



Inclusive and integrated HIV and AIDS programming

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HANDICAPINTERNATIONAL

About Handicap International

"Handicap International is an independent and impartial international aid organisation working in situations of poverty and exclusion, conflict and disaster.

Working alongside persons with disabilities and other vulnerable groups, our action and testimony are focused on responding to their essential needs, improving their living conditions and promoting respect for their dignity and their fundamental rights."

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About this policy brief

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Editing Michael GUY Layout Stéphanie DEYGAS This policy brief is an introduction to Handicap International's 2012 Policy Paper "Inclusive and integrated HIV and AIDS programming", the full version can be downloaded from Skillweb:

http://www.hiproweb.org/uploads/tx_hidrtdocs/PP07_06_light.pdf



Key messages from the Policy Paper

HIV and AIDS remains one of the most widespread disabling epidemics worldwide. According to the 2010 Global Report of UNAIDS, there are 33.3 million adults and children living with HIV in the world, with the heaviest account in Sub-Saharan Africa (22.5 million), followed by South East Asia (4.1 million). In Sub-Saharan Africa, around 60% of people living with HIV are women, thus confirming the alarming feminization of the epidemic.

Persons with disabilities, who constitute approximately 15% of the global population (more than one billion people), have a heightened risk to HIV infection compared to non-disabled persons due to limited access to HIV education, information and prevention services; at risk behaviours leading to HIV infection; limited access to HIV treatment, care and support; high vulnerability to sexual violence; limited knowledge and capacity of services providers to render inclusive services; and stigma and discrimination.

It is not possible to effectively address the HIV epidemic toward universal access without comprehensively addressing the rights of persons with disabilities through integrated and inclusive programming.

Handicap International's HIV and AIDS programming adopts a comprehensive, disability-inclusive approach that is also integrated to sexual and reproductive health and sexual and gender-based violence services. Handicap International's projects on HIV and AIDS are centred on four key areas of intervention:

- HIV prevention
- Treatment, care and support including different types of rehabilitation services
- Integration with sexual and reproductive health (SRH)
- Integration with gender-based violence (GBV)

Why does Handicap International work in the field of HIV and AIDS?



Importance and context

Globally, there are 33.3 million adults and children living with HIV.

Recent statistics demonstrate that HIV and AIDS is not only mostly affecting women (including pregnant women), but also youth (especially females), sex workers, uniformed personnel, injecting drug users, men who have sex with men and other vulnerable populations, such as persons with disabilities. HIV and AIDS is primarily a result of the key drivers of poverty, gender disparity and human rights abuses which increase vulnerability and exposure to HIV.

The UNAIDS 2011-2015 Strategy states that "when social support and other programmes for persons with disabilities are delivered in an HIV-sensitive manner, they contribute to overcoming the historic neglect of HIV prevention and support for persons with disabilities. The significantly under-reported rates of HIV infection and related disease and death among persons with disabilities also need to be tackled directly through AIDS programming efforts."



Article 25 of the UNCRPD

"States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gendersensitive, including health-related rehabilitation".

What is the link between HIV and AIDS and Disability?

To date, HIV and AIDS remains one of the most widespread disabling epidemics worldwide. The disease leads to impairments, activity limitations and reduced social participation. This has a severe impact on quality of life, both for people infected with HIV and AIDS and their affected families and communities. Any person living with HIV is likely to experience temporary and/or chronic impairments at different phases of the illness, due to acquired infections and/or side effects from taking antiretroviral drugs. Persons with disabilities who become HIV positive might also undergo similar processes of activity limitations, in addition to existing impairment(s).

In light of the Convention on the Rights of Persons with Disabilities (2007), asymptomatic people living with HIV can also be considered as disabled, due to exclusion from social participation as a result of stigma and attitudinal and environmental barriers related to their health status.

Why intervene?

As a key development issue, Handicap International has been involved in the global HIV response since 1994, with its first field interventions in Burundi. Handicap International was one of the first organisations to speak about the interrelation between HIV and disability in the context of developing countries, spearheading the Africa Campaign on Disability and HIV and AIDS.

The primary rationale for Handicap International's operational strategy on HIV and AIDS concerns the marked vulnerabilities to HIV of persons with disabilities who constitute approximately 15.6% (11.8-18.0%) of the world's population. Persons with disabilities have an equal or heightened risk to HIV infection compared to non-disabled persons. This challenges the common misconception that persons with disabilities are sexually inactive and do not require HIV or sexual reproductive health services.

This view that persons with disabilities are highly vulnerable to HIV and AIDS is in keeping with the general recognition that marginalized, stigmatized communities with limited access to basic human rights are frequently at higher risk of HIV infection and feel the impact of HIV and AIDS more significantly. With this context, women and men with different impairments (physical, sensory and particularly intellectual and mental) have often been ignored in HIV prevention, treatment, care, support and impact mitigation services, along with sexual and reproductive health promotion and gender-based violence protection services.

In recent years there has been increasing global understanding about HIV and the interrelation between HIV and AIDS and disability. Handicap International has been at the forefront of promoting this change, actively contributing to increased programmatic attention, publications and research on (a) the vulnerability and risk factors of persons with disabilities to HIV (b) the impacts of the HIV epidemic regarding episodic/chronic impairments leading to disability and (c) advocacy by Disabled People's Organizations and disability organizations to promote the inclusion of disability in HIV programming at international and national levels.

How does Handicap International work in the field of HIV and AIDS?



Overview

Handicap International's HIVrelated initiatives, specifically for implementing integrated and inclusive HIV prevention, treatment, care and support services must ensure:

- A disability inclusive approach, responsive to the needs of people with all types of impairments
- A comprehensive approach
- A gender inclusive approach
- An approach which fully acknowledges and responds to fundamental human rights

Handicap International promotes an inclusive approach to improving quality of life and access to services for persons with disabilities. This means that basic health care and socioeconomic services are developed according to the principle of Universal Access, where *all* people with impairments (whether physical, sensory, intellectual or mental), have equal access and opportunities for participation. This inclusive approach also ensures that gender considerations and disparities are acknowledged as a cross-cutting issue.

This is achieved by advocating for disability inclusive and integrated HIV policies to sexual and reproductive health and gender-based violence programming; enhancing capacities of health care professionals to provide appropriate and accessible information and services; structural changes in attitudes, policies and environment through removal of barriers and promotion of facilitators at all levels to foster equal social participation; improvement in enjoyment of Human Rights by women and men with disabilities; empowerment of disabled people's and community-based organizations; developing strategic partnerships at different levels; and developing evidence-based strategies for HIV programming.

Particular target populations with whom Handicap International is working on HIV are: marginalized women and men of reproductive age; persons with disabilities (women, men, boys and girls with physical, sensory, intellectual and mental impairments) and their families; children, young women and men in and out of school, women, men and youth living with HIV and their families; orphans and vulnerable children and their families; mobile populations; survivors of gender-based violence and their families; ethnic minorities; sexual minorities and prisoners.

In addition, Handicap International targets various service providers directly involved in health care or indirectly influencing it. Community and traditional/religious leaders are targeted for enforcing policy changes and promoting behaviour change at local level towards more sustainable outcomes. Handicap International works closely with Disabled People's Organizations (DPOs) and other community-based organizations, AIDS organizations, associations of people living with HIV, national AIDS authorities and health facilities.

Linkages with other areas of Handicap International's work

Given that HIV and AIDS intersects with, and impacts on, various spheres of life, initial work and linkages have been established with various departments of Handicap International: 1) in 2011, an internal survey on HIV and rehabilitation involving 10 HIV and 34 physical rehabilitation projects was undertaken, indicating a strong need to implement joint projects to better respond to the rehabilitation needs of people living with HIV and persons with disabilities; 2) initial work has been put in place to explore the intricate links between HIV and AIDS and psychosocial support; further work is planned for 2012 onwards; and 3) joint proposals combining HIV and economic support are being promoted throughout various programmes.



Objectives for 2011-2015

- Consolidate and refocus all its projects on HIV and AIDS (ongoing and new)
- Mainstream disability in the HIV continuum of care with a cross-impairment approach
- Develop a practical guide on the inclusion of disability in HIV prevention, treatment, care and support services
- Promote research, studies and baselines that link HIV and AIDS to disability in target countries where Handicap International is implementing projects
- Identify lessons learned and good practices
- Implement inclusive and integrated HIV, sexual and reproductive health and gender-based violence projects

INCLUSIVE AND INTEGRATED UNIVERSAL ACCESS AND SOCIAL PARTICIPATION 3 4 SERVICES TOWARDS PROTECTION SERVICES SERVICES SRH GBV Emergency contraception Community mobilization Management of other STI prevention and managment Safety and security Femily planning Safe abortions SRH problems Psychological Prevention MINCH Police Legal Ħ oddns leisosovisksd s ixeiklydola sinsodxa-isod SERVICES ACCESSIBLE TO ALL Different rehabilitation services Community mobilization SERVICES Ols and STIs treatment Psychological support Adherence counselling ŽΕ **Nutritional support** Livelihood support Stigma reduction Pain management BACK REFERRAL Support groups REFERRAL AND Default tracing Access to ARV Positive living SES. ď SERVICES PPTCT WITH AND WITHOUT DISABILITIES people with and without disabilities at project and organizational levels. WOMEN/GIRLS AND MEN/BOYS Disability inclusive and integrated HIV Services need to be accessible to programming MARPS