



### INSIDE THIS ISSUE:

<i>Symposium on Meeting Children's Needs in a World of HIV/AIDS</i>	1
<i>News</i>	1
<i>Round up: JLICA Steering Committee</i>	2
<i>e-TALC Development Resources</i>	2
<i>Spotlight: Learning Group 3: Expanding Access to Essential Services and Protecting Human Rights</i>	3
<i>Update: Learning Group 1: Strengthening Families</i>	4

*Families & communities care best for children; but governments & other institutions must do their part to help families support children in the long-term.*

## SYMPOSIUM ON MEETING CHILDREN'S NEEDS IN A WORLD OF HIV/AIDS

The JLICA held an International Symposium on Meeting the Needs of Children Affected by HIV/AIDS on the 24 September 2007 at Harvard Medical School in Boston, USA. The meeting was attended by more than 250 participants, many of whom were high-level international policy makers, scientists, researchers and funders. The goal of the one-day symposium was to engage participants in debate on key issues affecting children affected by HIV and AIDS through four panels. Panel 1 focused on *Strengthening Families to Support Children* co-chaired by Dr. Angela Wakhweya and Ms. Sheila Sisulu of the World Food Programme. Learning Group 2, *Strengthening Community and Civil Society Response*, led the second panel., with Dr. Geoff Foster and Ms. Madhu Deshmukh as co-chairs. Panel 3, *Increasing Access to Essential Services to Meet Children's Needs: Bridging Implementation* was co-chaired by Dr. Lydia Mungherera and Dr. Jim Kim. The fourth panel consisted of a policy debate on *Can Low-Income Countries Afford Social Protection Programs to Benefit Children Affected by HIV/AIDS*, co-chaired by Dr. Alex de Waal and Ms. Masuma Mamdani.

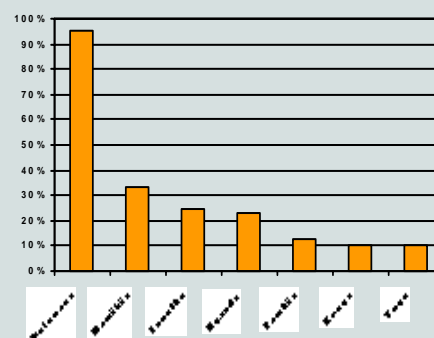
JLICA co-chairs, Agnes Binagwaho welcomed participants, after which UNAIDS head, Dr Peter Piot, Dr Charles Gilks, head of HIV/AIDS at WHO, and Dr. Ken Yamashita from USAID, addressed the symposium.

Prof. Linda Richter, opened Panel 1 by introducing the learning group and framing the issues it seeks to address, namely 1) How to ensure that families are the basis of the global response to children affected by HIV/AIDS? 2) How universal access to health, education and social protection can strengthen responses to children and families, and 3) What the evidence says about the viability and impact of providing income transfers to affected families?

Panel presentations from Doug Webb of UNI-

CEF and Michelle Adato from IFPRI made a convincing argument for cash transfers as a means of assisting families in destitution.

Doug's presentation made a clear case for programmes to focus on systemic support to poor and vulnerable families through



Percentage of households that receive some form of external support of care

social protection mechanisms that supplement community-based action. Poverty should be the point of entry to families affected by HIV and AIDS, leading to assistance for children most desperately in need. Systemic responses move towards entitlement-based access to health and education and universal social protection. The second discussion was led by Michelle Adato of IFPRI who focused on cash trans-

## NEWS

**Save the Children** is hosting a meeting on the 29 & 30 November 2007 in London titled, 'The role of Social Welfare Services in Social Protection: Towards a Policy-Relevant Research Agenda.'

**DFID, JLICA and the IATT on Children and HIV/AIDS** is convening a joint technical meeting on the 3rd December 2007 in London on Social protection for children affected by HIV/AIDS. The JLICA is participating in both meetings.

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*Close to half of all families in southern Africa have someone living with HIV or AIDS or a person who has died from AIDS-related illness.*

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LEARNING GROUP 1



JOINT LEARNING INITIATIVE  
ON CHILDREN AND HIV/AIDS

## SYMPOSIUM ON MEETING CHILDREN'S NEEDS IN A WORLD OF HIV/AIDS

Country	South Africa		Zambia	Kenya	Mozambique	Namibia	Malawi
Program	Old Age Pension		SCTS	OVC CT	INAS	Old Age Pension	FACT
	Men	Women			urban	urban	
Food	30%	24%	72.2%	25%	61%	38%	59.3%
Education	38%	32%	5.5%	19%	3%	16%	9.7%
Health	~	~	1.2%	6%	1%	23%	
Clothing	~	~	1.7%	~	15%	11%	~
Savings / Investment	~	~	5.7%	5%	~	~	9.8%
Other	32%	44%	13.2%	45%	20%	12%	21.1%

Table above indicates the access to food increases with the provision of cash transfers

fers for economic strengthening of families affected by HIV and AIDS. Her presentation looked at what social protection can achieve as a critical service for families affected by AIDS. Independent studies conducted around the world indicate that cash support given to families translates into increased access to food. Michelle's presentation also looked at the outcomes of conditional vs. unconditional transfers. Examples of unconditional income support programmes are the Child Support Grant and Old Age Pension in South Africa and Zambia's Pilot Cash Transfer Programme. However, conditioning cash transfer programmes may increase investments in education, human capital, and increase public support as policymakers are able to show indicators of progress in education and health. Examples of these include Mexico's *Oportunidades* and Brazil's *Bolsa Familias*. The debate on whether to make cash transfers conditional or not continues, but the evidence indicates that income programmes are effective in targeting poverty and as a result are a proxy for reaching AIDS affected families.

Each panel at the symposium received several questions from the audience relating to the presentations. The questions for panel 1 will be posted on the Strengthening Families website

<http://www.hsrc.ac.za/strengtheningfamilies>.

Visit the Symposium website <http://www.jlica.org/symposium.htm>

to view the webcasts as well as access the presentations. We welcome your comment and responses to these issues, kindly email [JLICAFamilies@bsrc.ac.za](mailto:JLICAFamilies@bsrc.ac.za).

Teaching Aids at Low-Cost (TALC) was founded in 1965 by Professor David Mor-

## E-TALC DEVELOPMENT RESOURCES

ley while he worked at the Institute for Child Health in London. TALC was a response to international student requests for teaching resources to utilise in their own developing countries. TALC has distributed over 12 million books, slides and resources relating to health and community issues to innumerable health workers throughout the developing world.

In 2001 e-TALC was initiated as a way of distributing these resources to a larger audience who don't have access to the internet. To date approximately 60 000 CD-ROMs have been distributed free of charge globally. Contributors to e-TALC include the Lancet and the British Medical Journal among others. Visit [www.talcuk.org](http://www.talcuk.org) for more information and to subscribe to e-TALC.



## 23RD SADC PARLIAMENTARY FORUM

The Child, Youth, Family and Social Development Programme of the Human Sciences Research Council was asked by the HIV & AIDS Office to provide technical support to the 23rd SADC Parliamentary Forum held in Blantyre, Malawi. The theme of the meeting, from 18 to 23 October was Parliamentary Engagement on Priority Regional Issues: Leadership in the HIV and AIDS Pandemic. On behalf of the HSRC and the JLICA, Professor Richter led a three-hour deliberative session on children and HIV/AIDS and addressed issues of prevention, treatment, and social protection, especially the role of income transfers for the poorest families in high HIV prevalence communities. The official Communique from the meeting addressed 29 items, among which five items (12-16) referred to agreements reached on the subject of children and HIV/AIDS. The Communique can be downloaded at <http://www.hsrc.ac.za/strengtheningfamilies>.

## ROUND UP: JLICA STEERING COMMITTEE MEETING

The JLICA Steering Committee met for two days, 24–25 September 2007 at Harvard University in Boston, Ma. The objectives of this third SC meeting were to:

Review the work done by the four Learning Groups and to chart the way forward.

Formulate the JLICA 'story line' according to how the evidence was emerging.

Identify and collaborate with key experts.

Develop a media communications strategy to disseminate the key messages of JLICA

Identify an advocacy and partnerships strategy .

Ensure cross Learning Group collaboration in overlapping themes.

Discuss the 2008 International AIDS Conference in Mexico City as a platform for the JLICA to profile its findings and recommendations.

Review plans for the JLICA final report in order to utilise the key findings and recommendations to command attention and speed up implementation for children, and

Meet with the Inter-Agency Task Team for Children and HIV/AIDS (IATT) and formulate a coherent shared message that is supported by the research outputs and key messages generated

by each of the four Learning Groups.

The meeting was attended by representatives of the Global Action Campaign as well as the Bill and Melinda Gates Foundation who provided key insights into policy entry points. The meeting resulted in the JLICA objectives being streamlined into a series of activities that would see the work of each Learning Group evolve into authoritative statements on children affected by HIV/AIDS. Many participants were eager to lend their support by committing themselves to review and develop key pieces or plans that are essential in implementing the objectives. The JLICA sees the International AIDS Conference in Mexico next year as an important stage for profiling its findings and recommendations. In preparation, the JLICA has identified several activities preceding and during the conference into which the key messages will be incorporated. The Steering Committee will meet for the fourth time in February 2008 in London.

## SPOTLIGHT: LEARNING GROUP 3 : EXPANDING ACCESS TO SERVICES AND PROTECTING HUMAN RIGHTS

Access to effective health, education and social services are paramount to the survival of children and families affected and infected by HIV/AIDS. These services should strengthen families and communities and increase community autonomy. However, service delivery in areas that are over-burdened face countless obstacles. The work of Learning Group 3 is to identify key knowledge-implementation gaps for providing integrated services, and to develop strategies for closing the gaps, increasing access to services and improving outcomes for children affected by HIV/AIDS. These goals will be achieved through collaboratives and lead directly to. Three reports will be produced by LG3. Report 1 looks at increasing access to PMTCT-plus and early childhood development. The second report focuses on increasing access to essential services for school-aged children, and the third report centres around increasing access to essential services from pre-adolescence through to young adulthood. In addition, LG3 is advocating for a practitioner-focused Learning Collaborative on strengthening child survival at rural health centres in three Districts in Rwanda to test innovative service delivery strategies that may reduce HIV infections in children while improving other aspects of the health and wellbe-

ing of children and families. Learning Group 3 membership includes authors from Uganda, South Africa, Botswana, and Rwanda.

### LEARNING GROUP 3 CO-CHAIRS

#### Dr. Jim Yong Kim

Dr. Kim holds appointments as François Xavier Bagnoud Professor of Health and Human Rights at the Harvard School of Public Health and Professor of Medicine and Social Medicine at Harvard Medical School. Dr. Kim has 20 years of experience in improving health in developing countries.

#### Dr. Lydia Mungherera

Dr. Mungherera has worked in the field of HIV/AIDS and TB for over ten years as a clinician, health educator and patient advocate. Since 1999 she has worked with The AIDS Support Organization (TASO) in a variety of clinical and advocacy-related capacities. Contact Learning Group 3 at [imj@harvard.edu](mailto:imj@harvard.edu) or [ydiamng@yahoo.co.uk](mailto:ydiamng@yahoo.co.uk)



Dr Jim Yong Kim



Dr Lydia Mungherera

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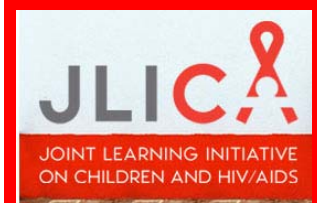
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#### LEARNING GROUP 1



*Today, 25 years into the epidemic, a second generation of young people is growing up with their life prospects dimmed by the impact of AIDS.*

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**LEARNING GROUP 1**



JOINT LEARNING INITIATIVE  
ON CHILDREN AND HIV/AIDS

## UPDATE LG1: STRENGTHENING FAMILIES

All the proposals for LG 1 papers have been posted on the HSRC LG 1 website <http://www.hsrc.ac.za/strengtheningfamilies>

- Lead authors have submitted descriptions of their methods of review and analysis, and these will be posted onto the website after revision
- First drafts of all papers will be submitted by the end of September 2007. Once the papers have been revised, second or third drafts will be posted on the website
- A new lead paper on child abuse and neglect is being commissioned, bringing to 13 the number of reviews being undertaken by LG 1
- LG 1 members will be participating in two meetings in London at the end of November and early December to discuss social welfare and protection, organised by Save the Children UK and DFID, JLICA and the IATT, respectively
- LG 1 will have a face-to-face meeting in Pretoria in late January 2008 to work on integrating the findings from the lead papers.

## PARTICIPATING IN LG1

There are a variety of ways for people and groups to get involved and to ensure that their knowledge and experience becomes part of the Joint Learning Initiative on Children and HIV/AIDS. There are LG 1 Advisors, Companion and Parallel Initiatives, stakeholders and other interested groups and individuals. Everyone connected to the Learning Group will receive Newsletters and other communications, and we welcome your input. If you know others who would like to receive this electronic Newsletter, please ask them to send an email to [JLICAFamilies@hsrc.ac.za](mailto:JLICAFamilies@hsrc.ac.za) with NEWSLETTER in the subject line. In the body of the email they should include their name, organisation and contact information. Please keep us posted about meetings and other activities that are relevant to the work of the JLICA and to the work of LG 1: Strengthening Families, in particular. Where possible, we will try and arrange for a member of LG 1 to present the progress of the Learning Group and engage with participants and their responses.

### Reference Groups

We are convening telephonic, email and internet Reference Groups of about 10-15 people from a variety of sectors for each of the LG 1 lead papers. If you are a policy maker, programmer manager, donor, community organiser, person living with HIV or AIDS or caring for a child affected by HIV or AIDS, or a stakeholder in another capacity in the work of the JLICA, and you would like to contribute to the work of one of the lead papers by reading drafts and making comments, please send an email to [JLICAFamilies@hsrc.ac.za](mailto:JLICAFamilies@hsrc.ac.za) indicating your interest, and the number and title of the particular lead paper with which you would like to work.

## STRENGTHENING FAMILIES (LG1) CO-CHAIRS



**Professor Linda Richter** is the Executive Director of the Child, Youth, Family and Social Development Programme at the Human Sciences Research Council in South Africa. She has over 25 years of experience in child and adolescent research, as well as programmatic experiences relevant to children affected by HIV and AIDS.

For more information visit:

<http://www.hsrc.ac.za/strengtheningfamilies>

[www.jlica.org](http://www.jlica.org)



**Dr Angela Wakhweya** is a Senior Technical Officer in the Orphans and other Vulnerable Children Unit in the Prevention and Mitigation Division at Family Health International (FHI), based in Arlington, VA. Dr Wakhweya has a strong background in international public health, especially in the area of HIV/AIDS.

For more information visit:

[www.fhi.org](http://www.fhi.org)

[www.jlica.org.za](http://www.jlica.org.za)