Jacqueline's Story, Uganda *A positive role model*

Despite HIV prevalence stabilising at less than 7%, it is estimated that 132,000 Ugandans are infected by the virus every year.

When her baby died, 17 year-old Jacqueline Alesi accepted she should be tested. "I used to think that HIV... would not happen to me."

Now 23, Jacqueline works to spare others from the anguish she endured on discovering she was positive. A peer counsellor for *Young Positives*, a non-governmental organisation in Kampala, she shares her story in schools. "I have taught so many people about the virus... just because I have HIV, doesn't mean I'm sick with AIDS."

Besides counselling and educating, *Young Positives* runs income generation and home based care activities to help young people affected by HIV to live positively.

Irish Aid is one of the donors supporting *Young Positives* and other civil society organisations through a joint basket fund, which allows grants to be distributed in a streamlined way. Irish Aid also supports the Ugandan Government's National Strategic plan for HIV and AIDS and the Ugandan AIDS Commission.

Source: Children's Stories

4. Policy Priorities Going Forward

We have positioned our response to children living in the context of HIV and AIDS within four key policy areas prioritised within Irish Aid. Poverty reduction, health, education and governance are core components of Irish Aid's policy direction; in the long-term, we want to ensure that a focus on children is mainstreamed into our efforts to realise universal access to essential services and widespread poverty reduction in programme countries.

Poverty

poverty reduction as the overarching objective of Irish Aid, White Paper on Irish

Uaalth

Health Policy, *Improving Health to Reduce Poverty*, (Irish Aid, 2007)

> **Education** Education Policy, *Building Sustainable Education Systems for Poverty Reduction*,

(Irish Aid, 2007)

Governance Good Governance Policy, (Irish Aid, 2007);

Local Development Policy and Guidelines,
(Irish Aid, 2007)

Throughout a lengthy process of consultation and engagement with a wide range of stakeholders and Irish Aid staff at regional, country and HQ levels, **four priority responses**, supported by evidence, are the focus of our response to children in the short-to-medium term: -

Irish Aid will contribute to the global, regional and country level debate on social protection, while supporting and advocating for the extension of **social protection** mechanisms to benefit children living in the context of HIV and AIDS as enshrined in the United Nations Convention on the Rights of the Child, 1989.

Ireland will work to keep **PMTCT** and **paediatric treatment** on the global agenda, while advocating for and supporting at regional and country levels, responses that will facilitate an increase/remove barriers to access to PMTCT and paediatric services in the context of health system strengthening.

Irish Aid will support initiatives that seek to **strengthen** the role of **civil society** in the context of children affected by HIV and AIDS at country level, while encouraging the development of **partnerships** with the state. Irish Aid will further support and advocate for initiatives that enable partnerships between community, faith-based and national NGO's to strengthen the potential for 'one' civil society voice at national level.

While prioritising support for education through programmatic approaches, Irish Aid will also support specific **targeted** interventions in **HIV prevention** education that seek out the most vulnerable, hard-to-reach children including those living on the street, out-of-school youth and child-headed households.

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Policy Paper - Guidelines

Children Living in the Context of HIV and AIDS



Briefing Paper

Safeguarding the Environment to Reduce Poverty

1. Introduction

It is estimated that in excess of 1,000 children become infected with HIV daily and 2 million children are living with HIV worldwide. Of those, 80% are born in sub-Saharan Africa and 90% of infections are acquired through Mother-to-Child (MTC) transmission. However, only 33 per cent of HIV positive pregnant women in low and middle income countries are receiving anti-retroviral prophylaxis, which can reduce the risk of MTC transmission, by 40%¹. HIV progresses rapidly in children with an estimated one third of infants dying by the time they reach their first birthday. In 2007, an estimated 270,000 children died of AIDS-related causes; the vast majority of these deaths were preventable.²

While not infected with HIV, many more children are affected and it is estimated that 15 million children under 18 years have lost one or both parents to AIDS, with the vast majority, 12 million, resident in sub-Saharan Africa. With the consequent loss in affection, support and protection, children are rendered more vulnerable to poverty, social dislocation, exploitation and abuse, while others may become responsible for the care of siblings and/or other ill adult members of the household.

Poverty reduction, to reduce vulnerability and increase opportunity, is the overarching objective of Irish Aid and the foundation on which Irish Aid's response to children is built. While recognising the devastating impact of HIV and AIDS on the lives of children, particularly in high prevalence programme countries, Irish Aid's understanding of the multiple drivers of child poverty guides a vulnerability targeted response that is HIV and AIDS sensitive.

While the *Guidelines for Children Living in the Context of HIV and AIDS* was originally intended for use by Irish Aid staff working on poverty alleviation, risk and vulnerability, health, education and HIV issues in country programmes and at regional and HQ levels, it also serves as a guide for policy dialogue and to inform Irish Aid's engagement with country governments, regional bodies, other donors, multilateral agencies and NGOs.

The response to children builds on existing policy priorities, including health, education and governance that currently drive and define the work of Irish Aid. These priorities are pro-poor and targeting the most vulnerable to capture households affected by HIV and AIDS within the response.

1 UNAIDS, Report on the Global AIDS Pandemic, 2008.

2 Ibid

Lourdes' Story, Mozambique Living with HIV

At 16%, the HIV prevalence rate in Mozambique is one of the highest in the world, with an estimated 500 new infections every day.

Lourdes was first diagnosed with HIV after her father died. Together with her mother and younger brother, Lourdes is receiving life-saving anti-retroviral (ARV) treatment. When she is not at school, Lourdes likes playing 'tip-the-can' with the other children in her village. The family has received counselling and support from local NGO *Vicodemo*, which provides home based care to people living with HIV across Zavala district in Inhambane province.

Since treatment became available in 2003, there are currently over 100,000 HIV positive people accessing it in Mozambique, of which 7% are children. The Irish Aid/Clinton Foundation Partnership with the Government of Mozambique is making a significant contribution to realising access to treatment. Irish Aid is the largest donor to the health sector in Mozambique and also provides support to the National AIDS Council, which funds the activities of 150 HIV civil society organisations, including *Vicodemo*.

Source: Children's Stories

The full impact of what has been lost to the next generation has not yet been realised but there is no doubt that this time of AIDS has robbed many children of the opportunity to reach their full potential.

An Taoiseach, Brian Cowen, 4th Global Partners Forum on Children Affected by HIV and AIDS, 6th & 7th October 2008.

Standards Underpinning our Response to Children

Good practice standards underpin Irish Aid's implementation of the *Guidelines for Children living in the context of HIV and AIDS*³. We are committed to ensuring that multilateral, bilateral and programmatic responses supported by Irish Aid will incorporate these standards where applicable and practicable. A commitment to quality programming is fundamental to Irish Aid's response and these standards provide the benchmark through which implementation of the response to children will be monitored and evaluated.

Child Rights – Irish Aid's response will be consistent with the *United Nations Convention on the Rights of the Child, 1989* and situated in the context of our commitment to "the promotion of human rights" which is "central to Ireland's foreign policy and all the work of Irish Aid".

Child Protection – Irish Aid will advocate for and support organisations and Governments to operate effective child protection policies and practices.

Child Participation – Irish Aid will work to ensure that children are afforded an opportunity to participate in and influence decisions that affect them, while meaningful opportunities for their participation and engagement in response design and delivery will be facilitated.

Child Poverty Lens – Irish Aid will work to enable holistic and integrated responses to vulnerable children, while advocating for broad-based systemic responses that are rooted in a rights-based pro-poor approach. Our engagement in policy dialogue is consistent with the application of a child poverty lens and the range of aid modalities in which we work.

Lifecycle, Gender and Disability Sensitivity - in negotiating, advocating, shaping and delivering our response to children, Irish Aid will endeavour to ensure that lifecycle, gender and disability sensitive approaches underpin support for children living in the context of HIV and AIDS.

Keeping Families Together - Irish Aid recognises that children's wellbeing is best served by their own families

3 Policy document available on the Irish Aid website, www.irishaid.gov.ie
4 White Paper on Irish Aid, 2006

and in that regard we endeavour to support family-centred approaches where appropriate. We will work to strengthen families and communities affected by HIV and AIDS through a range of modalities, while promoting interventions that contribute to building the resilience of vulnerable households against shocks and hazards.

Irish Aid's standards enshrine our commitment to shape and determine an effective response to children orphaned and/or vulnerable, often times in the context of HIV and AIDS. We are mindful that the language we employ may contribute to the invisibility of children whether at global policy or national level. Therefore, Irish Aid policy and guidance advocates a language that does not inadvertently condone children's invisibility or contribute to objectification and disassociation. Consequently, our dialogue and publications do not use short form acronyms to describe children orphaned or vulnerable in the context of AIDS or other causes.

Matthew's Story, Zambia *Building the future*

More than 1 million Zambians are living with HIV and it is estimated that 630,000 children have been orphaned by AIDS.

When Matthews Nowe's mother died he left school to care for his father. "I had to support his body every time he went to the clinic," says Matthews. "People stared at us. I felt so lonely."

The Home Based Care (HBC) Project in Kabatwa, Lusaka, provided a wheelchair and seeds for the family to grow vegetables. It also funded Matthews through secondary school and a driving course. He now drives a taxi, providing for the family and contributing from his wages to help support his sister through school.

Kabatwa is one of 62 HBC projects under the Archdiocese of Lusaka supported by Irish Aid and other donors. More than 15,000 orphaned and vulnerable children are being helped with secondary school fees, counselling and vocational training.

Through such community initiatives Irish Aid targets Zambia's most needy children. It also works with government and other donors to inform policy and coordinate the broader response to HIV and AIDS.

Source: Children's Stories

3. Irish Aid's Response to Children

"We are committed to increasing our support for programmes that address the needs of orphans and vulnerable children, and that assist families and communities who care for children...

We will allocate up to 20% of the additional resources for HIV and other communicable diseases to support vulnerable children."

(White Paper on Irish Aid, 2006)

Ireland's commitment to vulnerable children is reflected in former Taoiseach, Bertie Ahern's announcement to increase support for interventions that benefit children during the Irish launch of UNICEF's, *Unite for Children; Unite against AIDS*, campaign. Resources earmarked for children affected by HIV and AIDS and other causes are channelled through a range of organisations working at global, regional, country and community levels.

In Zambia, Irish Aid has led an emergency response to children affected by HIV and AIDS in the Copperbelt region through core funding mechanisms to organisations working at community level. Education as an entry point for HIV prevention has been central to Irish Aid's response to children; a number of country programmes have engaged in education system strengthening to build the capacity of teachers to effectively realise HIV prevention, sexual and reproductive health promotion, while ensuring widespread prevention education access for young people.

In Tanzania, comprehensive youth targeted HIV prevention has been the main focus of the programme, with capacity building, life skills development and safer sexual negotiation components incorporated. In Uganda, the media has been effectively engaged in the development of radio programmes broadcast in three local languages, which transmit frank discussions in relation to child rights, life skills development and sexual and reproductive health issues. While also engaged in prevention education initiatives, the Irish Aid programme in Ethiopia has further focused on vulnerability reduction and impact mitigation.

The psychological impact of parental illness and death and the extent to which children's early development is affected in the context of HIV and AIDS has prompted support of trauma counselling and initiatives that work to care and support children though grief. The Horizon's Research Project in South Africa explores current practices on paediatric antiretroviral rollout and integration with childhood development programmes in Limpopo Province, while in Lesotho the GROW project supports children affected by AIDS to develop effective coping strategies to mitigate against the impacts of HIV and AIDS in their lives.

Irish Aid's regional programme primarily focused on Eastern and Southern Africa has

prioritised a number of thematic areas responding to critical needs in the region, including interventions that focus on children who are orphaned or otherwise affected by HIV and AIDS. Consequently, the impact of HIV and AIDS on children has been given special attention in regional policy dialogue, programmatic responses and operational research. Research initiatives supported have focused on child trafficking, child protection frameworks and bottlenecks precluding communities from accessing resources, while education and life skills development characterise programmatic responses.

Through multilateral partnerships with UNICEF, the Global Fund to Fight AIDS, TB and Malaria, the Clinton Foundation, the World Health Organisation, UNFPA and UNAIDS, Ireland contributes to increasing the availability of paediatric treatment, while preventing HIV transmission to children through scale up of Prevention-of-Motherto-Child-Transmission (PMTCT). In supporting research initiatives like the Joint Learning Initiative on Children and HIV/AIDS (JLICA) and Mema Kwa Vijana⁵, Irish Aid aims to expand the evidence base to ensure the development of more effective policies for children in the context of AIDS. Our membership of the Inter Agency Task Team (IATT) for Children and HIV and AIDS at country, regional and global levels is one mechanism through which our commitment to the advancement of policy dialogue in the interests of children affected by HIV and AIDS is currently realised.

Civil society partners are core to Irish Aid's response to children and through Multi-Annual Partnership Schemes (MAPS) and other funding mechanisms, civil society provides a wide range of child focused interventions.

5 Adolescent HIV, sexual and reproductive health research