

Advocacy, policy and support on male sexualities

Training on sexual health for men with high risk behaviour

2nd - 5th April, 2007

PSI Myanmar

Facilitators' Workshop

Sunday, 1st April

Why work with 'MSM'

Why we should work with male-to-male sex and HIV prevention, care and support?

Because:

- **It is the right thing to do on humanitarian grounds.**
- **It is the right thing to do epidemiologically.**
- **It is the right thing to do from a public health perspective.**

Males who have sex with males (MSM) whether their self-identity is linked to their same sex behaviour or not, have:

- **The right to be free from violence and harassment;**
- **The right to be treated with dignity and respect;**
- **The right to be treated as full citizens in their country;**
- **The right to be free from HIV/AIDS;**

MSM who are already infected with HIV have the right to access appropriate care and treatment equally with everyone else, regardless of how the virus was transmitted to them.

Purpose of meeting

- **To engage representatives from the various MSM networks in a range of localities across the country towards a scaling up programme**
- **To enable them to explore their issues, concerns and needs and develop a strategy for addressing these**
- **To develop a sense of community**
- **To begin the process of community development and mobilising**
- **To identify potential key leaders and MSM programme management staff**
- **To identify key gaps in knowledge, understanding, and awareness**

Working Group Process

- **A process of dialogue, discussion, sharing of beliefs and ideas**
- **A facilitator to facilitate and moderate the discussions**
- **An agenda for the day**
- **A report-back to develop**
- **Technical support**

The role of the facilitator

- **To facilitate and guide the discussions - not to lead**
- **To suggest areas to discuss**
- **To manage the time-table for discussions**
- **To draw upon available technical expertise should discussions get “stuck”**
- **To moderate disputes and diverse opinions**
- **To insist on maintaining ground rules for discussions**
- **To empower and enable participants to share equally**
- **To recognise that each voice needs to be heard**

Do we need a reporter?

Effective learning activities

RESPECT

The learner needs to feel heard, honoured and respected as a person for more than what he knows or doesn't know; democratic social arrangements promote better, more human experiences.

IMMEDIACY

Taking something from a previous experience and relating it to something that will come after; the learner should be able to identify how he can use his knowledge and skills, and attitudes in the exercise of learning what is being taught.

EXPERIENCE

The learner gets to do something and can see how what he is learning has something to do with his own life experience; cooperative enterprise where people share their expertise.

What makes a learning experience good?

USEFULNESS

Making a difference, use information in decision-making, personally affected by the consequences of what is learned, working with real people dealing with problems, affects what I do.

DOING

Practical exposure, opportunity to practice procedures, did something practical and experienced the outcomes.

COMFORTABLENESS AND SAFETY

Comfortable and safe environment, confidentiality, easy exchange of information, non-threatening, no pretence, treated as an adult, allowed to share, good interactions between learners and facilitators, treated equally

DESIRE TO LEARN

Like what I learnt, freedom to choose what I learnt.

SHARING

Worked with others who are like me, worked with others with more experience, worked things out together.

EMPOWERED

Did something that made me feel proud, overcame challenging tasks, felt more able to make decisions, in control.

Ground rules - some ideas

- 1. All have an equal voice**
- 2. No shouting or disturbing others**
- 3. No verbal abuse**
- 4. Respect each other**
- 5. Confidentiality**
- 6. Openness**
- 7. Time-keeping**
- 8. No interrupting**
- 9. Others?**

All need to agree on these ground rules

Day 1: What are the issues?

We need to explore:

- **Who are we? What does MSM mean?**
- **What are we?**
- **What do we do?**
- **What shapes and effects our lives?**

We need to look at:

- **Socio-cultural frameworks that shape our lives**
- **Masculinities, femininities and gender performance**
Tha nge, Apone, Apwint
- **Sexual behaviours and practices: where, when, with whom, why?**
Multiple partners, regular partners, sexual acts
- **Emotional and psychological issues**
- **Poverty, education, employment, families, marriage, children**
- **Myths, beliefs on identities and sexual practices**
- **What we know, what we don't know**
- **Social environment**
- **Risks and vulnerabilities**
- **Stigma, discrimination, and social exclusion**

What we are exploring are the issues affecting our lives and well-being

- **Physical**
- **Emotional**
- **Psychological**
- **Social**

Develop a timetable for the discussion

Sexual health is a state of physical, emotional, mental and social well-being related to sexuality; it is not merely the absence of disease, dysfunction or infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.

World Health Organisation

Draft working definition, October 2002

Day 2: What are our needs?

Question:

What do we need to improve our well-being and sexual health?

Identifying our needs in relation to

- **Physical health**
- **Emotional health**
- **Psychological health**
- **Social health**

We need to explore:

- **Educating ourselves, our friends and our sexual partners**
- **Empowering ourselves**
- **Community building, development and mobilising**
- **Access to health services, both physical and psychological**
- **Poverty reduction**
- **Sexualities and sex education**
- **Safe, social spaces**
- **Wives, children, families**
- **Living with HIV/AIDS**
- **Death and dying**
- **Support and care**
- **Accessing non-identified MSM - reaching out**

What services do we need?

Day 3: How do we move forward?

Identifying ways to provide services that will improve our well-being that are practical and realisable

Principles of good practice

Most key stakeholders (international, national and local), including UNAIDS, based on their global experience, now recognise that for an effective, appropriate, and sustainable, sexual health programme that focuses on any marginalised and socially excluded populations, certain key indicators are required. These are:

Focused participatory interventions

Strategic focusing of participatory prevention programmes for MSM populations most at risk.

Ownership of the issue

Those most at risk will also need to acknowledge their own risk and own the issues involved.

Beneficiaries as service providers

For a sustainable programme on risk reduction, those most at risk must be directly involved in developing, implementing, and providing prevention services for their peers.

We will need to explore:

- **Safe spaces - DiCs**
- **Community-building strategies**
- **Who develops, who manages, who provides**
- **Methodologies**
- **What would impede?**
- **What would encourage**
- **Addressing psycho-sexual-social needs**
- **Advocacy and empowerment**
- **Creating an enabling environment**
- **Resources**
- **Scaling up coverage**
- **Reaching the unreached**

- **Treatment, price, maintenance**
- **Living with HIV - AIDS**
- **Non-STI issues and medical treatment**
- **Training, sensitisation**
- **Addressing social justice needs and rights abuse**
- **Sexual rights, health rights**
- **Building alliances and coalitions**