

THE POWER OF POSITIVE PREVENTION

Presentation by:

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ABOUT WOFAK

- Founded in 1993 by a group of women who had tested HIV positive.
- Registered in 1994 as a national NGO.
- Initially, a forum for mutual support, empowerment, experience sharing and learning to enhance coping with the infection.
- Currently serving close to 7000 women and 2500 orphans across 7 resource centres in Kenya.

ABOUT WOFAK (cont)

- In 1994, institutionalization efforts started, first resource centre was established in Kayole.
- Faced the real faces of societal stigma and discrimination around Kayole, but persistent community sensitization and advocacy helped in overcoming these challenges.
- Members started coming in for support in small numbers, later on in bigger numbers.

WOFAK Place in the fight against HIV/AIDS

- WOFAK primarily focuses on treatment, care and support for women and children.
- We have a smaller component of our work on prevention that focuses on the youth in schools.
- Today, we serve close to 6400 women and 2500 children affected by HIV/AIDS.
- 7 resource centres are up and running in Kayole, Korogocho, Ngong Road, Mombasa, Kisumu, Homa Bay and Bumala (serving 3 Districts).

PROGRAMS OF WOFAK

- Counselling (one-to-one & group therapy)
- Home based and hospital care
- Medical care (O.I, herbal and ART)
- Nutritional care (food basket, supplements, counselling)
- Orphans & other vulnerable children care and support
- Community sensitizations- Behaviour change
- Trainings for frontline caregivers
- Economic empowerment for +ve women, guardians & older OVC

Defining the concept “Prevention with Positives” (PwP)

- Prevention with positives is a relatively new concept which is still not clearly understood or articulated in day-to-day programming on HIV and AIDS activities.
- The concept has continued to gain momentum with the introduction and scaleup of antiretroviral therapy (ART) services which has given rise to a huge population of PLHIV who know their status and are living longer, healthier lives.
- The concept was first defined and discussed more elaborately during the International AIDS pre-conference summit dubbed “*Living Summit 2008*” in Mexico City by an International group of people living with HIV.
- It was agreed that PwP should be defined as an approach to prevention that seeks to increase the psychosocial wellbeing of people living with HIV and encourage solidarity amongst and for PLHIV.
- Engagement of PLHIV in prevention activities is just one aspect of this program, thus giving HIV infection a human face. Prevention efforts will be incomplete without a central role played by PLHIV.

Defining “Prevention with Positives” (PwP)

- Positive prevention is based on a culture of shared responsibility,
 - a. that the responsibility to avoiding HIV transmission is not only placed on the person living with HIV, but on both partners in an environment of open communication and equality in relationships.
- Positive prevention is therefore an empowerment concept, which ultimately enhances the fight against HIV in the world.
 - a. It is a concept that is defined and owned by people living with HIV, and most critically, those who know their HIV positive status.
- Community groups of PLHIV have observed that positive prevention can make powerful contribution to counter stigma and discrimination as:
 - a. it will empower and meaningfully involve people living with HIV in the entire fight against the epidemic.

The Pillars of prevention with positives

- Prevention with positives must be centred on the efforts of people who know that they are living with HIV, to learn and practice ways to promote their own health, prevent disease and ultimately improve their quality of lives.
- Although successful Prevention with positives will also reduce HIV transmission, the concept cannot only be strictly about preventing HIV infection. This is because it is centred on the lives of people who already know their status.
- When positive people are able to stay healthy and protect themselves from infections, they will also be less likely to transmit infection to others.
- Prevention with positives is therefore about people living with HIV taking responsibility for their own health and wellbeing. This must be strengthened.
- Prevention with positives is therefore intricately linked with access to treatment, care and support services, since it is the effect of treatment on the lives and health of PLHIV that initially acted as a driver to the concept of positive prevention.

The Pillars of Positive prevention (cont)

- Prevention with positives is strengthened by the fact that treatment lowers viral load, making PLHIV less likely to transmit the virus to others.
- There are three distinct aspects of treatment that form a core part of prevention with positives:-
 - a. the right to treatment,*
 - b. the practical, on-the-ground reality of treatment and*
 - c. adhering to treatment by people living with HIV.*
- Combating stigma and discrimination is essential to the success of prevention with positives, since the two have very strong co-relation:
 - a. Stigma and fear of discrimination can reduce access to VCT services,*
 - b. people will not practice positive prevention without knowing their HIV status.*
 - c. Stigma and fear of rejection can prevent people who know their HIV status from disclosing to partners, families or healthcare providers. This will compromise a whole range of care for PLWHIV.*
- Ending stigma and discrimination suffered by people living with HIV is therefore not only a tool to enhance, but an essential element for positive prevention.

A CALL TO ACTION

- Even though positive prevention is by and for people who know that they are living with HIV, everyone is responsible for supporting the efforts of people living with HIV to promote their health and wellbeing.
- Social factors such as poverty, homelessness, sexism, racism, violence and abuse shape the lives of people living with HIV and inhibit their ability to access preventive health services. People living with HIV cannot always change their individual behaviours until the human rights abuses that make them vulnerable are addressed.
- Gender inequalities are a major obstacle to the ability of many PLHIV to practice positive prevention. Women often lack the power to insist on condom use, to travel to the clinics for healthcare services, to obtain adequate nutrition, or to work and control their own incomes.
- Under such conditions of inequality, it is very difficult for women living with HIV to protect their health. Prevention with positives programs must therefore be nurtured to work at community and national levels to fight discrimination and inequality.

Criminalization of HIV:

The biggest affront to positive prevention

- Recent years have seen the creation in many parts of africa, of HIV-specific laws that criminalize HIV transmission and exposure. In many parts of the developed world, existing criminal laws are increasingly being used to prosecute people for transmitting HIV or exposing others to HIV infection.
- Two main reasons are being advanced for this trend: Achieve justice by punishing the one who causes harm (infecting the other) and to prevent HIV transmission by deterring or changing risk behaviours.
- In africa, many groups are pushing for criminalization as a response to growing trends where women are being infected through sexual violence or by their partners who fail to disclose their HIV diagnoses to them.
- While these issues must be addressed urgently, a closer look into the complex issues around criminalization reveals that it is not likely to prevent new infections or reduce women's vulnerability to HIV.

Criminalization of HIV:

The biggest affront to positive prevention (cont.)

- In the words of UNAIDS-UNDP policy brief on criminalization of HIV transmission and exposure, issued in Mexico during the last international AIDS Conference 2008, *“laws criminalizing HIV exposure and transmission are a dangerous sideshow in the response and ignore the real challenges of HIV prevention”*.
- UNAIDS is of the view that *“indeed, widespread criminalization may set back prevention efforts by deterring people from seeking testing and accessing treatment”*.
- UNAIDS in fact urges Governments to *“limit criminalization only to cases of intentional transmission, where a person who knows their HIV positive status acts with the intention to transmit HIV and does in fact transmit it”*.
- Indeed, cases of intentional transmission of HIV are rare and evidence abound to the effect that people living with HIV who know of their status take steps to prevent transmitting HIV to others.

Criminalization of HIV:

The biggest affront to positive prevention (cont.)

So what is meant by “criminalization of HIV transmission”?

- It is the act of application of criminal law to cases where one person transmits HIV to another or exposes another to the possibility of HIV infection. It is usually applied in cases of sexual transmission but may also be applied to women who transmit to their infants and to health providers who transmit at the workplace.

Legal provisions for disclosure of one’s positive status:

- There is today a lot of push in Africa for legislation that requires people living with HIV to disclose their status to sexual partners, healthcare workers and others: *This is a bad legislative quest, since all individuals have a right to privacy and must not be required by law to disclose, especially when this will or may lead to stigma, discrimination and violence.*
- *Nonetheless, all people have the ethical obligation not to harm others. PLHIV must therefore be supported to practice safe sex and to voluntarily disclose.*

Criminalization of HIV:

The biggest affront to positive prevention (cont.)

- In the 2006 political declaration on HIV, Governments committed to ensuring that they have laws and programs that protect people against discrimination and other human rights abuses based on HIV status. Criminalization of HIV transmission and exposure surely goes against this principle.
- Criminalization of HIV transmission confuses “crime” with HIV status and generalizes criminal offences and behaviour to all people living with HIV and to a health condition rather than an action.

10 Reasons against criminalization

- Criminalizing HIV transmission is justified only when individuals purposely or maliciously transmit HIV with the intent to harm others. In these rare cases, existing criminal laws can and should be used instead of passing HIV-specific laws.
- Applying criminal law to HIV exposure or transmission does not reduce the spread of HIV. What happens when one is jailed and goes on to be sexually molested in prisons?
- Applying criminal law to HIV exposure or transmission undermines HIV prevention efforts. People will fear taking tests or disclosing their status to sexual partners and health workers.
- Applying criminal law to HIV exposure or transmission promotes fear and stigma. (*see quote from Justice Edwin Cameron, of South African Supreme Court of appeal, 2008*).

Justice Cameron's words

- *“tragically, it is stigma that lies primarily behind the drive to criminalization. It is stigma rooted in the moralism that rises from the sexual transmission of HIV that too often provides the impulse for these laws.*
- *“Even tragically, such laws and prosecutions in turn only add fuel to the fires of stigma.....prosecutions for HIV transmission and exposure, and the chilling content of the enactments themselves reinforce the idea of HIV as a shameful, disgraceful, unworthy condition”.*

10 Reasons against criminalization (cont.)

- Instead of providing justice to women, applying criminal law to HIV exposure or transmission endangers and further oppresses them.
 - ✓ *Women are likely to know their HIV status first before their counterparts, when they visit the ANC & PMTCT clinics.*
 - ✓ *Women are more likely to be blamed for HIV infection in the family*
 - ✓ *Women might be prosecuted for MTCT.*
- *Gender-based violence is a big epidemic and many countries lack the legal mechanisms to contain it. Many women have been infected through such instances.*
- Laws criminalizing HIV transmission and exposure are drafted and applied too broadly and often punish behaviour that is Infact not blame worthy eg kissing, having sex with a condom, even where risks are minimal or non-existent.

10 Reasons against criminalization (cont.)

- Laws criminalizing HIV exposure and transmission are often applied unfairly, selectively and ineffectively. Risk of selective or arbitrary prosecution, likelihood of conviction without sufficient evidence and invasion of privacy (medical records being used to support prosecution).
- Laws criminalizing HIV exposure and transmission often ignore the real challenges of HIV prevention. There is need to invest more on evidence-based prevention programming. Criminalization tends to shift the burden of HIV prevention to the infected persons.
- Criminalization fails women and girls particularly, for whom this attempt is like a substitute to effective policies that address their social and economic inequality and gender based violence.

Evidence from Mauritius

Excerpt from the Attorney General of Mauritius:

“Mauritius decided not to criminalize exposure to or transmission of HIV. Legislators realized that legislation criminalizing HIV exposure or transmission would not be able to stand a constitutional challenge because of the difficulties with proof, the likely vagueness of the definition of exposure and the risk of selective prosecution”....

“The main reason for not criminalizing HIV transmission was however the concern about detrimental impacts on public health and the conviction that it would not serve any preventive purpose.... Therefore, Mauritius decided to put its resources where they are most likely to have a positive impact on reducing the spread of HIV: That is, increased funding for HIV testing and counselling and for evidence-informed prevention measures.”

Rama Valayden, Attorney General and Minister for Justice and Human rights of the Republic of Mauritius- 2007.”

CONCLUSION

- Prevention with positives is the next millennium strategy in combating HIV. It is our sure way of stopping new infections.
- All stakeholders are challenged to embrace it and to guard against any attempt, legal, social, economic or political that puts any impediments to this quest.

THANK YOU: ASANTENI SANA

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