

BRIEFING

HIV Scotland - taking account of global needs, building international links

Global changes in the spread of HIV have a major impact here in Scotland, where strategic and practical approaches to HIV in Scotland must take account of the growing epidemic in Eastern Europe and of experience in sub-Saharan Africa.

In the late 1990s, Scottish agencies developed partnerships to share HIV prevention experience of working with drug users and gay men in Eastern Europe.

Waverley Care Solas developed in 2002 with the International HIV Alliance a strategic plan for the support of people with HIV in the three Ukrainian cities of Kiev, Odessa and Poltava.

Action focused on support, safer sex information, access to methadone substitute and needle exchange services. Training and building organisational capacity together with use of the arts and counselling services added value to the approach.

Senior health and prison staff from Russia's Oblast region visited Edinburgh, interested in planning, policy, training and hospital, hospice, sexual health and drug problem services. Gay Men's Health Edinburgh went on to develop work in Oblast and in Moscow.

Long-term benefits in Russia and Ukraine include:

- ◆ Gay men's NGO in Ekaterinburg and Moscow
- ◆ HIV Resource Centre for the Oblast region

- ◆ Needle-exchanges
- ◆ Policy and planning structures around HIV and related topics
- ◆ Long-term sustainability of the Ukraine Network of People Living with HIV

With a different focus, HIV Scotland's African and Minority Ethnic project aims to link together HIV agencies in Scotland which have formed constructive partnerships with, among others, Zambia and Malawi.



Initiatives include:

- ◆ Zambia Lothian HIV and AIDS Partnership - improving access to ARVs and building local NGO capacity with NHS Lothian as lead agency.
- ◆ Church of Scotland HIV/AIDS Project - raising funds for work in Africa, India, Southeast Asia, and related Scottish activities, breaking the silence on HIV.
- ◆ ImpactAIDS - campaigning for improved access and delivery of AIDS treatment in resource-poor countries through community-led and low-tech solutions.

Finally, there is growing concern that the UK's positive development policies towards HIV/AIDS internationally may be insufficiently reflected in policies and provision for refugees within the UK.

Therefore, HIV Scotland has teamed up with Paisley University to research the health and in particular the HIV-care needs of Scotland's growing refugee community, who are mostly from the Sudan, Zimbabwe and Iraq.

The perceptions and information needs of local healthcare workers will be explored at the same time.

The benefits of international exchange and learning around a defined health issue are many. They include:

- ◆ Promoting international solidarity, shared learning and culturally appropriate services
- ◆ Raising awareness both of the global epidemic and rising HIV rates in Scotland
- ◆ Attracting broad-based political leadership
- ◆ Linking international development with HIV strategies and actions
- ◆ Fostering partnerships between government and NGOs

Further information is available from HIV Scotland. Tel: 0131 558 3713 or visit <http://www.hivscotland.com>

Looking both ways ...

During the week of 19 - 26 June, over 7,000 people from civil society - individuals, communities, NGOs, faith groups - from over 100 countries are expected to attend the Gathering and Civicus World Assembly in Glasgow. We all have much to learn from each other.

The health and well-being of its citizens is a key building block of a thriving society. Our vision of a healthy society is one where opportunities for a healthy life are considered as a human right; where communities feel that they matter and have the confidence to express their own needs and participate in healthy solutions; and where there is commitment by government, voluntary and community organisations and local people to work together in the pursuit of health for all.

As one of Scotland's intermediary bodies, Voluntary Health Scotland has tried to look both ways in this special Briefing. By highlighting health and development issues that Scotland and countries across the world are tackling and by sharing solutions to problems, we are both exchanging experiences of what works and what the challenges are, and forging sustainable practice and personal links that can overcome language, geography, distance and faith.

We wish participants in the Gathering and Civicus a happy and healthy week and look forward to meeting some delegates from overseas at the Learning Exchange which VHS is hosting on Friday 23 June.

www.vhscotland.org.uk
0131 557 6845

Helen Tyrrell and the VHS team

**The Gathering: Scotland's
Voluntary Sector Fair.**
19th - 21st June, SECC



Assessing needs at home and abroad through Participatory Appraisal

Participatory Appraisal is an interactive way of working with members of a community to involve them in identifying and planning positive change.

A development of Rapid Rural Appraisal (RRA), it was widely used by international aid agencies working in developing countries in the 1980s and 90s and in the 1990s was also used in the UK.

Many of the methodologies used are visual, which means that levels of literacy are of minimal importance in the process.

I first encountered the use of Participatory Appraisal in a small rural village in East Africa where local people sitting on small three-legged stools under the shade of an acacia tree were asked to develop 'chapatti' maps of the village on the ground in front of them by putting things that were most important at the centre of a circle and things that were less important further away.

I remember the heated debate about the role of the District Commissioner and the pebble that represented his august presence being moved closer and further away within the dust circle on the ground, as participants discussed his value to the village.

The person keenest to see him near the centre turned out to be his cousin but fellow villagers did not feel that the DC served them well and he ended up as a marginal figure in the final map, with water and cooking bananas being much more central to village life.

A few months later but thousands of miles away I was working in a

community centre in rain-soaked Scotland, carrying out a similar exercise with



stakeholders in a small community organisation, with flipchart and post-it notes.

People were putting things most helpful and

influential at the centre of a circle e.g. again, the local councillor turned out to be less important than local community activists and the community centre where the meeting was happening.

These parallel stories illustrate that no matter what the community or organisation the accessibility of participatory appraisal methodologies means that they are easily applied within any group or gathering.

The interactive nature of the methods used creates an equality of participation and often the discussion and debate will create a more meaningful illustration of reality than more conventional means.

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For further information the Oxfam website has information on 'Participatory Practitioners for Change'

<http://www.oxfamgb.org/ukpp/who/ppfc.htm>

and the use of participative tools including Participatory Appraisal

http://www.oxfamgb.org/ukpp/sid/browse_s_participation_tools.htm

Investing in health for development in Europe

The World Health Organisation (WHO)'s European Region consists of 52 member states and stretches from Greenland in the north and the Mediterranean in the south to the Pacific shores of the Russian Federation.

The European programme of WHO therefore concentrates both on the problems associated with industrial and post-industrial societies and on those faced by the emerging democracies of central and eastern Europe and the former USSR.

Nearly half of the 900 million people in the Region inhabit states with 5 million or fewer people - Scotland is one of these.

The links between socio-economic development and health status are well established.

While economic performance and, with it, health, has improved generally across the Region, serious health inequalities remain in most states, not least in Scotland, where there is a nearly 10-year differential in male life expectancy across the country.



The WHO European Office for Investment for Health and Development (EOIHD) was set up in Venice in 2003, in order to provide an evidence-based, systematic and accountable approach to taking the social and economic determinants of health into national development strategies.

The Office both helps Member States to increase their capacity to invest in health improvement and monitors the policy implications of research findings on the social and economic determinants of health.

Last year, NHS Health Scotland commissioned and funded a study, with the help of EOIHD - *Closing the health gap: an international perspective*.

This is an analysis of the policies of 13 western European member states in contributing to reduction in health inequalities.

And again last year, Dr Erio Ziglio, Director of EOIHD, addressed the Healthy Scotland Convention 4 in Glasgow.

He advocated promotion of population health, where equity and sustainability are central components of social and economic development.

Erio advised taking an asset-based approach to health improvement, with national investment biased towards the promotion of health in communities.

National networks such as Voluntary Health Scotland and CHEX (the Community Health Exchange) are committed to partnering government and the NHS in Scotland in building social capital in communities and supporting the role of the social economy and volunteering as a sound approach to health improvement and national development.

We believe that a vital partnership with communities and the voluntary sector works particularly well in addressing health inequalities in Europe's many small countries.

The World Health Organization European Office for Investment for Health and Development is at: <http://www.euro.who.int/ihd>

Closing the health gap: an international perspective is at: <http://www.euro.who.int/Document/E87934.pdf>

VHS can make available a copy of Erio Ziglio's presentation.



Scotland maintains learning links with international health work

The Institute for International Health and Development at Queen Margaret University College, Edinburgh, focuses on education and research in health and social development in poor countries and also among disadvantaged and marginalised populations in Scotland and the UK.

The Institute offers three Master's programmes in international health, population and reproductive health and social health and development, and other post-graduate certificate and short course programmes.

The Institute has links through former students and research collaborators in over twenty nations, spanning Eastern Europe, Latin America, sub-Saharan Africa and South Asia.

The approach of IIHD is characterised by an emphasis on social and organisational development issues within the process of health systems reform and development.

Working with a wide range of partner institutions and agencies - international and local - IIHD seeks to promote the study of key issues impacting international health



policy and practice. IHD has particular strengths in the fields of healthcare, human resource development, primary care & family health, women's health, emergency assistance and support to post-conflict societies.

The Institute has particularly strong links with non governmental organisations both in Scotland and overseas. For example, in Malawi, former students work in the Malawi Business Consortium against HIV/AIDS, and the Malawi women's anti-AIDS coalition.

In Sri Lanka, former students and research associates work with SHADE, an organisation supporting psycho-social wellbeing of people affected by conflict.

There are also links with the Mangrove, a networking organisation that links multiple NGOs working in conflict-affected areas, and with an NGO supporting vocational skills training for disabled people.

For further information, please see QMUC's website: www.qmuc.ac.uk/iidh and request a copy of a DVD about the work of the Institute from Lynne Fraser: lfraser@qmuc.ac.uk

Learning Exchange events at Civicus

Voluntary Health Scotland is hosting a learning exchange event - *"The Voluntary and Community Sector - Improving Health and Addressing Health Inequalities in Scotland"* on Friday 23rd June from 1pm to 5pm.

This Learning Exchange will take place in the St. Francis Centre which is located in the Gorbals area of Glasgow.

It will focus on the breadth of community and voluntary sector health improvement work in Scotland.

There will be case studies from three local organisations and an interactive session.



CHEX is hosting a learning exchange event *"Community Health - From Practice to Policy"* on Friday 23rd June from 1pm to 5pm at the Reach Community Health Project centre in the Govanhill area of Glasgow.

The Learning Exchange will provide an opportunity for delegates to discuss with CHEX Network organisations the use of participative methods for engaging local people in the process of community development to address health inequalities and social justice.

This will involve an interactive session with three of CHEX Network members.

Scottish and international health events

- ◆ 2nd - 8th July: Alzheimer's Awareness Week
- ◆ 7th - 13th August: Sexual Health Week
- ◆ 16th - 23rd September: Children's Hospice Week
- ◆ 16th - 23rd September: National Eczema Week
- ◆ 1st October: International Day of Older Persons
- ◆ 1st - 31st October: Breast Cancer Awareness Month
- ◆ 10th October: World Mental Health Day

Mercy Corps Scotland and health work

Mercy Corps' relief and development projects often include health interventions.

A healthy society lessens the need for repeated relief operations, and contributes to a more vital civic sector and more sustainable development.

We promote interventions where community members are key actors for health improvements, emphasising prevention and behavioural change, and testing out small-scale locally relevant interventions.

Our four key areas of health interventions are:

- ◆ Maternal, newborn and child health (including nutrition).
- ◆ Infectious diseases, including HIV/AIDs, tuberculosis and soon malaria.
- ◆ Emergency health, improving access to and use of services.
- ◆ Water, hygiene and sanitation.



We strive always to address the holistic needs of the people by working in an integrated way with other development or relief efforts.

For example, we address the HIV/AIDS epidemic within the broader context of other essential interventions, including programmes for public health, water, nutrition, shelter, psychosocial well-being, education, a vibrant civil society and a robust economic environment.

Our maternal and child health programmes address the same infrastructure needs: our

Meubolah initiative in post-Tsunami Indonesia is supporting the recovery of midwifery services and promoting breast-feeding, while we are carrying out a nutrition education programme in Tajikistan.

Mercy Corps works in over 30 countries, with health programmes in over a dozen of these.

Our Edinburgh office has raised funds for and managed many health projects, including:

- ◆ Guatemala (through DFID): Improving healthcare for indigenous people
- ◆ Indonesia (Irish Aid): Meulaboh midwives pilot programme
- ◆ Pakistan (EC): TB case detection in Baluchistan and Sindh
- ◆ Pakistan (post-earthquake) (DFID): Critical primary healthcare support
- ◆ Tajikistan (ECHO): Upper Rasht Valley community water project
- ◆ Uzbekistan (DFID): HIV/AIDS awareness & prevention in migrant centres Uzbekistan (DFID): Afghan Women's Health Forum and Reproductive Health Training

Mercy Corps Scotland has just received word of funding from the Executive's International Development Fund for improving water and sanitation systems in Zimbabwe.

Cathy Ratcliff, Mercy Corps Scotland

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Sense Scotland forges overseas links

Sense Scotland is a major provider of services in Scotland for people affected by deaf-blindness or sensory impairment, learning disability or physical disability.

The charity is a leader in the field of communication and innovative services for people who are marginalised because of challenging behaviour and takes a lead in developing policies for people with complex support needs.

Sense Scotland maintains extensive international links through its work with Sense International and Deafblind International. In September 2004, Sense Scotland hosted Sense International's Professional Development Programme, when six overseas visitors came to Scotland for a series of seminars and practice exchanges.

Some of this was specifically health-related but much more was gained both by Sense Scotland and international colleagues through networking and the exchange of ways of doing quite ordinary things and sharing different perspectives.

Participants said: "The best thing that we are taking from this is the reassurance that we are the same in many ways...and it's been great."

Sense Scotland has also developed specific links with practitioners in India, Croatia and Romania and engaged in several collaborative European projects, from one involving joint training on communication strategies to an intensive arts project that resulted in a drama presentation by deaf-blind people.

Ongoing work is taking place with Scandinavian colleagues around health concerns raised by individuals with Congenital Rubella Syndrome and sex education work is

(continued overleaf)

From Scotland to Malawi - a healthy partnership

The Scottish Executive's pledge to spend £3 million a year on aid to the country of Malawi is a reminder of the links between Scotland and Malawi which go back to 1859, when Scottish explorer David Livingston arrived in the then Nyasland.

Hastings Kamuzu Banda, Malawi's autocratic leader for three decades, qualified as a doctor in Scotland in the late 1950s.

Today, life expectancy for the 12.6m Malawians is 40 years and maternal mortality has risen to above 1,800 deaths per 100,000, making it the third highest rate in the world.

Tens of thousands die of AIDS every year. Eleven percent of the one million with HIV/AIDS in Malawi are children.

A year ago, First Minister Jack McConnell visited Malawi and a recent visit by Patricia Ferguson, Scotland's minister with responsibility for international development, has highlighted where progress is being made with input from Scotland.

- ◆ Scottish International Relief is running Mary's Meals programme, providing thousands of children a day with a free school meal which might be their only meal for the day
- ◆ Scottish medical staff are giving up their annual holidays to work in Malawi
- ◆ In the last year these doctors and midwives have trained 150 Malawi nurses and midwives in lifesaving techniques - crucial for improving one of the world's worst maternal and neo-natal death rates.

Malawi occupies a key place in the

Scottish Executive's International Development Policy, which lays out the commitment that Scotland makes to developing countries.

The Policy and its associated International Development Fund includes commitment to strengthening the capacity of Scottish NGOs working overseas.

At the same time the Policy focuses on raising awareness of international development issues with the public, especially children, in Scotland.

The Executive recently commissioned a health needs assessment of Malawi.

As a result areas for Scottish Malawian health co-operation now include:

- ◆ Training for health workers, especially health promotion personnel
- ◆ Clinical support
- ◆ Clinical supplies and equipment, including simple items such as gloves,
- ◆ Maternal health support, including curriculum development in evidenced-based obstetric practices, improving the profile of the midwife; supporting exchange visits for midwives, obstetricians
- ◆ Support for teaching at undergraduate and post graduate level at the College of Medicine
- ◆ Support for the HIV/ AIDS treatment and prevention programme
- ◆ Human resources and training
- ◆ Supporting maintenance of equipment, especially obstetric equipment

For further information, see: *Into Africa - renewing a friendship with Malawi* - Holyrood Magazine 5 June 2006.

Scottish Executive International Development, *Report of health sector visit to Malawi 2005* - Dr E Grant, NHS Lothian or at: <http://www.scotland.gov.uk/Resource/Doc/54357/0013123.pdf>

Scottish Executive International Development - <http://www.scotland.gov.uk/Topics/Government/International-Relations/internationaldevelopment/internationaldevelopment>

Sense Scotland forges overseas links - cont.

happening with Spanish colleagues and families.

Sense Scotland disseminates the results of these very focused initiatives widely amongst colleagues throughout the world.

They believe that there is a very great deal to be learnt from international collaborations, sharing experiences that go beyond barriers of language and culture.

If you would like to know more about any of Sense Scotland's work, visit <http://www.sensescotland.org.uk> or phone (0141) 429 0294.

Sense International is at <http://www.senseinternational.org.uk>

Deafblind International is at <http://www.deafblindinternational.org>

