

EQUAL RESPONSIBILITIES IN CAREGIVING IN HIV/AIDS

MAZAL RENFORD

In the 1970s and '80s, women were beginning to take their first steps forward toward attaining equality. Those achievements have been eroded, however, as a consequence of the HIV/AIDS epidemic, and women are reverting to the roles of caregivers or receivers of care. According to the WHO (World Health Organization), one of the consequences of HIV infection is violence against women. Women often lack the power to insist on safe and responsible sexual practices, unaware of their human rights and not realizing the choice lies in their hands. The consequences of HIV/AIDS reach beyond the women's health to affect their roles as mothers, caregivers, and contributors to the economic support of their families.

POLICY CHANGES – A NECESSARY STEP

Violence against women, and other infringements of human rights, still represent a massive constraint on women's capacity to share responsibilities. The equal sharing of responsibilities between women and men can only be attained if and when policies and programs address the structural causes of that inequality and focus on **empowering women and girls**, both socially and economically. Indeed, social protection must be recognized as a key element of social development policy, in supporting women of all ages and in all households. Adequate mechanisms can protect the most vulnerable, raise people above the poverty line, and give them the opportunity to support themselves and cope with their problems.

STRATEGIES FOR EMPOWERMENT

Empowerment strategies must include creating jobs for women and facilitating an enabling environment for entrepreneurship development. Civil society must be strengthened through community mobilization, supported by educational campaigns that will reduce stigma and discrimination, in order to raise both social support and economic resources.

In the present situation of financial downturn, the impact of gender inequality on women must be taken into consideration, in order to identify policy responses and mechanisms for safeguarding women, particularly in their roles as caregivers. Social policies and mechanisms are ever more urgently needed to address women's vulnerability in the current climate, especially since women have traditionally lagged behind in terms of training, education and information.

WORKING HARD TO FIND SOLUTIONS

Having reviewed some of the problems, what can be done to give women a voice? What practical steps should be used to ensure the equal sharing of responsibilities between women

MCTC Workshop on Care and Support of Children Affected by HIV/AIDS, in cooperation with UNICEF Regional Office, West and Central Africa, 2009



and men? MASHAV, Israel's Agency for International Development Cooperation, and its professional extension, the Golda Meir Mount Carmel International Training Center (MCTC), have been working to answer that very question.

MASHAV promotes the equal sharing of responsibilities between women and men as an integral part of its training programs. At MCTC, emphasis is placed on building women's capacity through access to education, information, finance and health services. Training activities are regularly conducted on socio-economic development, with gender as a cross-cutting issue, reaching tens of thousands of women and men in the developing world. The beneficiaries of these programs are professionals from all over the world, working for the achievement of the Millennium Development Goals, specifically, eradicating poverty and promoting gender equality.

MCTC, a voice in the arena of women's empowerment, offers regular trainings on topics covering socio-economic issues¹. Participants in these activities, men and women alike, return to their communities, equipped with relevant

projects to implement and with the feeling of equality and shared responsibilities. Such people make a difference, creating a multiplier effect and eventually a critical mass which can influence the status quo.

TRAINING IN THE CONTEXT OF HIV/AIDS

In the current situation, the feminization of HIV/AIDS infection is increasing (60% of the adults living with HIV/AIDS in the sub-Saharan countries are women), and the need for caregiving of the sick and their dependents has reached enormous proportions. To address these dire circumstances, MCTC/MASHAV offers activities to train professionals on topics such as, *"Education for Sexual Health and Prevention of AIDS Among Adolescents"* and *"Care and Support of Children Affected by HIV/AIDS,"* the latter in cooperation with the UNICEF, Regional Office for West and Central Africa [See BOX].

1. Examples include: 'Women's Leadership', 'Support Systems for Women Entrepreneurs', 'Women's Vocational Training and Development of Entrepreneurial Skills', to 'The Use of Media for Social Change', 'Access of Women to Microcredit and Microenterprise for Women', 'Capacity Building of Women's Organizations - Strengthening Civil Society', 'Developing Income Generating Activities for Women in Rural Areas, through Rural Tourism'.



Getting acquainted
– group activity during
the workshop

These training programs are designed for male and female participants, coming from different perspectives, to understand that HIV/AIDS must be seen as a holistic issue from the contexts of health, education, welfare and with equal sharing of responsibility between women and men. The programs offer effective and innovative tools for HIV prevention and for strengthening the self-esteem, health and awareness of youth (especially females), thus setting the foundations for their own personal empowerment.

We fully realize the special threat that HIV/AIDS poses to women. Combating this threat involves much more than improving women's health conditions. For as long

as women are discriminated against and cultural and legal barriers obstruct their decision-making process and choices, women will remain vulnerable. The linkages between women's status in society and the increased demands made on their time as a result of the HIV epidemic have to be recognized and overcome. From our experience, we have also learned the importance of incorporating men into all programs dealing with social change and economic development. This enables them to enter into an ongoing process of understanding their role in the equal sharing of responsibility and becoming agents of change in their own communities.



"HIV/AIDS MUST BE SEEN AS A HOLISTIC ISSUE FROM THE CONTEXTS OF HEALTH, EDUCATION, AND WELFARE, AND WITH EQUAL SHARING OF RESPONSIBILITY BETWEEN WOMEN AND MEN"



**CARE AND SUPPORT OF CHILDREN AFFECTED BY HIV/AIDS
A TRAINING WORKSHOP IN COOPERATION WITH
UNICEF – REGIONAL OFFICE, WEST AND CENTRAL AFRICA**

MICHEL KAHN & YVONNE LIPMAN

The topic of *Psycho-Social Care for AIDS Orphans* was first offered by the Golda Meir Mount Carmel International Training Center (MCTC) in 2007. As a result of the enthusiasm shown by the participants who studied in that workshop, similar programs reflecting the developing attitude to the topic have been conducted every year since then, in cooperation with UNICEF's Regional Office for West and Central Africa.

Research shows that HIV/AIDS orphans lack psycho-social care and are not developing coping skills needed to deal with the loss and stigma with which they are forced to live. Although there are not many AIDS orphans in Israel, it was felt that because of our extensive experience in dealing with trauma, we would be able to provide the participants with tools which could be adapted for use with children affected by HIV/AIDS. The workshop program that was developed emphasized aspects of coping with illness and loss, stigma, post-traumatic syndrome, psycho-social care, team work, planning projects and alternative ways of dealing with stress and trauma.

During the planning for this workshop, consultations were made with the lecturers who took part in previous activities, and the program was adapted in advance. Analyzing the evaluations from the previous year helped us shape the program and emphasize the most relevant aspects of these topics.

The topic of *"Care and Support of Children Affected by HIV/AIDS"* is emotionally charged; therefore, it was important to create a cohesive and supportive group. To facilitate this, games were used in a *"Getting Acquainted"* session, which generated laughter and led to success in breaking the ice.

The workshop *“Using the Mask as a Liberating Tool”* continued with some acquaintance-session techniques using songs and theatre. The workshop, which refers to society’s stigmatization of the HIV/AIDS victims, was quite inspirational, and the psycho-social care concept was very enlightening, especially when the lecturer spoke about using the various art forms as a means for providing such care. Using mainly low and no-cost materials, the participants experienced diverse therapy treatments such as music, art, bibliotherapy, storytelling, puppets, play therapy, and animal therapy. The participants found these methods to be very informative and helpful, and felt that they had acquired new skills for helping traumatized children, including those affected by AIDS, as well as their caregivers.

The sessions on *“Dealing with Loss”* presented the participants with an invaluable opportunity to come to terms with often unexpressed mourning for their own dear ones. They mentioned that it was essential to do this in order to help others going through the same process. Similarly the program for the prevention of AIDS among adolescents, *“Cultural Perspectives on Health, Illness and AIDS,”* was presented in a highly participatory manner and showed the participants some alternative ways for caregivers and children affected by AIDS to express their feelings.

The group also went out on practical observation visits to medical centers, a children’s hospital and a baby clinic. At the end of the program, the participants wrote proposals for projects, which they could implement individually or in groups, according to their countries of origin, and in which they themselves would be actively involved. One such example was a joint project, proposed and planned to be carried out between the participants from Senegal and Côte d’Ivoire, called *“The West African Center to Improve the Quality of Care and Support for Children Affected by HIV/AIDS.”* The project will collect and synchronize all the information available on AIDS in those countries, as well as evaluate programs and follow up on their effectiveness. MCTC offers a listening ear to its participants and follow-up advice with the projects, even after the participants have returned to their home country. MASHAV and MCTC are striving to raise the standard of living for women and children living with or caring for someone with HIV/AIDS. The most vulnerable in our society, those without a voice, are precisely the ones for which we need to work the hardest.