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**FINAL REPORT OF THE JOINT LEARNING INITIATIVE ON CHILDREN AND
HIV/AIDS CALLS FOR NEW DIRECTIONS FOR AIDS POLICY IN SEVERELY
AFFECTED COUNTRIES**

***“Home Truths: Facing the Facts on Children, AIDS, and Poverty”*
Highlights the Unmet Needs of Millions of Families and Children in Global Response to
AIDS**

London - 10 February -- The global response to HIV/AIDS must be significantly reoriented to address the unmet needs of millions of children and their families in the worst affected countries, according to a new report by the independent Joint Learning Initiative on Children and HIV/AIDS (JLICA). The report, *“Home Truths: Facing the Facts on Children, AIDS, and Poverty”* summarizes two years of research and analysis of AIDS-related policies, programmes and funding and their effectiveness in addressing the needs of children. It calls for change in global, regional and national responses to the epidemic, including greater emphasis on strengthening families and communities to enable them to give children the care and support they are uniquely suited to provide. The report also recommends new approaches to address the simultaneous impacts of HIV, poverty, food insecurity and social inequality that many countries confront today.

“JLICA has focused on children, but the release of this report is an opportunity to refocus and greatly strengthen the entire AIDS response,” noted Jim Yong Kim, Director of the FXB Center for Health and Human Rights at Harvard University and Co-Chair of the JLICA Learning Group on Expanding Access to Services and Protecting Human Rights. “AIDS prevention and treatment programmes have pioneered a revolution in health care in low- and middle-income countries. Orienting the AIDS response to better serve families and communities can be the motor that now drives improved health services and social protection for the poorest and most vulnerable.”

“Families are at the heart of the AIDS response,” said Michel Sidibé, Executive Director of UNAIDS. “Policies, programmes and funding must focus on providing universal access to HIV prevention, treatment, care and support for the family as a unit to ensure that both children and the adults who care for them get the essential services they need.”

In its two-year programme of research and analysis, JLICA - an independent alliance of researchers, implementers, policy-makers, activists and people living with HIV - reviewed global policies and programmes in four key areas: Strengthening Families; Community Action; Expanding Access to Services and Protecting Human Rights; and Social and Economic Policies.

“JLICA found that there is a lack of good data on children and HIV/AIDS and the information that is available is often not used. As a result, many well-intentioned efforts do not take account of key realities that must help shape an effective response to the impact of HIV children and their families. Extreme poverty in many of the regions most seriously affected by AIDS, for example, severely limits the uptake of HIV programmes and services. If we do not confront this reality, large-scale AIDS programmes in hard-hit countries cannot succeed,” said Agnes Binagwaho, Permanent Secretary, Rwandan Minister of Health and JLICA Co-Chair.

“It is critically important that the international community shape its response to children based on evidence of what really works,” said Jimmy Kolker, Chief of HIV and AIDS, UNICEF. “This report tells us that we have to intensify our efforts for children affected by HIV and AIDS, and for all children in the affected communities and the families that care for them.”

Key findings

Among the key findings of the 80-page report are the following:

- Families care best for children and are critical to an effective AIDS response. Yet, families and communities in the most severely affected regions bear some 90% of the financial costs of caring for children, with little or no assistance from governments.
- Despite recent increases in funding, resource levels in hard-hit countries remain far below what is required to deliver comprehensive services for children and families affected by HIV and AIDS on a national scale. The design and implementation of current programmes means that external funding frequently fails to reach local communities.
- Organized community responses in many sub-Saharan Africa countries are key to protecting children and families from the worst effects of the epidemic. These initiatives have immense value – for example, the contribution of volunteers from faith-based organizations was estimated in 2006 to be worth over US\$ 5 billion annually -- but they often lack the necessary skills, support, and knowledge to maximize their effectiveness.
- Extreme poverty is a critical barrier to the scale-up of AIDS services. The widespread implementation of relatively low-cost poverty alleviation efforts is essential to reducing the debilitating impact of the epidemic on children and families.
- In the worst affected countries, HIV infection rates are highest among young women and girls. Urgent action is needed to address the social conditions and norms that render women and adolescent girls highly vulnerable to HIV infection.

Misconceptions limit programme impact for children

The new report also examines a number of misconceptions that have limited the effectiveness of programmes in reducing the impact of HIV on children and young people. Among the greatest problems is the near-exclusive focus of many of these programmes on ‘orphans’ who have lost one or both parents to AIDS. Contrary to the widespread perception that most ‘AIDS orphans’ no longer benefit from support from their families or extended kin, JLICA found that 88% of children designated as ‘orphans’ have a surviving parent. Remaining family members and extended kin, however, often lack the basic resources to provide the care and support these children need.

Another significant drain on the impact of existing efforts for children is the widespread tendency to designate support services for children and families as AIDS-specific. In fact, the JLICA report finds, in poor communities hard hit by HIV, all children – not only orphaned children -- face suffering and deprivation. More than 60% of children in southern Africa live in poverty. Singling out those directly affected by HIV may not only fail to address the larger need, but can also have undesirable effects -- such as stigmatization and abuse of those in need of help. The report calls for AIDS-sensitive but not AIDS-exclusive programmes and policies.

The JLICA report also makes a strong call for greater attention to the realities of the lives of young women and girls, who are often at particular risk of HIV infection because of sexual harassment and abuse, and their inability to take control of many situations in which they are at risk of HIV infection. Current prevention efforts that focus exclusively on changing their behaviour often fall short in these circumstances.

Recommendations: A new action agenda for children and their families

The JLICA report outlines a clear and achievable action agenda to improve the scope and impact of services for children, their families and communities. Yet, experts point out that, while these JLICA-endorsed approaches are clearly supported by evidence and experience, setting a new direction for policy on children affected by HIV and AIDS will demand major shifts in both thinking and action.

“Significant gains are achievable in the short term, if accelerated action is taken by governments and their partners,” said Linda Richter, Executive Director of Child, Youth, Family and Social Development at the Human Sciences Research Council, South Africa and Co-Chair of the JLICA Learning Group on Strengthening Families. “Supporting poor families through measures such as income transfers will require a clear commitment on the part of policy makers, funders and their partners. Many exceptional organizations working in their field have contributed to and support the JLICA policy recommendations. Implementing them will require concerted efforts to ensure that programmes and policies change to reflect evidence, best practice, and the realities of young peoples’ lives.”

“Governments must lead efforts to strengthen community initiatives by aligning national and local plans and improving mutual accountability. Increased involvement of local communities in the development, implementation and assessment of programmes will help to ensure that they are both relevant to local needs and achieve better results,” said Geoff Foster, Founder, Family AIDS Caring Trust, Zimbabwe and Co-Chair of the JLICA Learning Group on Community Action.

Among the key recommendations of “*Home Truths: Facing the Facts on Children, AIDS, and Poverty*” are the following:

- Policies, programmes and funding must be redirected to support children to and through their families, whenever possible. Building the resources of families and communities that are already providing for children, rather than creating artificial structures to replace them, will create a more efficient, effective and sustainable response in the worst affected countries.
- Children’s needs, not their orphan or HIV status, must be the primary focus in designing and implementing policies and programmes. At the same time, differentiating between children who have lost a parent to AIDS, and those who are truly without homes or families is essential to providing appropriate support and services.
- Adequate government responses should free poor communities from responsibilities they are less able to shoulder, such as supplementing the incomes of families, and reinforce community action in areas in which it adds unique value - including providing emotional support and practical assistance to children and their caregivers.
- Basic economic security can help families invest in children’s health and education, increase their use of available services, and pay for essentials such as food, medicine and transport to health facilities. Even the poorest developing country can support a social protection package for children and families affected by HIV/AIDS and extreme poverty. Income transfer efforts, which place funds directly in the hands of families that need them, have demonstrated impressive results in improving child and family well-being in several African countries. A successful Zambian pilot project provided US\$ 15 per month to the poorest 10% of households. Implementation of such a high-impact effort across low-income countries in sub-Saharan Africa would cost just 3% of the aid to Africa agreed at the 2005 Gleneagles meeting of the G8.
- Health and social services, such as expanded access to HIV testing and treatment, should target families as a whole. An effective response to AIDS requires the delivery of integrated, family-centred services in health, education and social welfare that are well-resourced and linked to communities.
- Focusing HIV prevention on ABC – Abstain, Be Faithful or use a Condom - misses the critical issue of the powerlessness of women and young people, especially teenage girls, in many situations that create HIV risk. Other measures are urgently needed, including increased efforts to ensure girls’ physical safety at school, at

work, on public transport and in places of recreation; to tackle behaviours and attitudes that protect or promote sexual abuse of women and girls; and to improve the economic independence of young women.

“The economic and social investment in children and families that ‘*Home Truths*’ calls for is absolutely essential to the health of millions of children and families, as well as to entire regions of the world,” said Alex de Waal, Programme Director at the Social Science Research Council and Co-Chair of the JLICA Social and Economic Policies Learning Group. “The global economic crisis aggravates the hardships experienced by those affected by HIV/AIDS and extreme poverty, and makes action to expand and sharpen our responses all the more imperative.”

“Overcoming the longer-term threat of AIDS requires that we act now to address the needs of the next generation,” said Peter Bell, Senior Research Fellow at the Hauser Center for Nonprofit Organizations at Harvard University, President Emeritus of CARE USA and JLICA Co-Chair. “The plan of action for children and families outlined in the JLICA report will help turn back this epidemic – and it will also accelerate the broad social and economic development that is essential to the health, growth and security of the most severely AIDS-affected countries.”

About JLICA

The Joint Learning Initiative on Children and HIV/AIDS (JLICA) is an independent, interdisciplinary, time-limited network of policy-makers, practitioners, community leaders, activists, researchers and people living with HIV, working to refocus global responses to the needs of HIV-affected children, their families and communities. Its partners and supporters include the Association François-Xavier Bagnoud – FXB International; Bernard van Leer Foundation; Bill & Melinda Gates Foundation; FXB Center for Health and Human Rights, Harvard University; Global Equity Initiative, Harvard University; Human Sciences Research Council, South Africa; Irish Aid; Netherlands Ministry of Foreign Affairs; UK Department for International Development; UNAIDS; and UNICEF, among many others.

JLICA’s research papers, addressing topics such as family demographic changes in regions heavily burdened by HIV; learning from communities about strengthening mechanisms for channeling resources to child protection and support initiatives; integrating delivery models for key services that benefit children affected by HIV/AIDS; and the macroeconomic feasibility of providing social protection packages for children and families in low-income countries appear in major journals and on the JLICA website (<http://www.jlica.org>).

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