Report

Training Workshop on Legal and Ethical Issues Related to HIV/AIDS

Moscow, Russia
19th-29th October 1998
This workshop was the first of its type organised by UNAIDS, specifically aimed at lawyers in Eastern Europe and the Commonwealth of Independent States (EE/CIS). The workshop is the initial step in developing an ongoing programme on HIV-related legal, ethical and human rights issues in the region. This report analyses both the practical aspects and the outcomes of the workshop. Suggestions are included for more effective approaches for future training with lawyers in this and other regions.

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1. Background

Up until the mid-1990s it was considered that most countries in EE/CIS showed an extremely low level of HIV infection. That pattern began to change in 1995 with several of the countries in the region, in particular the Ukraine, the Russian Federation, Belarus, Moldova and Kazakhstan, showing substantial growth in HIV infection rates.

Estimated infections for the whole of EE/CIS up until 1994 were approximately 30,000 individuals out of a total population of 450 million people. That estimate had changed dramatically by 1998, being some 190,000 infections. Evidence has emerged that there is a high level of infection amongst injecting drug users (IDU) which particularly affects youth, who are thus a highly vulnerable group. The experience of other countries, that HIV does not remain confined to a particular group, is likely to be reflected in EE/CIS, with HIV infection becoming more widespread amongst the general population. This is likely to be compounded by the general political and economic uncertainty in the region.
Experience in other countries and regions has confirmed that an effective response to the spread of HIV to the spread of must address legal, ethical and human rights issues, in particular as they relate to those groups most vulnerable to HIV infection and the impact of AIDS.

Conversely, laws and policies which seek to punish individuals and are inconsistent with the protection of human rights have been shown to have a major negative effect on prevention and care initiatives.

2. Objective

The objective of this initiative is to establish a regional technical resource network of lawyers trained in HIV/AIDS legal and ethical issues. These people may be involved as resource persons in further training on legal and ethical issues, and in the lobbying and promotion of appropriate legislation and policies in relation to HIV/STD prevention, treatment and care.

3. Aims of the workshop

The aims of the workshop were to:

1. Identify Russian speaking, legally qualified individuals, suited to supporting strategic planning initiatives and the promotion of appropriate HIV-related legislation and policies that respect human rights by governments and the community.
2. Develop a group of lawyers ready and able to train others, in particular through the introduction of the subject into the curricula of law departments and justice training schools at graduate and post-graduate levels.
3. Develop a regional technical resource network of lawyers able to develop and promote appropriate legislation in relation to HIV/AIDS prevention and care in their particular regions, in consultation with government and affected communities.

4. Selection of Participants

Chairpersons of the UN Theme Groups on HIV/AIDS of Russian speaking countries in the region were asked to identify relevant departments of law in universities and institutes of higher education, legal and bar associations, and key personnel at the Ministries of Justice and Health. Invitations were then extended to the above organisations requesting they identify suitable candidates (Russian speaking, a degree in law, and ideally five years minimum experience in private practice and/or post graduate teaching in law, work experience with disadvantaged and minority groups.) Some thirty candidates were identified. Although gender was not a formal consideration in the selection criteria, 43% (12 participants) were women. Two participants were aged less than 24 years. Although none of the participants was known to be HIV positive, the perspective of people living with HIV/AIDS was provided through the presentations of HIV positive representatives of HIV community organisations twice during the workshop.
It was noted that the selection process was successful in identifying a core group of lawyers who could form a regional technical resource network, but was weaker in identifying lawyers who could facilitate the introduction of the subject into national educational institutions. This reflected the difficulty in selecting participants for three different purposes.

5. Key Presenters and Facilitators

Those taking a key role in the presentation and facilitation of the workshop were:

Dr Lev Khodakevich, Team Leader, Europe Desk, Department of Country Planning and Programme Support, UNAIDS;
Mr Arek Majszyk, UNAIDS Representative to the Russian Federation;
Mr Yuri Kobyshcha, Inter-Country Technical Adviser;
Ms. Miriam Maluwa, Human Rights Adviser, Department of Policy, Strategy and Research, UNAIDS;
Mr David Patterson, Human Rights Adviser, Department of Policy, Strategy and Research, UNAIDS;
Mr Kevin Ryan, consultant to UNAIDS.

Key note speeches were made at the opening of the workshop by Mr Gennady Batanov, State Secretary, First Deputy Minister of Justice, Russian Federation and Dr Mikhail Narkevich, Head of the Division of HIV/AIDS Prevention, Ministry of Health, Russian Federation.

Presentations were also made by experts from the Russian Scientific and Methodological HIV/AIDS Centre, UNICEF, Medecins sans Frontières (MSF Holland), AIDS Infoshare, and the Russian Names Fund.

6. Agenda

The workshop proceeded in four distinct but inter-related stages.

The first stage was concerned with a briefing on the medical, epidemiological, social and economic aspects of the HIV epidemic. As the level of knowledge was unclear, the agenda was structured so that considerable time was spent initially dealing with basic issues relating to transmission, nature of the virus, methods of testing, treatment and care. Next followed prevention strategies, the importance of public opinion, the role of the media, the importance of the involvement of community groups and problems relating to vulnerable groups such as IDU, commercial sex workers (CSW), men who have sex with men (MSM), prisoners, migrants and the military. This stage concluded with a consideration of UN systems and the role of UNAIDS.

The second stage of the workshop addressed the importance of community involvement in HIV/AIDS prevention. This included presentations by various representatives from a number of community groups which was then followed by site visits. In particular, the participation of people living with HIV/AIDS was actively
sought, and presentations were given by people living with HIV/AIDS on two separate occasions during the workshop.

The third stage of the workshop addressed HIV-related law, ethics and human rights. Emphasis was given to often conflicting approaches to legislation and its application, with particular consideration to the nature and effect of punitive, protective and instrumental legislation and policies. A key reference and core text was the joint UNAIDS/Office of the High Commissioner for Human Rights publication *HIV/AIDS and Human Rights: International Guidelines*. The publication was available at the workshop in Russian and English.

Presentations highlighted specific key legal and policy topics such as anti-discrimination laws, criminal law, public health legislation and codes of practice, the regulation of good services and the regulation and often counter productive restriction of provision of information.

Early presentations emphasised the importance of lawyers, and in particular legislators, appreciating the importance of community involvement in the legislative process to ensure practical and applicable laws. This was further highlighted by involving a number of community representatives who gave examples of how laws and their application could be counter productive in the prevention of the spread of HIV and care of those living with HIV/AIDS. In particular, the focus was on issues relating to vulnerable groups, the provision of information, education, testing and confidentiality. At the same time, positive examples were given of approaches which had been shown to facilitate HIV/AIDS prevention and care in other countries and regions.

The workshop had the following key themes:

- Inappropriate laws and policies could have a negative effect on prevention and care efforts. Conversely, appropriate laws and policies that respect human rights can reduce the spread of HIV infection and the impact of AIDS.

- Sensitisation of the participants to the impact of prejudice, and the importance of a non-judgemental approach to prevention and care.

- Health legislation and policies do not necessarily conflict with, but rather should support, the protection of individual human rights.

- Emphasis on the involvement of affected communities in the creation and practical implementation of laws and policies.

- Appreciation of the social dimension of working with people living with HIV/AIDS and those directly affected.

- The active involvement of the participants in the workshop and subsequently in an individual commitment to prevention and care, rather than as mere observers.
• The need for creativity in considering preferred approaches to legislation and their implementation, taking into account the local environment.

The fourth stage of the workshop focused on follow-up activities. Emphasis was placed throughout the workshop on ensuring an understanding of the issues, encouraging participants to put forward their own personal approaches and differing views, and to challenge the views of others. The experience of lawyers providing legal support services and care in other countries was considered. It was emphasised that such initiatives were initially often undertaken on an individual basis, did not rely on substantial funding, and aimed to develop core legal teams who worked with local community groups in their particular regional area.

Each of the participants was asked to prepare a ‘framework for action on legal issues at national level’ - an individual plan of action. These plans were developed during the workshop, with each of the participants being asked to make a presentation on the final day. Participants had two differing approaches. Either they developed national plans (which tended to be general in nature), or they adopted a more specific approach in which they identified the steps they proposed to personally to take in their own institutions and communities.

The concept of such plans proved initially difficult to the participants. However, the exercise resulted in a number of excellent presentations and practical proposals. Many of these do not depend on outside support and/or funding. The proposals provide possible plans for future activities and an additional opportunity to evaluate the extent to which the individual participants had understood and could apply the concepts and material presented in during the workshop to the local situation. It must be acknowledged of course that they were developed based on the individual participant’s generally limited understanding of the state of the epidemic in their own country. It was stressed during the workshop that on their return the participants should make contact with others already working in the field to better understand the nature of the epidemic in their countries and the steps already being taken to address it.

The plans were wide-ranging in their approach, and also identified ways in which they could be implemented in practice. They included proposals for:

1. The setting up of a legal aid clinic by a university law school and operated by professors and students.

2. Providing a counselling service to university students, integrated with existing regional health programmes.

3. The expansion of existing law and criminology courses to incorporate an emphasis on legislation preventing HIV/AIDS and aimed at education and behavioural change. This included encouraging behavioural change amongst the students themselves.

4. Introduction of sex and drugs education programmes for high school students, requiring a change in existing government legislation.
5. Introduction of a wide-ranging course on HIV/AIDS, sex and drugs, for military personnel within existing course structures.

6. Development of more supportive legislation in relation to injecting drug users and men who have sex with men in prisons, based on already existing pilot programmes.

7. Introduction of a more progressive approach to securing the enforcement of human rights as an effective response to HIV prevention and care. In particular, taking on test cases to be handled by an existing legally trained human rights group.

8. Running specific courses in Moscow, including education of local police and politicians, aimed at behavioural change of injecting drug users.

9. Mounting a media campaign aimed at and with the involvement of youth, co-ordinated through existing media contacts in the specified region.

10. Establishing a core group of lawyers willing to assist individuals living with HIV/AIDS, through the existing bar association and young lawyers group.

The standard of presentations, the evaluation and formulation of ideas, and the practical application and possible implementation was of a high standard, especially given the initial scepticism of many of the participants at the commencement of the workshop.

7. Observations

- Most of the participants came to the workshop with a narrow, ‘positivist’ view of the law and its role in society. This was demonstrated through an initial focus on laws and law reform (mostly punitive) as the answer to the problems of prevention and care, rather than a consideration of the law in its social context and the practical impact of laws as experienced by those groups most affected by them. A small number of participants continued to stress the need to punish those who broke the law, without demonstrating an appreciation of the complexity of the determinants of behaviour and behaviour change in the context of HIV/AIDS.

- Related issues concerned with personal prejudices and lack of knowledge also became apparent and needed to be addressed at an early stage of the workshop. While some of the participants expressed judgmental attitudes towards affected groups (eg injecting drug users and men who have sex with men), as the workshop progressed it became evident that some participants had direct personal experience with affected groups and HIV/AIDS. For example, some participants knew young people who shared syringes to inject drugs, or people in their communities living with HIV/AIDS. Participants were encouraged to share and discuss these experiences and as a result judgmental attitudes were voiced less frequently as the workshop progressed, and more thoughtful contributions were made as the complexity of the issues became apparent.
A number of the participants sought to apply model legislation or model solutions without adapting them to the local context. It was stressed by the presenters that HIV/AIDS was a global problem which required local solutions in the legal and community environment. The International Guidelines on HIV and Human Rights were thus presented as a guidance document with principles to be discussed and adapted according to local circumstances.

Related to the above, a number of participants quickly adopted the use of labels or slogans as a means of justifying a position, without necessarily understanding their real application. For example, the term ‘protection of human rights’, was often given as justification for a certain legal or ethical approach, but without demonstrating a true understanding of what such protection actually means in practice. Initially, the presenters challenged the use of such terminology by participants to ensure there was a clear understanding. In the later part of the workshop such challenges were usually made by other participants, demonstrating that they had moved from an expectation of model solutions to a pragmatic approach towards the development of local responses in a particular context.

8. Presentation methodology

Various presentation methods were adopted throughout the programme:

1. Presenters providing core information on a topic, usually followed by plenary session discussion amongst all participants.

2. Group work where such discussions would continue and particular case study problems would be presented and debated.

3. Encouragement of the participants to debate and challenge the various views expressed. There was a notable shift as the workshop progressed, from participants merely sitting and listening to becoming actively involved.

4. Videos were used to reinforce various subjects and to provide a method of breaking up the presentation format. The videos were prepared from a number of sources and included topics such as:
   - HIV/AIDS information and education from various countries,
   - interviews and presentations by sports stars,
   - discussions amongst students,
   - the emergence of law centres providing free legal advice,
   - individual stories which provided a human face to the experience of living with HIV/AIDS,
   - the damage done by discriminatory laws and practices.

5. Considerable use was made of overhead transparencies, presented in Russian, which emphasised the key points of the particular presentation.
6. Brochures and materials from other countries relevant to a particular topic were provided as examples of what other countries had undertaken and as a means of providing information to the participants.

7. Handouts of the key points were provided at the end of presentations or at the end of the workshop.

8. A site visit was undertaken to a children’s refuge and a local treatment centre for drug users.

9. Presentations by representatives from non-governmental and other organisations, including people living with HIV/AIDS, provided a human face to the issues and to give the participants a non-lawyer’s perspective.

9. Workshop evaluation and suggestions for improvements

An anonymous workshop evaluation form was developed in consultation with the UNAIDS Training Officer. It was distributed to each of the participants at the beginning of the workshop and collected at the end of the workshop to ascertain their views on both the content and presentation of each of the plenary sessions (see Annex).

The following ways to improve the workshop were identified:

1. Reduce the overall length of the workshop. This would assist in ensuring a high calibre of participant. The longer the course, the more likely that potential suitable attendees will not be able to spare the time. This would also reduce costs for organisers and participants.

2. One way to shorten the workshop would be to provide a substantial amount of information in appropriate language(s) prior to the workshop. In particular, this could include materials concerned with epidemiological, social, economic and related matters so that the participants are better prepared and more able to deal with the workshop content. The International Guidelines should also be provided in advance with an explanation as to their relevance and application.

3. There should be greater emphasis on participants identifying key pieces of local legislation and policies in relation to legal, ethical and human rights. Participants could be encouraged to bring relevant materials with them, and to consult with national AIDS programmes and community groups about key local issues before they attend.

4. Potential participants should provide greater professional details, which would assist in an understanding of their work and their suitability for the workshop.

5. Given the inter-relationship of medical and social issues with the legal and ethical aspects, a more integrated approach to their presentation could be taken. The present workshop commenced with three days of medical, epidemiological and social aspects before legal issues began to be formally addressed. In practice,
these issues arose sooner and the agenda could be adjusted to reflect this by integrating formal presentations on legal issues from the beginning.

6. More preparatory work should be undertaken by the legal presenters with non-governmental and other organisations e.g. medical and legal.

7. Providing breaks through site visits assists participants maintain their interest and provided direct practical experience of the issues.

8. The involvement and positive support provided by the Government of the Russian Federation was an important factor in ensuring the participants appreciated the gravity of the issue and the importance of the workshop. This level and degree of support should be sought for future workshops.

9. The location of the workshop in a hotel outside Moscow assisted in building a cohesive atmosphere between participants and also the presenters. This ensured that interaction continued outside of set hours and in a more informal atmosphere. The venue had a sauna, bar and occasional disco which also facilitated interaction and discussion.

10. Extra informal events were organised in the evenings, including a discussion on testing issues, and the screening of videos. This aspect should be retained and strengthened.

11. Provision of simultaneous translation was particularly important, given that the workshop emphasised interaction between participants and presenters/facilitators.

12. Having on site support staff ensured that the presenters were able to respond quickly to requested information and also to change the content of particular topics as the programme proceeded.

Having adopted a regional approach to the initial workshop, it would now be appropriate to concentrate on specific sub-regions. This will assist in ensuring a critical mass of lawyers from a particular area is achieved. Emphasis was placed in the workshop on follow-up and future co-operation between the participants, but given the great distances involved and different political, economic and cultural issues, follow-up and support between the participants will be certainly difficult if not impossible in some instances.

**10. Evaluation of participants**

All but one participant finished the workshop, and thus almost all received training in medical, social, epidemiological, legal and ethical aspects of HIV/AIDS. This knowledge alone represents a tremendous resource to governments and communities. In addition, the participants were evaluated by the presenters using a tool developed by the UNAIDS Training Officer which focused on language skills, advising skills, HIV-related experience, and training and facilitation skills.
Some participants showed both the necessary commitment and skills for strategic planning and training activities in their region. These participants would require minimal further training and support. Other participants displayed an ability to be involved and also a commitment, but would require considerable further training and guidance.

For the remainder of the participants, it is judged that the majority would not justify additional input, given limited resources. However, there are certain individuals who could provide useful contacts for the future, as and when and resources allow.

Further information is available from the Team Leader, Europe Desk, UNAIDS Department of Country Planning and Programme Development.

11. Recommendations for follow-up

1. UNAIDS respective offices could:
   i) organize meetings with their local participants to discuss their action plans;
   ii) monitor/assist the implementation process;
   iii) report on the progress (successes and failures);
   iv) based on situation assessment, propose a follow-up event (meeting, seminar, workshop or conference) to build a network of high level legal specialists in HIV/AIDS area in the region.

   In a year’s time 12-15 practical case studies could be presented (at a meeting, seminar, workshop or conference) organized in the place where strongest and most spectacular initiative/case was located. A larger group of lawyers from CIS and Central Europe could be invited to motivate them to do something similar. Advice could be provided on the spot (by local and international consultants) if required. If some of participants at this event would like to prepare and implement new projects, the core group of 12-15 local consultants could advise them and at the same time to monitor their work.

2. In any case written contact should be made with each participant, within six months, asking what has been achieved in their particular area following the workshop. The report should describe any ongoing projects that they have initiated or planned, and what forms of support would be of assistance.

   Consideration should be given to working with the most committed participants to develop sub-regional technical resource networks with government support, utilising existing bar associations, young lawyer groups, and human rights and community groups (CPP).

3. Suitable participants from the current workshop should be used in future training programmes and other activities where possible. (PSR, CPP).

4. Attention should be focused on those international law forums and legal associations whose technical assistance and financial support may be available for
local projects (e.g. The International Bar Association, American Bar Association) (PSR).

5. A set of materials (in appropriate languages) should be developed for use in future workshops and also for those individuals who are undertaking their own initiatives. In relation to videos, it was clear that this type of presentation is very effective (PSR).
Annex 1.

TRAINING WORKSHOP ON HIV/AIDS LEGAL AND ETHICAL ISSUES
Moscow, 19-30 October 1998

Monday, 19 October 1998

9:30 - 10:30  Welcome
            Introductions
            Objectives and Expected Outcomes
            Distribution/discussion on workshop materials

10:30-11:00  Plenary session 1. Natural history and Epidemiology of
            HIV/AIDS. L.Khodakevich

11:00-11:40  Plenary session 2. HIV/AIDS/STD – current global and
            regional situation (overview) – L.Khodakevich

11:40-12:00  Coffee break

12:00-12:30  Plenary session 3. HIV testing policy and methods.
            L.Khodakevich.

12:30-13:00  Plenary session 4. Pre- and post-testing counselling. National
            expert.

13:00-14:00  Lunch

14:00-15:30  Distribution by groups.
            Group session 1. Discussion on an appropriate approach to HIV
            testing policy, counselling and legal issues.

15:30-15:50  Coffee break

15:50-17:00  Group session 2. Discussion continued.

17:00-18:00  Plenary session 5. Report-back and general discussion.

Tuesday, 20 October 1998

9:30-10:30  Plenary session 6. Diagnostic, treatment and care management

10:30-11:00  Plenary session 7. HIV/AIDS prevention areas - blood safety
            and prevention of HIV transmission in a health care setting.
            Y.Kobyshcha. General discussion
11:00-11:20  Coffee break
11:20-12:00  Plenary session 8. HIV prevention strategies among general population. IEC initiatives, the role of peer education, media and mini-media in designing of a relevant public opinion and preventive approaches. UNICEF presenter.
12:00-13:00  Group session 3. Group discussion on the issues mentioned above.
13:00-14:00  Lunch
14:00-14:45  Plenary session 9. HIV prevention strategies among vulnerable groups (IDU, CSW, MSM, inmates, mobile population, military man). Y.Kobyshcha
14:45-15:30  Group session 4. Discussion on vulnerable groups issues in countries. Review of approaches to reach vulnerable groups (VG) in countries. The role of legislation in the implementation of HIV prevention interventions among VG.
15:30-15:50  Coffee break
15:50-17:00  Group session 5. Discussion continued.
17:00-18:00  Plenary session 10. Report-back and general discussion

**Wednesday, 21 October 1998**

11:00-11:20  Coffee break
12:30-13:00  Plenary session 12. Report-back to plenary and general discussion.
13:00-14:00  Lunch
14:00-15:30  Plenary session 13. Social, Economic and Political Impact of HIV/AIDS. Major constraints and obstacles related with transition stage in NIS. V.Steshenko, inter-country expert.
15:30-15:50  Coffee break
15:50-17:00  Plenary session 14. The role of UN system and UNAIDS in global response to HIV/AIDS. A.Majszyk.
17:00-18:00  Plenary session 15. Finalise the discussion on HIV/AIDS medical and social problems.

**Thursday, 22 October 1998**

Site visit

**Friday, 23 October 1998**

11:40-12:00  Coffee break
12:00-13:00  Plenary session 18. Framework for action on legal issues at country level. K. Ryan.
13:00-14:00  Lunch
14:00-15:30  Group session 7. Discussion of International Guidelines.
15:30-15:50  Coffee break
15:50-17:00  Group session 8. Discussion of framework for action.
17:00-18:00  Plenary session 19. Report-back and general discussion. K. Ryan.

**Saturday, 24 October 1998**

Site visit

**Sunday, 25 October 1998**

10:00-11:00  Plenary session 20. Law Reform and Community Partnership. General discussion. K. Ryan. Materials: *Guidelines* (Guideline 2) paras 24-26
11:00-11:20 Coffee break


13:00-14:00 Lunch

14:00-15:30 Plenary session 22. Community Perspectives (cont’d). K. Ryan and guest speakers.

15:30-15:50 Coffee break

15:50-17:00 Group session 9. Community Perspectives

17:00-18:00 Plenary session 23. Report-back and general discussion

**Monday, 26 October 1998**


11:00-11:20 Coffee break

11:20-13:00 Plenary session 24 (cont’d).

13:00-14:00 Lunch


15:30-15:50 Coffee break

15:50-17:00 Plenary session 26. Legal support services and care. K. Ryan. Materials: Guidelines (Guideline 7) paras 32-37

17:00-18:00 Plenary session 27. General discussion.

**Tuesday, 27 October 1998**


11:00-11:20 Coffee break
13:00-14:00 Lunch
15:30-15:50 Coffee break
15:50-17:00 Group session 11. Framework for action.
17:00-18:00 Plenary session 30. Report back and general discussion.

**Wednesday, 28 October 1998**

Materials: Guidelines (Guideline 3) paras 27-28

11:00-11:20 Coffee break

Materials: *Guidelines* (Guideline 10) para 42

13:00-14:00 Lunch

14:00-15:30 Plenary session 33. Regulation of goods, services and information. K. Ryan.
Materials: *Guidelines* (Guideline 6) para 31

15:30-15:50 Coffee break

15:50-17:00 Group session 12. Public health legislation and codes of practice.

17:00-18:00 Plenary session 34. Report back and general discussion.

**Thursday, 29 October 1998**

9:30-11:00 Plenary session 35. Presentation of national frameworks. K. Ryan.
Group session

11:00-11:20 Coffee break

11:20-13:00 Group session (cont’d).

13:00-14:00 Lunch
14:00-15:30  Plenary session 36. Presentation of selected national frameworks.

15:30-15:50  Coffee break

15:50-17:00  Plenary session 37. Reflections on the workshop. K. Ryan.

17:00-18:00  Closing ceremony
# LIST OF THE PARTICIPANTS TO THE WORKSHOP OF «HIV/AIDS LEGAL AND ETHICAL ISSUES»
Moscow, 19 – 30 October 1998

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<th>№№</th>
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«Правовые и этические вопросы ВИЧ/СПИД»
Москва, 19 – 30 октября 1998 года

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<td>БУРАВЛЕВ Юрий Михайлович</td>
<td>Рязанский государственный педагогический университет, юридический фак-т</td>
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<td>МАНЖОСОВ Александр Иваанович</td>
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<td>Доцент кафедры предпринимательского права юридического факультета</td>
<td>Душанбе, ул.Бинихисорак, 12 Душанбе, ул.Фирдоуси, д.37, кв.26</td>
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<td>Доцент факультета права и международных отношений</td>
<td>Представительство ООН в Ашгабаде</td>
<td>(3632) Дом. 46 21 89 <a href="mailto:Entazari@cat.gl">Entazari@cat.gl</a> asnet.ru</td>
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<td>Украина</td>
<td>ДРЕМИН Виктор Николаевич</td>
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<td>270009 Одесса, ул.Пионерская, д.2</td>
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<td>Юрист</td>
<td>252196 Киев, пл.Леси Украинки, д.1</td>
<td>(044) тел/факс 413 6397</td>
<td><a href="mailto:suhoruko@publicc.ua.net">suhoruko@publicc.ua.net</a></td>
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<td>ЩЁКИН Юрий Вадимович</td>
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Annex 4.

List of materials

(to be added)
Annex 5.

Participants comments on the workshop

There were 18 evaluation sheets received at the end of the workshop, 2 of them missing “presentation” ratings, and 1 offering commentaries and missing ratings. Occasionally the rating marks are missing in some specific cells, or an “N/A” response was given. The average rating in every case shows the average of the responses provided. The commentaries provided by the participants were summarised.

Most of the comments took the form of recommendations for future workshops organization.

The most frequent comments on this workshop were:

A complex approach to introducing the HIV/AIDS problem has helped to see the problem as a whole, with interrelations of various issues.

Relevant handouts prepared and distributed before/during a respective session would have been most helpful for the learning process.

End of the day tiredness caused by a high workload during the sessions affected personal productivity. At the same time, some of the issues were discussed unnecessarily repeatedly (no specification of the issues in question given).

Recommendations regarding future workshops were:

Targeted selection of the workshop participants would be highly recommended: most of the past workshop participants were experts in criminal law, which was not enough. It would be useful to involve experts in international law and human rights as well.

It is not enough to simply introduce the Guidelines. It would be most appreciated to learn more about the legal basis of international organizations’ activities, like WHO, and to have commentaries / comparative analysis materials on the foreign legal practices as regards HIV/AIDS (legislation, enforcement/implementation mechanisms, monitoring in different countries).

It would be helpful to hear from and visit more NGOs, medical and legal organizations, and involve more national experts from different areas. At the same time, their ability to introduce the topic should also tested (many complaints about session 13).

Role-playing games, documents preparation and other practical exercises, and more video could enrich the training methodology. A series of skillfully constructed tests could help to check participants’understanding of the topic immediately and help to design targeted intervention.

It might be useful for the participants to bring not only legal documents but also information on the HIV/AIDS situation in the country/region.

It would be most helpful to receive the workshop agenda beforehand.

Development of a training manual might be put under consideration.

Government employees would benefit from a similar training course.
Ranking of plenary sessions by content and presentation.
Annex 6.

Workshop evaluation form

Participants are invited to complete this form after each session and to submit it at the end of the workshop. Thank you for your assistance.

Rating:
1- waste of time
2- not very useful
3- average
4- useful
5- very useful
NA Not applicable

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Other comments:
Annex 7.

Participant evaluation form

NAME OF PARTICIPANT REVIEWED:

NAME OF REVIEWER:

Please review each participant's skills for 1) advising, and 2) training using the tables provided underneath. You may evaluate participants' skills on a scale ranging from 1 for never / very weak to 5 always / very good.

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<td>▪ Russian speaking skills</td>
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<td>▪ Ability to relate to vulnerable populations</td>
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<td>▪ Experience working with disadvantage populations</td>
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<tr>
<td>▪ Willingness to recognize non-traditional approaches</td>
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<td>▪ Promotes an &quot;equal-rights&quot; approach in behavior</td>
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<td>▪ Provides constructive feedback</td>
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<td>▪ Skills in handling conflict and disagreement</td>
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<td>▪ Ability to formulate specific ideas in response to a critical situation</td>
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<td>▪ Ability to listen to others</td>
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<td>▪ Displays the use of the following techniques when leading group discussions:</td>
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<td>➢ presents basic objectives at the opening of a session</td>
<td>1 2 3 4 5</td>
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<tr>
<td>➢ summarizes at the end of the discussion</td>
<td>1 2 3 4 5</td>
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<td>▪ Management of Group Discussion</td>
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<td>➢ Support group process</td>
<td>1 2 3 4 5</td>
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<tr>
<td>➢ Sensitivity to other persons' views</td>
<td>1 2 3 4 5</td>
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<tr>
<td>➢ Accepts feedback from others' in the group</td>
<td>1 2 3 4 5</td>
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<tr>
<td>➢ Is able to make transition between discussion of separate issues</td>
<td>1 2 3 4 5</td>
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<tr>
<td>▪ Communication Skills</td>
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<tr>
<td>➢ Person's ideas and thoughts are well structured and presented that way</td>
<td>1 2 3 4 5</td>
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<tr>
<td>➢ When leading discussions, person maintains contact with the group</td>
<td>1 2 3 4 5</td>
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<tr>
<td>➢ Person responds to group's questions</td>
<td>1 2 3 4 5</td>
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<td>➢ Person checks back the group level of understanding</td>
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Please write additional comments about the Participant Reviewed on the other side of this sheet: