

MINUTES

Global Campaign Europe Strategy Meeting Copenhagen 31 May – 1 June 2007



DAY ONE

The meeting began with a welcome and overview of the agenda (Annex 1). The Global Campaign (GCM) secretariat acknowledged the generosity of the host HIV Denmark which made a much larger gathering possible, with 23 participants compared to 14 last year. For a complete list of attendees, see Annex 2. Copies of the presentations are available on request from the European secretariat.

The goals of the Strategy Meeting were set out as threefold:

- To evaluate the premature closure of cellulose-sulphate trials and prepare for future trial announcements
- To share approaches, lessons learned and best practices in advocacy
- To facilitate input into the strategic review and planning process and begin joint planning for 2008

During the meeting, participants were asked to consider three questions on a 'walk and talk' exercise and bring the insights of their discussion to the meeting. The three questions were:

1. What have been the outcomes of the collaboration between your organisation and GCM to date?
2. If the European Campaign could have only one goal, what would that be?
3. As microbicide advocates, what do you most need from the Campaign in 2008-2011?

Overview of GCM and challenges in the microbicides field

Rebekah presented an overview of GCM, core goals, role in the field and its programs of work for those new to the Campaign. She spoke about the Campaign's origins in the context of combating sexual violence in Uganda. Marc-Andre gave an update on progress made in the search for a microbicide and the remaining challenges in the field, including establishing markers of protection, high rates of pregnancy in trials, and where microbicides are likely to be introduced first.

This led into the first discussion around whether microbicides will be available in Europe and on what basis. It was noted that it will be difficult to not have microbicides available in Europe if they are available elsewhere. It could be marketed alongside condoms, added to condoms, or as lubricant. It was emphasized that it can be ethical to make available a product of less than 100% efficacy in developing countries, if the epidemic warrants it. This is a matter of epidemiological need rather than 'dumping' unwanted products on developing countries. Participants agreed that the Campaign is about global access to new prevention options, not just about access in developing countries.

Rebekah then presented an overview of Europe's role in the microbicide effort. GCM has drafted a factsheet which tracks the European expenditure on microbicide research. At last year's meeting, the target countries were Belgium, Germany, France and Italy. The first three of these are now donors to microbicides. We now add Finland to the list. Moniek van der Kroef mentioned that GCM does not receive any of the resources mobilised in Europe – funds raised go to R&D efforts. Participants were asked to talk about the European microbicide projects and programmes they are aware of. EDCTP was identified as an important instrument that has not been as strong as it could be and which needs more analysis and advocacy.

Working Group and Secretariat Updates

The European Advisory Group

Members of the Advisory Group reported back on the first year of activity. There have been only two or three conference calls, and not everyone likes these as a way of communicating. So far, the group has only been responding to the secretariat's questions and would like to be clearer on its function and role, whether it is advising the Campaign as a whole or just the Secretariat.

Rebekah responded that the group had been set up mainly because the secretariat needed a mechanism to get quick advice about strategy and activities between annual meetings as well as moral support. From the secretariat's side, it met this need. The annual strategy meeting in fact acts as an advisory group bringing many partners together and resources only currently exist to do that once a year. To facilitate cross-regional communication, participants were encouraged to use the existing yahoo group to communicate with one another, and the secretariat was reviewing alternative listserves that are easier to use.

Rectal Microbicides Working Group

Kim Mulji reported back on activities undertaken to advance rectal microbicides advocacy. An expert thinktank meeting was held in the UK, and Michael Cashman MEP asked a question on N-9 in the European Parliament. Meetings with DG Research suggest that they are interested in funding rectal microbicides. Kim also led a workshop with THT at the UK CHAPS Conference.

Since last year the International Rectal Microbicides Working Group has been established. It makes sense to recruit Europeans to this new group and take forward activities within that framework.

Outreach Working Group

Carmen Tallada reported back on outreach activities in the past year. Because of time constraints, the group has been reactive rather than pro-active. ICW continues to work closely with positive women to engage them with microbicides. Carmen has also been forwarding information to IDU networks. Georgina added that a template had been created by the secretariat which she sent out to five groups and received one response. People did not like the fact that it was a questionnaire.

It was decided that everyone should continue to forward information to groups that should be involved in microbicides advocacy, and continue to recruit at events and meetings. A working group was not necessarily needed at this time.

Secretariat report

Arwa Meijer, Program Associate spoke about her work to coordinate the European tour of the exhibit and to develop the range of materials we have in different languages. The exhibit was shown in seven venues in four countries in the past year. The Partner's Manual has been translated into French and Spanish and we now have a new low literacy leaflet. GCM also has a new range of t-shirts and hoodies available to purchase on the website.

In the past year, the secretariat was active in supporting lobbying efforts on microbicides in Belgium, UK, Spain, the Netherlands and Ireland. GCM gave trainings, workshops and presentations at several conferences in Europe and has made two grants to NGOs for advocacy activities in the region. The team made site visits to partners and provide technical assistance and advice over the phone. In terms of EU policy and advocacy, the secretariat continued to track and give input on microbicides policy in the areas of development, research and health. Everyone was encouraged to visit the new GCM website which has Spanish and French pages as well as materials to download. Participants encouraged the secretariat to consider translating materials into Portuguese.

The cellulose-sulphate (CS) trials – implications for moving forward

Marc-Andre presented an overview of what is known about the closure of the CS trials in February and the critical role of the Data and Safety Monitoring Boards (DSMB) which make decisions about when a trial can be stopped. Participants expressed concern that the number of sero-conversions was published and how to interpret the data, and whether a useful product had been dropped because of one flawed trial. GCM is collating advocates views and developing a set of responses to address a range of such questions.

At the end of this year, the results of the Carraguard trial will be known. By 2009 we should also know the results of the Buffergel and Pro-2000 trials.

There are five potential scenarios for each product: the microbicide harms people or increases their risk of HIV (grim reaper); the microbicide shows no benefit, but causes no harm (dead-end); the trial is stopped prematurely for technical reasons (premature cancellation); the microbicide shows some efficacy but not enough to be licensed (uncertainty) and finally, that the microbicide shows clear efficacy in preventing HIV (champagne). For the first generation of products, the uncertainty scenario is the most likely. It is also important to remember that the products could have efficacy against STIs but not HIV.

Each scenario will bring its own implications for the field, communication challenges and specific advocacy goals. It is important to remember that clinical trials are just one piece of clinical evidence in the decision to licence a new product. Registration often requires two trials. The decision depends on factors such as consistency of findings across sites and loss to follow-up or other evidence. There is no clear consensus on how effective a product must be to be licensed.

It is vitally important to build consensus around the interpretation of trial results. The N-9 trials still cause great concern in the African community - a big barrier to microbicides advocacy.

Participants were asked to break into small groups to examine the implications of each scenario for advocacy efforts in Europe and provide advocacy strategies for each one.

Champagne scenario

The advocacy focus will be on ensuring universal access to the product as quickly as possible, with studies on introduction and various populations needed. Advocacy will focus also on calling for successful microbicides to be taken forward into trials looking at rectal efficacy and ability to protect negative partners of positive women.

Uncertainty scenario

This will be the case if the trial shows some level of benefit, but insufficient benefit to justify licensure. It will also be the case if some sites show moderately good results; other sites show no benefit, but overall there is low benefit. There will be a danger of conflicting interpretations and a need to build consensus across the field to avoid arguments in public. Advocates will need to call for clear answers to any remaining questions. A good quality communication strategy will be vital. The secretariat will have a key role to play in coordinating messaging and advocacy.

Premature cancellation scenario

This will occur if it is determined that the trial cannot answer the question it is supposed to answer, if there is lower than expected incidence rates, if there are logistical problems with the trial, or if funding is pulled. Positive messages about the need to continue research and that it is a long process will be important. Explaining the reasons for the specific trial closure is critical. It will be important to thank participants, trial staff and sponsors.

Dead end scenario

Advocacy for more funding and research will have to remain strong. Messages will focus on the long-term nature of research process and the need to maintain support for the field. The emphasis will be reminding people about the wider pipeline and that one product is not the whole pipeline. Again, it will be important to thank the participants, researchers and the sponsors for their efforts.

Grim reaper scenario

Advocacy will focus on building consensus within the community around the extent of the harm and who is responsible – the secretariat has a key role to play here. Ensuring care for the participants will be the first item on the advocacy agenda. Checks and balances are likely to have been in place - if the trial has been ethically conducted, it should have stopped at the first indication of harm, which shows the system works. Positive messages will be needed about failure being part of the long research process and that we can learn from failure. Research must continue until a safe and effective product is found. The trial participants, researchers and sponsors deserve acknowledgement and thanks for their vital contributions.

Setting European Advocacy Goals

Marc-Andre led an exercise to identify the key goals for advocacy in Europe, with the above scenarios in mind. Participants were asked to consider three potential goals and decide which they regarded as the most important for the microbicides field and which they felt able to support in terms of their own organisational capacity and skills.

The following three goals were identified in order of priority:

1. Increasing investment in microbicide research and development

It was emphasised that this should include not just investment into R&D of vaginal products for the developing world, but also for research priorities in Europe, for rectal microbicides R&D and for social and behavioural research. They also thought it was very important to raise money in Europe for advocacy efforts both at home and in the Global South.

Participants felt that their organisations were not equipped with the right skills to tackle this goal. They wanted to be better informed about potential sources and mechanisms of financing for all of these areas, and how to raise the money from national and EU sources.

2. Ensuring strong policies are in place for microbicides research and development

This goal should focus on looking ahead to access policies including regulation and licensing, and integrating microbicides into all relevant European policies on health, development and research. It should include decision-making mechanisms about which trials are funded and how the field moves forward.

Within this goal, participants felt it was important to include policies ensuring that trials are ethically conducted. It was debated whether Northern NGOs had a right to speak on ethical issues concerning trials overseas, or whether as taxpayers and citizens of donor countries Europeans had an obligation to hold donors to account on this. By bringing communities into the debate, it was felt that consensus around ethics would be easier to achieve. Participants identified this as a goal that most of their organisations had the skills and competence to take on.

3. Engaging civil society in the scientific and political debate around microbicides

It was emphasised that before going out to educate key constituencies, participating organisations needed to develop their own literacy and knowledge of microbicides. GCM has a key role to play in providing accurate information. It will be very important to manage the expectations of communities who are likely to be end-users of microbicides, building their capacity to interpret trial results. A number of other important ‘communities’ were identified including policymakers and the media. Participants expressed confidence that they had the skills to reach this goal within their respective organisations.

In addition to these goals, discussion focused on a number of other important areas for European advocacy, such as bringing pharmaceutical companies into the microbicide field. Should Europeans be targeting these companies? Since the same question is being asked in North America, Marc-Andre agreed to share the outcome of that discussion later in the year, as this is something that should be agreed on at an international level.

In terms of which actors should lead on which goals, one interpretation had been that the secretariat focused on the fundraising and policy work while NGOs within the Campaign mobilised the community. However, there was strong support for the idea that local partners should be active in all three areas and not leave some goals for GCM to lead on.

The participants then split into three groups to discuss possible activities depending on where they are situated in relation to the first goal.

1. Participants based in countries that are already donors to microbicides

This group emphasised that it was important that the whole nation supported the funding going into microbicides, and that this was not just a decision made at a higher level without wider debate. In this way, funding was likely to be more sustainable over the long-term. It is important to keep an eye on financial commitments made to be sure that they become reality and to look into mechanisms like Advanced Market Commitments (AMCs), in case of donor fatigue. Existing donor nations have an important role to play in widening the range of microbicide research that they support, and should recognise the value of advocacy more than non-donors. The group identified that media management was a key part of their advocacy work and that communities in donor countries will expect microbicides to be made available locally as well as overseas.

2. Participants based in countries that are potential donors to microbicides

This group naturally identified that raising awareness and political pressure was the obvious starting point for advocacy in these countries. The process has to begin with education about microbicides among key stakeholders and building relationships with local scientists could be very useful. The case for microbicides should be made within the context of a comprehensive approach to HIV/AIDS or to SRHR implementation. All the policy analysis (e.g. condom migration studies) and social science published by the Campaign and others would be useful in taking this forward.

3. Participants who are active at the EU level

This group was concerned about the problems associated with EU funding for microbicides, in that it was not flexible or product focused and was in competition with other health research issues. It was suggested that GCM could coordinate a consensus statement on the quality of EU funding for microbicides research from the scientists' point of view, and that a consultation with scientists would be a first step towards this. If the statement was developed, a hearing could be held in Parliament to raise the debate.

Further clarity is also needed about the role of the EMEA and regulatory pathways for microbicides, and there is a need to build the expertise among advocates in this area. Because the EU consists of the Commission and the Parliament as well as the member states, it is important to work across all levels - national efforts in all countries must target the EU in addition to national governments.

DAY TWO

Day Two began with a re-cap of the main points of discussion from the previous day. Participants identified the issue of where European funding is allocated, partial effectiveness, European access to microbicides, how to link up with Southern advocates, and community preparedness in both North and South as important themes.

Resource mobilisation in Europe

Rebekah presented on Europe's role in funding microbicide research and development and concerns among advocates about how to raise money for the right things. Currently about half of the European funding going into microbicides is going to the International Partnership for Microbicides (IPM). Many donors think that by funding IPM they are contributing to the whole field, but in fact IPM has a specific mandate to develop a vaginal microbicide for use in the developing world. When IPM was being set up, it was expected to be a mechanism for coordination of the field, where decisions about what needed to be funded would be made. While participants were supportive of IPM and its clear mandate, there was broad endorsement of the idea that GCM should push for an overarching mechanism to be put in place. This would fit into Goals 1 & 2 as identified on Day One.

GCM recognises the need to expand the range of projects that European donors support. One idea is to set up a new fund for advocacy. GCM would not be the donor, but this new independent fund would support microbicides advocacy and perhaps wider prevention advocacy. It might be possible to use existing funding lines for health and research at the national and EU level to fund rectal microbicides research, rather than use development budget lines. Rectal microbicide research is at an earlier stage.

The Microbicide Development Strategy (MDS) is an overview of all the scientific roadblocks that stand in the way of a vaginal microbicide becoming a reality. GCM is creating a parallel document that looks at the roadblocks from a community standpoint. Both documents will be very useful tools for creating messages to donors.

Advocating for microbicides alongside other technologies

Marc-Andre highlighted how GCM has been considering its place within the wider context of HIV prevention advocacy. The impact of male circumcision on trials and ensuring access to multiple interventions in the future is showing how interlinked the issues are. In terms of advocacy, there are few HIV prevention research advocates, whether for vaccines or microbicides they are the same people.

Currently GCM is deciding to maintain the focus on microbicides, but keep in mind the other prevention technologies, whether existing or future. The AIDS Vaccine Advocacy Coalition (AVAC) has submitted a proposal to Gates to set up a Prevention Research Advocacy Network which would cover all new HIV prevention options. If it is successful, GCM will be part of the Network.

Results of the GCM evaluation

Rebekah presented on the key findings of GCM's strategic review process. In order to get clarity on the GCM strategic plan for the next three years, participants were invited to consider three extreme positions for the Campaign and the extent to which GCM should focus on these in Europe. Three participants presented 'strawmen' arguments in turn.

GCM should focus only on short-term campaigning – Aurelie Gal

1. Efficiency – selecting a key time around elections or other strategic moments makes sense, and avoids fatigue with the campaign. In a context of limited resources, staff can focus on the campaign at one time in the year.
2. Clarity and coherence – the 'ask' and the message are set at the beginning and there is more clarity about the goals and targets of the campaign. Microbicides is a complex issue, so a short-term campaign ensures that information is accurate and current.
3. Cost – a short time span can allow for lower costs on media work and events.

Participants cited the Make Poverty History Campaign as a successful example of a time-bound campaign focused on the G8.

GCM should only fund partners to do microbicides advocacy – Gabriel Boichat

1. It is unrealistic to expect anything to happen without funding. Limited actions may be possible, but are not sustainable. NGOs have limited staff and resources. A full-time staff person is needed to work on microbicides.
2. Funding leads to a bigger impact and a faster result. This is a long-term process. This has been shown with the IAVI model of sustained economic support to partners over several years which has been very successful.
3. Partners know best when it comes to local strategy. They can be trusted to take the resources and spent them wisely.

Other participants added that NGOs spend about 30% of their time applying for funding. Proper financing of partners would lead to greater ownership of the Campaign, because people won't look to the secretariat to do everything.

The Campaign should broaden to include other technologies – Lut Joris

1. Efficiency – the same people working on microbicides also work on vaccines, female condom, PrEP etc. It is harder for them to have to talk to several different agencies instead of one, and more work to do several different actions. Most NGOs will want to deal with NPTs as one segment of their work, it is already a small part of the AIDS agenda and dividing it up even further does not make sense.
2. Inclusiveness – we are all advocating for a comprehensive approach and for improved prevention. It is not possible to advocate only for microbicides and not for other things. It does not make sense to have separate events for example on vaccines and microbicides. Prevention as a whole needs more attention. United we stand stronger.
3. Funding – When working on microbicides in isolation, donors perceive it as a competition, instead we need to argue that we must make the whole pie larger. By broadening the Campaign, everyone would get more funding.

Other participants added that the end-users will be the same people, so as educators it is important to understand how the whole picture comes together.

Arguments against the propositions

In terms of campaigning, it was agreed that short-term campaigns are useful and strategic, but microbicides involves a wider range of activities such as consensus-building around ethical issues, research literacy and community engagement. Short-term campaigns are one of the tools that advocates can use to raise money or change a policy.

Funding partners directly was seen as an important way to ensure that the issues being worked on were the right ones. However, do we want the Campaign to be a grant-making body? There are dangers in going down that route and a lot of administration is required. Participants liked the fact that there is no self-interest in becoming part of the Campaign, what partners bring is a desire to work on the issue.

Participants also recognised the need to have a coordinating secretariat, to provide a united voice and bring everyone to the same table. It was acknowledged that partnerships take different forms, some involved financing and others not. What happens if there is no one to partner with? Someone still needs to do the work.

Finally, participants stated that the only reason microbicides have reached the stage they have is because of a focused strategy. Some organisations or women's focused teams prefer to only work on microbicides, and do not have the capacity to work on a broader range of issues, leaving other issues to other parts of the community/organisation. There was broad agreement that it is possible to reconcile a focus on microbicides while simultaneously engaging with a wider set of issues.

Marc-Andre summarised that campaigning won't help us reach all our goals, that there are some issues around partner funding that make it challenging and that for now, GCM is retaining a specific focus on microbicides but is looking at partnering with others to stay engaged with the wider field.

What does it mean to be a partner of the Global Campaign for Microbicides?

Rebekah asked participants to consider the GCM definition of partnership and the levels of engagement as described in the Partner's Manual and whether they are happy with these definitions. There was agreement that the word partner denoted equality, but that governments used the term partner for those that they give funding to. Not all the participants saw themselves as partners, but those that did felt they were 'true partners' and were comfortable that there was a diversity of relationships possible.

Participants came up with a range of words to describe the connection between the secretariat and advocates, including ally, member, affiliate, branch, supporter, arm, friend etc. but did not prefer any one of these terms more than the other and were happy to continue using the term 'partner'. It was proposed that when starting a new relationship or piece of work, there needs to be clarity about what form the relationship will take on a case by case basis. In some contexts, identifying yourself as part of a Global Campaign is meaningful, but in others it is not.

Next Steps

In the final session of the meeting, participants agreed upon the following actions:

Prepare for Carraguard results

Using the model for the CS results, the secretariat will develop a plan to guide how advocates can respond and what their role can be. GCM will alert the network to the timing of the results. In advance, Q&As for advocates and journalists will be developed with input from advocates and a conference call to discuss the results will be held. Advocates should start to identify journalists who should receive the press release and Q&A and prepare them for this announcement. GCM will try to allow time for materials to be translated and may need assistance with this.

Mapping of European microbicide scientists

Participants agreed to review the draft lists of microbicide scientists in their country and send corrections and further names to the secretariat. Participants were encouraged to make contact with their local scientists and set up meetings for exchange of information about the European projects underway.

Consultation with scientists about FP7 and EDCTP

The secretariat agreed to consult with European microbicide scientists to gauge if there is consensus across the field about the value of FP7 and EDCTP as mechanisms for moving the field forward. If so, the secretariat would propose a consensus statement and a hearing in the European Parliament to raise awareness of the issues. Participants would need to mobilise local scientists to endorse the statement and feedback any concerns to the secretariat.

Funding the missing pieces

GCM would be looking into the question of how donors can fund the wider picture and will collaborate with IRMWG to identify and target budget lines for rectal microbicide R&D. The question of whether GCM should lobby for an overarching mechanism to make decisions about which products are taken

forward will be discussed at the Steering Committee in Amsterdam in July. The SC will also discuss the creation of a new fund for advocacy. GCM and others will keep track of the WHO working group on public health and its implications for R&D for public health goods.

National level advocacy

Participants discussed various tactics and strategies to start to work on the three goals. The secretariat asked to be kept informed about any activities towards governments and policymakers. Several needs were identified in order to undertake this work: clear messages; access to experts including Lori Heise, microbicide scientists and community testimonials; trainings and teleconferences; information packs and briefing papers.

Strategies to begin this work that partners could initiate themselves included:

- Using GCM materials, such as factsheets and powerpoint presentations to educate themselves and others in their organisations
- Studying the Microbicides Development Strategy and GCM parallel advocacy roadmap as a basis for fundraising strategies
- Organising regular meetings to discuss hot topics with experts, and speaker training events to build confidence in answer difficult questions
- Creating media packs (secretariat can assist)

Building relationships with advocates in trial-host communities

GCM is moving away from a Global North and Global South division and will seek to facilitate cross-regional dialogue. There are many opportunities to build links with advocates in trial sites, contact the secretariat for further information.

Exhibit tour

The secretariat will continue to support the tour of the microbicides exhibit “In Her Mother’s Shoes” to European Parliaments and other venues. Currently the exhibit is available in English and French, but transcripts in local languages can be provided. To request the exhibit, contact the secretariat.

Spreading the message

Participants were urged to identify conferences and opportunities where the microbicide message needs to be highlighted, such as the Women Deliver conference in London in October. The secretariat can assist in developing a calendar of events but it is ideal for partners to attend as representatives of the Campaign as well as their own affiliations.

Closing Thoughts

Participants were asked to share their closing thoughts and reflections. Many commented on the quality of the information presented, the usefulness of the meeting in helping to identify the next steps for national level advocacy work and the strong strategic element by clarifying goals and objectives. The Irish participants announced that they now had clear next steps for how to move forward with the Irish Campaign for Microbicides. Those that were fairly new to the issue found the meeting very interesting and nearly everyone had learned something new over the two days. The walk and talk was one of the most popular elements.

Participants congratulated GCM staff on a very well organised and enjoyable meeting. Finally, Henrik strongly recommended that partners take the opportunity to host the meeting as it had been a great way of attracting media attention to the microbicides issue. The GCM staff thanked the participants for their tremendous contribution to the Campaign’s strategic development and looked forward to an ongoing fruitful collaboration.

ANNEX 1

Thursday 31st May

Morning Session:

The microbicides field and Europe's role in shaping it

Facilitator:

Rebekah Webb, GCM

09.00 – 9.30

Walk and talk – As you walk from the hotel to the meeting venue, we ask you to discuss the following question: “What have been the outcomes of the collaboration between your organisation and GCM to date?”

09.30 – 10.00

Welcome and introductions

10.00 – 11.30

Overview of the microbicides landscape

- The microbicides landscape and current challenges
- Current European investment and support for microbicides

Reporting back:

- The European Advisory Group
- Rectal microbicides working group
- Outreach working group
- Secretariat report

11.30 – 11.45

Tea/coffee break

11.45 – 13.00

Scenario Planning

- Latest news on the CS trial closures
- Overview of pending trials results
- Review of the four possible scenarios for microbicides (cancellation, uncertainty, disappointment, success)

Small group exercise (one group per scenario):

What worked well with the CS trial closures? What could be done better? What needs to be in place for the various scenarios?

13.00 – 14.00

Danish Lunch – during which the film “In Women's Hands” will be shown

Walk and talk – Discuss the following question: “If the European Campaign could have only one key goal, what would that be?”

Afternoon Session: Setting goals for NGO advocacy in Europe

Facilitator: Georgina Caswell, AHPN

14.00 – 15.30 Setting the advocacy agenda

Reviewing the following three goals, which are most important?

A – Raising money for research

B – Educating the media and policymakers

C – Getting key constituencies on board

Small group exercise (three groups):

- Countries that are major donors (UK, Ireland, Netherlands, Denmark, Norway)
- Countries that are ‘new’ to microbicides (Spain, France, Germany, Belgium, Finland, Sweden)
- The role of the EU (NGOs that work at EU level)

15.30 – 15.45 Tea/coffee break

15.45 – 16.45 Establishing priorities in Europe
What are the key goals? Feedback from walk and talk.

16.45 – 17.00 Wrap-up of the day

19.00 Dinner

Explanation of the exercises:

- **Walk and talk** – Participants pair up and discuss a specific topic or question before the discussion in plenary so that ideas have had a chance to surface and be explored. Walking aids the brain’s function and participants arrive or return to the meeting refreshed and ready to debate the issues.
- **Straw man/woman** – A volunteer sets out all the arguments for or against a proposition. All participants are invited to add to the set of arguments and then we tear the straw-man or woman down by taking it apart and questioning the arguments. This exercise helps to reach consensus on a way forward at a cross-roads.

**Friday 1st June
Morning Session:
Facilitator:**

**Evaluation and planning 2008-2011
Marc-Andre Leblanc, GCM**

- 09.00 – 9.30** **Walk and talk** - As you walk from the hotel to the meeting venue, we ask you to discuss the following question: “As microbicides advocates, what do you most need from the Campaign in 2008-2011?”
- 09.30 – 9.45** **Recap** - hot topics and summary from previous day
- 9.45 – 10.15** **GCM Strategic Review and Evaluation – what have we learned?**
- Highlights so far
 - Feeding into the Strategic Planning Process
- 10.15 - 11.15** **How do we reach our goals?**
- “Straw-person” exercise:**
In Europe, the Campaign should:
1. Focus only on campaigning (short focused national/regional campaigns, specific materials and goals)
 2. Focus only on supporting partners to do the work (grants, working groups)
 3. Broaden to include other new or existing prevention strategies (e.g. vaccines, cervical barrier methods, female condom etc)
- 11.15 – 11.30** **Tea/coffee break**
- 11.30 – 12.30** **Discussion on ‘partnership’**
- Does the term ‘partner’ work well, or do we need to re-visit the concept?

Afternoon Session: Looking ahead to the coming year

Facilitator: Henrik Arildsen, HIV Denmark

- 14.00 – 14.30** **Messaging**
Overview of current messaging
- 14.30 – 15.00** **GCM Calendar of events and activities**
- 15.00 – 15.15** **Tea/coffee break**
- 15.15 – 16.00** **Who does what? Review of tasks at hand**
- 16.00** **Close and thanks**

ANNEX 2

List of participants

Name	Organisation	Country
Henrik Arildsen	HIV Denmark/ HIV Europe	Denmark
Gabriel Boichat	gTt	Spain
Brigitte Bruun	AIDS Fondet	Denmark
Georgina Caswell	AHPN	UK
Shirin Heidari	Noah's ARK	Sweden
Lut Joris	Sensoa / IPPF	Belgium
Irene Keizer	AIDS Fonds	Netherlands
Ciaran McKinney	GLEN	Ireland
Celine Mias	IPM	Belgium
Annabel Mowat	HIV Scotland	UK
Kim Mulji	NAZ Foundation Int.	UK
Michal Odermarsky	EATG	Sweden
Genevieve Paichele	CNRS	France
Sini Pasanen	Positiiviset	Finland
Carmen Tarrades	ICW	UK/Spain
Rosie Toner	IFPA	Ireland
Moniek Van der Kroef	Stop AIDS Now	Netherlands
Aurelie Verny	AIDES	France
Alain Volny-Anne	Translator	France
Lydia Zigomo	Water Aid	UK

GCM Staff:

Marc-Andre Leblanc, Global North Coordinator

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