

InterAction

FPA INTERNATIONAL DEVELOPMENT - A UNIT WITHIN THE NEW ZEALAND FAMILY PLANNING ASSOCIATION

HIV/AIDS and sexual and reproductive health - linking the response

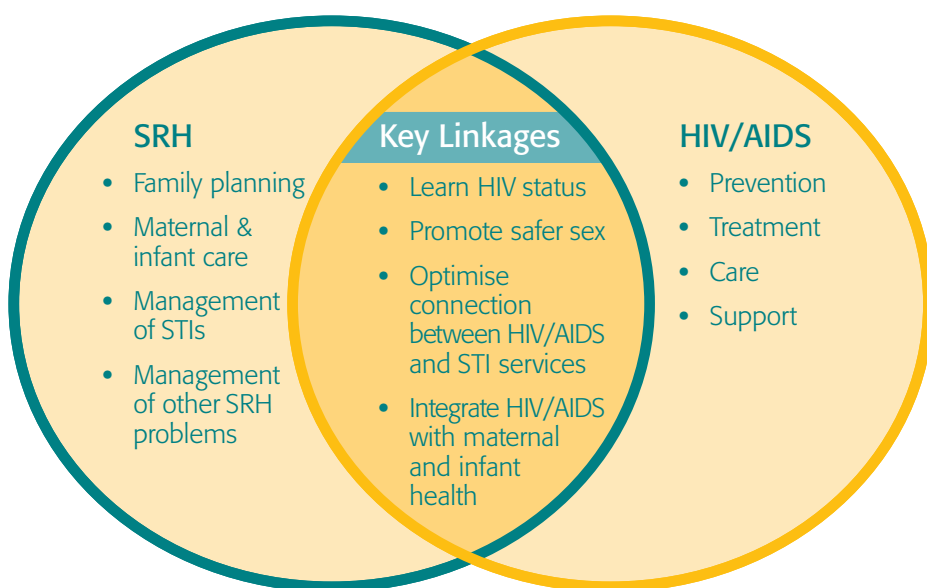
Globally, the overwhelming majority of HIV infection is sexually transmitted, or associated with pregnancy, childbirth or breastfeeding. Poor sexual and reproductive health (SRH) and greater vulnerability to HIV infection also share common roots, including poverty and discrimination based on gender. Yet far too many policies and programmes for HIV and SRH remain separate and fail to recognise these critical linkages.

Why haven't the linkages been made?

A number of factors have contributed to the separation of SRH and HIV interventions, including reproductive health being traditionally viewed as only "family planning", while HIV interventions were initially focussed towards "high risk" groups such as sex workers, injecting drug users or men who have sex with men. In some developed countries like New Zealand and the UK, men who have sex with men remain the majority who are infected and at-risk, and in many countries a false, stereotyped dichotomy of wholesome healthy families and deviant minorities has developed.

With the recent development of antiretroviral therapies, the focus for many HIV activities has shifted from prevention to treatment. Many HIV/AIDS co-ordinating bodies in the developing world have shifted the structural location for their activities from reproductive health to the communicable diseases directorate.

Meanwhile, the SRH community, with its greater focus on women's issues, has been slow to recognise the potential of its role in the prevention of HIV transmission. When the global movement for SRH and rights took a giant leap forward at the 1994 International Conference on Population and Development (ICPD) in Cairo, HIV/AIDS strategies were included in the resulting Programme of Action. However, few HIV/AIDS experts, activists and stakeholders were centrally



Source: WHO/UNFPA/UNAIDS/IPPF

involved, and the SRH community was slow in recognising the urgency of the escalating epidemic and focusing on it adequately while forging ahead with the Cairo agenda. Funding, support mechanisms and competition for resources have further discouraged integrated work on the continuum of SRH and HIV/AIDS care and prevention.

A fundamental shift

But there has since been a fundamental shift in thinking among the SRH and HIV/AIDS communities as both have found a common cause in combating HIV/AIDS. This now requires joint advocacy to build the political and financial will to sustain their collective efforts, recognising the need for multiple points of entry for different populations who may prefer a certain type of service, or for

communities where there is only a family planning clinic available.

The commitment of the international community to intensify these linkages at the policy and programme level was expressed in a June 2005 UNAIDS paper *Intensifying HIV prevention*, which builds on the *New York Call to Commitment: Linking HIV/AIDS and Sexual and Reproductive Health*¹ and the *Glion Call to Action on Family Planning and HIV/AIDS in Women and Children*².

Furthermore, 151 countries at the 2005 United Nations World Summit recognised that HIV/AIDS and other infectious diseases pose severe risks for the entire world, and serious challenges to the achievement of development goals and the elimination of poverty. To this end, in the section of the outcome document related to HIV and other

diseases, they committed to:

Achieve universal access to reproductive health by 2015, as set out in the International Conference on Population and Development, integrating this goal in strategies to attain the internationally agreed development goals, including those contained in the Millennium Declaration aimed at reducing maternal mortality, improving maternal health, reducing child mortality, promoting gender equality, combating HIV/AIDS, and eradicating poverty. (Paragraph 57g)

This was affirming for FPAID and others involved in a global civil society effort to ensure SRH and rights were properly reflected within the outcome of the Summit. Notably, New Zealand was a strong advocate for including the linkage between universal access to reproductive health and the MDGs, in particular the prevention and treatment of HIV/AIDS.

This year, FPAID is one of many NGOs around the globe focusing on the implementation of the World Summit outcome document, and on the UN meeting in New York (31 May - 2 June) to review the 2001 UN General Assembly Special Session (UNGASS) on HIV/AIDS. Along with organisations including the International Planned Parenthood Federation (IPPF) and members of the Asia Pacific Alliance (APA), FPAID will be working to make sure linkages between HIV/AIDS and SRH are reinforced at the UNGASS review and in implementing the World Summit outcome document.

This will be important as the outcome of the UNGASS review meeting will set a new platform that will guide governments' action to halt and reverse the spread of HIV in their countries and across the world, and to provide high quality treatment and services for people living with HIV/AIDS in all countries.

A framework for strengthening the linkages

The World Health Organisation (WHO), United Nations Population Fund (UNFPA), Joint United Nations Programme on HIV/

AIDS (UNAIDS) and IPPF have published a framework³ that proposes a set of key policy and programme actions to strengthen linkages between SRH and HIV/AIDS programmes. It lists important health benefits from these stronger linkages, including:

- improved access to, and uptake of, key HIV/AIDS and SRH services
- better access for people living with HIV/AIDS to SRH services tailored to their needs
- reduced HIV/AIDS-related stigma and discrimination
- improved SRH service coverage of underserved and marginalised populations, such as injecting drug users, sex workers or men who have sex with men
- greater support for dual protection against unintended pregnancy and STIs, including HIV, for those in need, especially young people
- improved quality of care
- enhanced programme effectiveness and efficiency.

Some facts to consider ...

- *Worldwide, almost half the 40 million people living with HIV/AIDS are women.*
- *Young people aged 15-24 account for nearly half of all new cases of HIV world-wide - the majority of them young women.*
- *Physically, women and girls are highly vulnerable to HIV. Gender inequality, poverty and violence increase their physiological risk and limit their ability to negotiate condom use.*
- *For many people, and particularly women, sexual and reproductive health services are the most familiar and accessible entry points for HIV/AIDS prevention, treatment and care.*

References:

- "Why Reproductive Health and HIV?", by Matt Samuels, *Just Change*, January 2006
"Can This Marriage Work?", by Jeffery O'Malley, *Countdown 2015: Sexual and Reproductive Health and Rights for All*, 2004

The ties that bind

SRH providers have a long history of working with people around their sexual and reproductive needs, and are in an excellent position to assist in the prevention of HIV infection as well as provide services for people living with HIV. These services include: counselling on reproductive choices for people living with HIV/AIDS and their partners; and maternal health services to women living with HIV/AIDS, including infant feeding counselling, family planning and access to HIV/AIDS care treatment and support.

Likewise, HIV organisations have a wealth of knowledge around working with marginalised communities, and this knowledge can contribute to improving SRH services. Some HIV providers are also situated to be able to offer advice on safer sex, contraception, and the diagnosis of STIs.

Indeed, STIs are a key issue linking the SRH and HIV agendas. More than 300 million cases of curable STIs occur globally each year, with consequences from a maternal health point of view that include complications in pregnancy, spontaneous abortions, premature birth, still birth and congenital infections. From an HIV perspective, detecting and treating STIs is important because STIs facilitate HIV transmission. One of the most effective means of identifying people at highest risk of HIV infection is to identify people with STIs and target them in HIV prevention efforts.

¹ www.unfpa.org/icpd.10/docs/hiv_aids_rh_call_commitment.doc

² www.who.int/reproductive-health/rtis/docs/glion_cal_to_action.pdf

³ www.who.int/reproductive-health/rtis/docs/framework_priority_linkages.pdf

Healthy Men, Healthy Families and the fight against HIV/AIDS

HIV/AIDS has taken hold in the Pacific, fuelled by high rates of sexually transmitted infections (STIs), the low status of women and lack of access to sexual and reproductive health (SRH) information and services. A new FPAID project in Fiji and the Solomon Islands aims to help fill an important SRH gap in the fight against HIV/AIDS, with a focus on men.

Called "Healthy Men, Healthy Families", the project will focus on behaviour change to create societies that are more able to discuss issues of sexuality, sexual relations, and SRH openly, free of discriminatory language.

FPAID Pacific Programme Manager Joanna Spratt says a cultural paradigm of male dominance across the Pacific and some men's belief they should be dominant in all areas of life - physically, socially, economically, politically and particularly sexually - places women at risk of unwanted sexual encounters, pregnancy and infection with disease, including HIV.

Official figures place the number of people in the Pacific living with HIV at 15,000 but it is widely reported that the actual figure is 10 times higher. Hardest hit is PNG, with an estimated 25,000 - 69,000 infected people, and where an epidemic of similar proportions to the one in Sub-Saharan Africa has been predicted. However, because prevalence levels in the Pacific generally still remain relatively low, there is a window of opportunity to curb the spread of the virus before it is too late.

Latest figures for Fiji are 205 reported cases of HIV, although the Ministry of Health estimates this is only a third of the actual number, and UNAIDS and WHO projections put the number of people living with HIV/AIDS in Fiji at 600 at the end of 2003 (with a range of 200 - 1300). In the Solomon Islands, there are currently only six known cases of HIV. But, like Fiji, it is generally accepted that the number of people with HIV is much higher than reported, due to the lack of voluntary, confidential counselling and treatment, knowledge and data collection, and a high prevalence of STIs.



Joanna notes that both Fiji and the Solomon Islands have excellent strategies in place to combat HIV/AIDS, and the FPAID project can contribute greatly to HIV prevention there. The project also builds on previous FPAID "Men as Partners" (Fiji) and "Male Involvement in Reproductive Health" (Fiji and the Solomon Islands) projects (supported by the United Nations Population Fund and New Zealand Agency for International Development).

As with these previous projects, "Healthy Men, Healthy Families" is based on the acknowledgement that men in the Pacific are often unaware of the impact of their behaviour on the women in their lives. Some men have been reduced to tears when they realise this, Joanna says.

"Educating and encouraging men to be more responsible and supportive sexual partners enhances their health and well-being, as well as the health and well-being of their partners."

Project activities aim to raise awareness of men's and women's SRH needs and wellbeing, and the need for gender equality, and to encourage communication and understanding between couples on contraception and family responsibilities. Activities include:

- community education workshops for men and couples on SRH, including equality in partnerships and decision-making, domestic violence and HIV/AIDS
- training workshops with nurses and

midwives to improve their ability to provide services and information to men around men's SRH, including HIV/AIDS.

- extending community based condom distribution networks
- developing relevant information, education and communication materials to promote the importance of men's involvement in reproductive health.

Joanna notes that, across the Pacific, churches and villages can provide excellent settings within which to promote SRH, and HIV awareness. "When people are living with HIV and if they develop AIDS, their church and village community can be a source of deep support. Similarly, these community settings can provide assistance for young women who become pregnant, and encouraging environments for relationships to flourish."

She adds that while all too often this is not the case, this is slowly changing as people gain greater awareness of the issues involved.

Extra, extra!

Earth from Above

Readers are encouraged to visit "Earth from Above", a free exhibition in Waitangi Park in Wellington comprising a series of photographs by Yann Arthus-Bertrand. Sponsored by SKYCITY Entertainment Group, the exhibition includes captions about our globe and its environment, and issues of development - showing until 9 April.

PNG study tour

In April, MPs and journalists from New Zealand will participate in an eight-day study tour to Papua New Guinea focusing on the relevance of the Millennium Development Goals (MDGs) in the Pacific. Funded by the Asia Pacific Alliance (APA), and organised by FPAID and APA partner the Development Resource Centre, the study tour will focus particularly on the importance of good SRH in achieving the MDGs in the Pacific. New Zealand Parliamentarians Group on Population and Development (NZPPD) Chair Steve Chadwick, and NZPPD members Tim Barnett and Paul Hutchison are attending, as well as journalists from the *New Zealand Herald*, *New Zealand Listener*, and TVNZ. Other participants include FPAID celebrity spokesperson Stacey Daniels, staff from the New Zealand Agency for International Development (NZAID), a photographer, an Australian MP and an NZFPA National Council member. The next issue of *InterAction* will feature news from the study tour.

Wellington to host Women Parliamentarians Conference

As secretariat for the NZPPD, FPAID is organising a meeting in Wellington of women parliamentarians from around Asia and the Pacific (11/12 June). Funded by the Asian Forum of Parliamentarians on Population and Development (AFFPD), the meeting will explore the theme "Gender responsive governance - the key to the population and development agenda". NZPPD's involvement in the meeting follows Steve Chadwick's recent election onto the AFFPD Executive Board as Chair of the Standing Committee on Women. A key focus of this committee is gender equality and the elimination of violence against women. This is also one of the NZPPD's strategic focus areas, in addition to sustainable development, SRH, HIV/AIDS and official development assistance.

FPAID manager attends CSW

FPAID manager Eileen Kelly recently attended the 50th session of the Commission on the Status of Women (CSW) as part of the New Zealand government delegation. This year's session focused on two themes crucial to women's progress around the world: their participation in development; and their role in decision-making in all areas of society. A statement issued to the CSW by Steve Chadwick on behalf of the AFFPD Standing Committee on Women welcomed the call for participation by women at all levels of decision-making. The statement focused in particular on HIV/AIDS, noting with deep concern that women are disproportionately affected by poverty and HIV/AIDS. Strategies to respond to the HIV/AIDS crisis have all too often failed because they do not include a gender perspective, because women have not been involved in leading the formation of policies and implementation of strategies, the statement said. Women in decision-making was also the theme of International Women's Day (8 March).

The SRH and environment link

- Pacific Programme Manager Joanna Spratt visited Kiribati and Vanuatu in January to evaluate FPAID's Community Based Population and Environment (CPBE) small grants projects. The Packard-funded CPBE grants have enabled grass roots groups to undertake activities to raise awareness of population and environment linkages while providing a means to address some of these issues, such as population pressures impacting on water supplies.
- During a Population Research Bureau Conference on Population, Health and the Environment held in the Philippines this month, Joanna joined Komera Otea from the Foundation of the Peoples of the South Pacific Kiribati (FSPK) in making a presentation about their experiences in implementing the CPBE project in Kiribati and Vanuatu.

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Input Are there any topics that you would like to see included in future?
