talk about it openly. I notice the same thing with Africans in Germany. I have already conducted more than 10 community information sessions with



African people, mostly in the apartments of friends and acquaintances. Sometimes I have divided the groups by gender because I noticed that men, but also women, are more open when they are among themselves, and ask different questions. The highlight of my community sessions is the part where I pull out a condom and ask the participants to put it on a wooden penis. At this moment they all suddenly fall silent and I sense some sort of tension. Then, most times there will be someone in the group who will dare to do it, and the tension dissolves. Participants will often start laughing and pick up the courage to handle the condoms. AIDS & Mobility has changed me more than I had thought at the beginning of the project. I myself can now talk about this topic with my compatriots much more openly and calmly. I also notice that I am perceived differently. Sometimes, people who I have never met before come to me for information. I am very glad to have done the AIDS & Mobility training and recommend it to others.”

Esma Köse (26yo)

“I was born in Germany and my parents are originally from Turkey. The topic of HIV and AIDS has always interested me. But so far I have not had an opportunity, and, as a Muslim woman, have not had the courage to deal with it openly. This topic is rather taboo in the Turkish community in Germany – ignorance and fear dominate people’s heads and hearts. It was a challenge for me to become committed to this topic. My relatives and friends asked me why I was getting involved in this particular area, because in their minds it was a disease that only affected homosexuals. When I explained to them that heterosexuals are also at risk of HIV and that the number of infected persons is large

and rising in both Germany and Turkey, their initial scepticism was replaced by interest and respect for my commitment. I conduct my A&M community information sessions mostly with women’s groups because female Turkish migrants are very interested in this topic. I choose women’s health and family planning as an entry point, which then leads me to talking about HIV. Many of the participating women have never before talked about this topic with members of their own community and in their own language. They ask a lot of questions, especially about protection.



Younger women and girls are much more interested than their mothers, and more open in dealing with these kinds of topics. Sometimes participants have told stories about people living with HIV among their friends and relatives. This is only possible because the participants now trust me as an A&M Mediator in my community. And it gives me a lot of confidence. Before I started with A&M, I could not imagine standing in front of a group and passing on information. Now I even really enjoy it. I hope that the project will continue and that we can develop as mediators.”

Larissa Rost (39yo)

In my home country Russia, HIV is a big problem and this is why I have always been interested in the topic. But I also know young people in Germany (mostly Russian



speakers), who have contracted the virus, some from among my own circles. In Russia, but also here in Germany, drug use is a big problem. This is why I thought it was very good that we discussed this context during the A&M training.



Although most people in my community in Germany have a good education, there is also much misinformation through home country media. The biggest challenge for me is to engender solidarity with those affected, because many have the attitude that their situation is their own fault. A lot of them subscribe to the view that the government should use harsh punishments and sanctions to make sure that HIV and drug use are prevented. Many have never thought about harm reduction and the approaches of the German drug addiction and AIDS services. This, then, becomes my task.

Many are sceptical at the beginning of community information sessions and ask me whether I work for a government agency. I then explain that I am involved in an NGO as a volunteer. Most of the time I also mention confidentially right at the start, in order to prevent distrust. With the help of the A&M project, I have learnt to - first of all - recognise my own

attitudes and prejudices, and to change them. The project has also helped me to enter into a dialogue with my community about the topic of HIV prevention. I see the A&M project as a great gain for myself and my compatriots living in Germany.”

The A&M Policy Recommendations

The leader of the A&M Policy Development work package, the International Organisation for Migration (IOM), has led the development of the A&M policy recommendations, a major product of our work over the three years. They are divided in to recommendations for EU member states and recommendations for the EU as a whole. Here is a short summary:

For the Member States:

1. Inclusion of migrant/ethnic minority communities and participatory/migrant-friendly approaches in HIV/AIDS Plans or Strategies
2. Culturally sensitive communication/awareness raising on HIV, sexual and reproductive health
3. Public funding and mainstreaming of mediator/peer to peer education approaches in health systems
4. Participatory approach by involving/capturing the views of (young) migrants and ethnic minorities to build public policy and programming, including prevention
5. Capacity building for organisations and healthcare professionals working with migrants, through training and coaching on cultural and communication aspects



For the EU:

6. Facilitation of a consultative mechanism for dialogue among Member States, comparative peer review and monitoring/evaluation of policies and programs (this should apply beyond HIV)

7. Political commitment and sustained action/funding fostering equity in HIV related policies and programs

Sustainability

The A&M associated partners have all taken steps to try and make the achievements of the project sustainable in their own context and according to their possibilities. Here are some examples:

- allocating funds for existing mediators to continue community information sessions
- using the A&M guide book “Let’s talk about HIV: In our language” in other projects
- training their own members as mediators
- coaching and supporting mediators
- conducting combined training on HIV and addiction
- further training supported by government funding
- transferring the the A&M concepts for use by another HIV organisation in the country, with activities in 3 other cities, funded by the health ministry
- making the guidebook publicly available in 5 languages
- combining with new partners and incorporating additional health issues such as TB
- integrating HIV topics into the training of professional health mediators

The European AIDS Treatment Group (EATG) will continue to support the A&M network and the project’s main products and documents will be available from AIDS Action Europe’s clearinghouse website at hivaidsclearinghouse.eu.

Quality Improvement with a focus on HIV prevention practice



IQ^{hiv} aims to promote the inclusion of quality improvement practices in HIV prevention activities in Europe. The initiative grew out of the international “Strengthening Quality Assurance in HIV/AIDS Prevention in Europe” conference on quality and HIV prevention held in Berlin in October 2008, organised by the German Federal Centre for Health Education (BZgA) and WHO/Europe and attended by more than 80 government, academic and civil society experts from 24 European countries.

The success of the conference, the first of its kind in Europe, led to an ongoing discussion and the launch of IQ^{hiv} in 2009.

The Initiative was jointly founded by a partnership of WHO/Europe, the German Federal Centre for Health Education (BZgA) and AIDS Action Europe. In late 2010 it received a project grant from the German Federal Ministry of Health (BMG), administered by WHO/Europe.



IQ^{hiv} has since consulted widely with stakeholders from government, academia and civil society to ensure that its work is relevant and useful. Several IQ^{hiv} “Roadshow” workshops have been held for HIV prevention project implementers, including at recent AIDS conferences in Tallinn and Hanover. The initiative is currently overseen by a core group of stakeholders, including representatives from each of the three founding partners.

IQ^{hiv} pursues its goals through adapting and disseminating practical quality improvement tools, through capacity building and technical assistance.

Quality Improvement Tools for HIV Prevention

The IQ^{hiv} initiative currently offers three quality improvement tools for HIV prevention. They have been adapted and/or translated from existing European quality improvement tools for health promotion interventions.

Succeed, originally developed in Sweden, is an easy-to-use self-assessment questionnaire for health promotion, including HIV projects.

Quality in Prevention (QIP) is also an existing tool, this time from German health promotion practice. It, too, has been translated and adapted to HIV prevention. It consists of a comprehensive, externally reviewed project documentation form. Trained external experts rate quality according to seven evidence-based dimensions using set standards and quality levels. They also provide specific recommendations for improvements.

Participatory Quality Development is a toolkit with a strong theory base. It focuses on target group involvement and participation in all parts of the project cycle. This tool had already been used in HIV prevention in Germany. It is a guided, web-based toolkit. IQ^{hiv} has translated the PQ web pages into English and they will be part of the IQ^{hiv} website.

IQ^{hiv} Website

The development of the IQ^{hiv} website is currently under way and a full range of information on activities, including access to the three tools, will be available by the end of August. Simply check www.ighiv.org now, bookmark the page and come back to see the full website next month.

Further Reading

Migration and Health: A Framework for 21st Century Policy-Making

Cathy Zimmerman, Ligia Kiss, Mazedda Hossain

PLoS Med 8(5): e1001034.

doi:10.1371/journal.pmed.1001034 – May 2011

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Available online at: <http://bit.ly/k0nFNU>

New HIV Journal in Turkish

(adapted from an email release by International HIV Partnerships)

If you speak Turkish, Be sure to check the April 2011 issue of HIV Tedavi Bülteni - Türkiye / HIV Treatment Bulletin - Turkey, a new Turkish-language information periodical posted at www.egehaum.com.

The 44-page Bulletin will be published three times a year and distributed in hard-copy and electronic versions to all HIV-



treating doctors and clinics in Turkey and, whenever possible, to Turkish-speaking doctors in the surrounding region.

It is a project of Ege University HIV/AIDS Practice and Research Centre (EGEHAUM, www.egehaum.com) and its director, Dr Deniz Gökengin, in collaboration with HIV i-Base (www.i-base.info) and International HIV Partnerships (IHIVP, www.ihivp.org).

The articles have not appeared in Turkish before. Most of the pieces appeared first as English-language articles in HIV i-Base's HIV Treatment Bulletin (www.i-base.info/htb/about/). The HTB – Turkey design and additional articles with local Turkish news and information were developed by EGEHAUM with assistance from local advocates.

The publishers hope this publication can serve as an effective resource for Turkish HIV stakeholders and an inspiration for similar projects in other countries and regions.

Why publish a Turkish-language HIV treatment and research periodical? Because it will improve the knowledge base of Turkish HIV health care providers and advocates and thus improve care for Turkish people living with HIV.

HIV infection and AIDS is a constantly changing and advancing field of medicine with most of the essential research and treatment developments reported in English. This poses challenges for physicians and treatment activists with a limited understanding of English, HIV treatment, diagnostics and research.

It is a well-established fact that the quality of care given to HIV patients is correlated

to the level of knowledge and experience of the physician. For physicians working with relatively low numbers of HIV patients, it is difficult to reach the required level of excellence in HIV care without additional support.

While Turkey has been considered a low prevalence country, HIV infection and AIDS are growing health problems with rapidly increasing rates of infection reported in recent years. Due to increase in rates of infection it is quite likely that these already fragile treatment situations will be severely impacted with larger patient loads in the near future. The situation is similar in Turkish-speaking areas in the wider region.

In this context, frequent updating of healthcare providers' knowledge of HIV management with information about treatment, diagnostics and research, in Turkish, is essential for better care for people living with HIV and related conditions in Turkey now and in the coming years.

[Assessment Survey on Community-based participatory HIV/AIDS prevention and sexual health promotion measures for ethnic minorities and migrant groups](#)

This report includes a description of the A&M partner AISC's work in Tallinn. It was written by Milena Mihaylova, Radostina Antonova (Part of the BORDERNETwork project's Work Package 8) and you can access it at

[http://www.aidsactioneurope.org/index.php?id=100&tx_windpublications_pi1\[publication\]=1969&cHash=9641feb416e3abfc7ceb903495f54d72](http://www.aidsactioneurope.org/index.php?id=100&tx_windpublications_pi1[publication]=1969&cHash=9641feb416e3abfc7ceb903495f54d72)



Upcoming Conferences and Events



The Future of European Prevention among MSM

This conference will take place in Stockholm, Sweden, on the 10th and 11th November 2011. Details at www.femp2011.eu

FACTS BEYOND FIGURES

Communi-Care for Migrants and Ethnic Minorities

4th Conference on Migrant and Ethnic Minority Health in Europe

Call for Abstracts Registration Form available on the Conference Website www.unibocconi.eu/mighealth2012, and sending abstracts to mighealth2012@unibocconi.it.

Contact us

Let us know about your work on HIV and migration, or any news stories or events you think our network of partners would be interested in.

You can contact us by email at:

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**Executive
Agency for
Health and
Consumers**

Co-funded by the European Union under the Programme of Community Action in the Field of Public Health 2003-2008/ Executive Agency for Health and Consumers.

Co-funded by the Portuguese High Commissioner for Health.