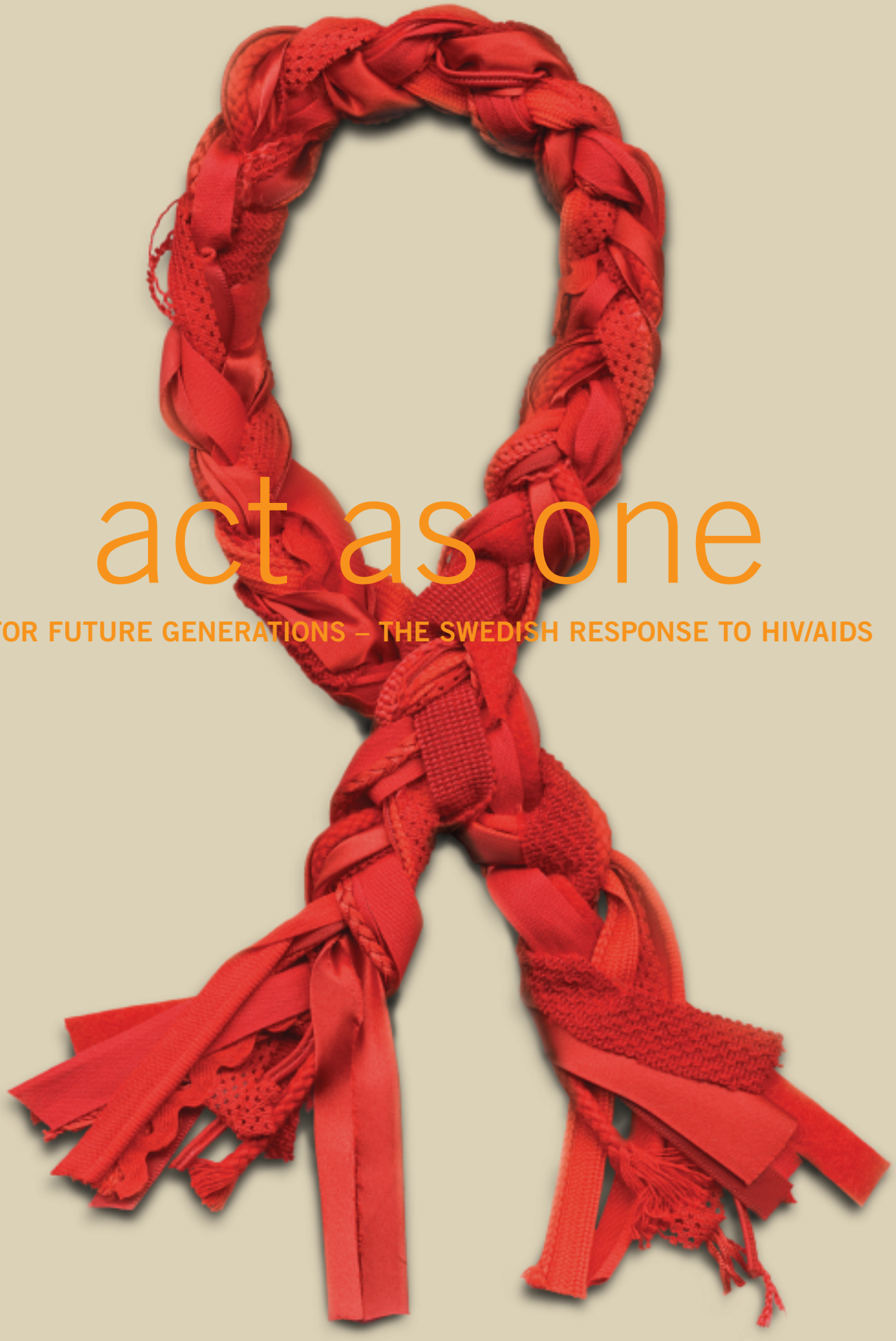


act as one

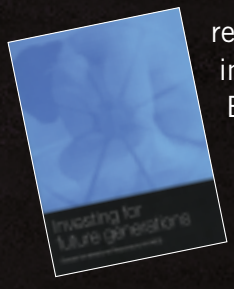
FOR FUTURE GENERATIONS – THE SWEDISH RESPONSE TO HIV/AIDS

act as one

The HIV/AIDS pandemic is one of the most important challenges of our time. We can meet this threat to development only if we work together, and dare to address all relevant aspects.

Sweden has put HIV/AIDS at the very top of its development agenda. The knowledge that HIV/AIDS is a broad economic and social developmental threat must be transformed into effective strategies and actions. HIV/AIDS must be part of the analysis, planning and decision making processes for all development projects and programmes. Such an integrated approach is necessary to address the wide spread consequences posed by the pandemic, for all sectors and groups in society at all levels.

To win the fight against HIV/AIDS and reduce its impact we must also be courageous enough to discuss difficult issues. We need to discuss gender equality, sexuality and sexual behaviour. Traditional power structures that impede openness in these matters must be challenged. We need to strengthen the human rights and fundamental freedoms for many people, in particular women and young people of both sexes. Sexual and reproductive health and rights comprise therefore also a top priority in Sweden's development work. Without a clear focus on these rights the fight against HIV/AIDS will never be won.



The fight against HIV/AIDS also requires that all relevant national and international instruments be used. Based on the Swedish strategy "Investing in Future Generations" Sweden will actively support participatory and comprehensive programmes for prevention, treatment, care and mitigation. This also means support for affordable medicines and research for vaccines and microbicides.

HIV/AIDS is not only a global threat but also a global challenge. Global cooperation is necessary. Sweden supports, politically, technically and financially many global institutions with programs on HIV/AIDS.

We believe that strong international cooperation is necessary to meet this challenge. The role of the United Nations and its agencies is crucial. Sweden also cooperates with the affected countries. In addition to national governments and international organisations, the private business sector and civil society organisations are important actors. Greater effort must be put into preventing conflicts and promoting peace.

More resources are needed. Activities must be scaled up, in a predictable and stable way. Sweden will take her share of the responsibility in this effort, through our multilateral and bilateral programmes. But it must also be a joint effort with others, an effort that requires that we do our best to overcome our differences.

We must act together and as one, not as separate contenders and at cross purposes. Only then do we take responsibility for the challenges ahead. We owe this to all those living with HIV/AIDS and to the large number of people who are at risk of becoming infected as well as ourselves.

Carin Jämtin
Minister for Development Cooperation

Maria Norrfalk
Director General, Sida

This brochure will give you an overall and diverse picture of initiatives supported by Sweden

Photo: Phoenix

A Rights-based approach to supporting orphans and children affected by HIV/AIDS

When parents become sick and develop HIV/AIDS, their children are affected emotionally and materially. The family's financial position collapses and poverty deepens. Many children, especially girls, have to stop going to school in order to look after sick and dying members of their family. Children who are infected with HIV are even more vulnerable. That is why the work of reducing children's vulnerability and strengthening their rights is extremely important.

Today in the African countries south of the Sahara, more than 13 million children under the age of 15 have lost one or both parents due to HIV/AIDS. This is a tragedy for every child affected, and a tragedy for the whole region. Development comes to a standstill, poverty is worsened and stigmatization increases.

Work must focus on improving children's living conditions. In order to turn things around, dedicated work is required at all levels; governments, local communities, schools and teachers, parents and other adults with whom children have contact.

Important aspects of our efforts are prevention of transmission of HIV/AIDS and to reduce discrimination and stigma through providing information and sevices. Providing children who have become orphans with a good environment in which to grow up, through economic and social support, is another important area.

Sida supports many projects that tackle these types of problems. One of them is a "Home based care, prevention and orphan support" programme in ten countries of southern Africa. The project is run by the International Red Cross in cooperation with the regional Red Cross. The goal is to improve living conditions for children who are exposed, through preventive work and care support at home in close cooperation with the health authorities. Many volunteers are working in these projects, both with education directed towards young people and with the moulding of public opinion in order to get the politicians and decision makers to invest more in the fight against HIV/AIDS.

The Convention on the Rights of the Child states
That no child should be denied their right to a family, play and recreation, education, health, protection from violence and abuse, growing up while developing democratic skills, learning about their rights and their responsibilities as citizens. Children should enjoy their rights regardless of race, sex, religion, nationality or social origins.

Children's rights in development cooperation
The Swedish Government emphasises child rights in its development cooperation activities. More than 1,2 billion SEK are allocated annually to development programmes affecting child rights. The government has recently reiterated its commitment to a rights-based approach in development cooperation and underlined the importance of working with children affected by HIV/AIDS.

Priority areas are political leadership, gender equality, measures to prevent mother-to-child transmission, anti-retroviral programmes, access to information, developing health and education systems, developing youth-friendly health services, support to communities and empowerment of children and adolescents. Sweden works in partnership with UN organisations, NGOs and governments.

Photo: Phoenix

Other examples of Sida's support to vulnerable children in Africa:

Young people as a resource, Tanzania. An innovative youth programme, jointly planned by young people themselves, to stimulate life skills. "Youth in Tanzania" enact dramas and work with communities to identify problems and solutions.

Caring for orphans, Botswana. In "The Botswana Christian AIDS Intervention Programme", orphan care services have evolved from local initiatives all around the country. The programme focuses especially on schools to foster understanding and support among classmates for children affected by HIV/AIDS.

Developing a support structure, Africa. Sida supports the UNICEF regional office for Southern and Eastern Africa in developing new systemic approaches for the provision of resources, social counselling and empowerment of children orphaned by HIV/AIDS.

Improving psychosocial support, Africa. The "Regional Psychosocial-Support Initiative for Children Affected by AIDS", REPSSI, seeks to improve psychosocial assistance for children affected by HIV/AIDS in Eastern and Southern Africa.

Film tour erases prejudice in Southern Africa

Meeting with HIV-infected individuals is one of the most effective ways to decrease discrimination. It is difficult to be prejudiced against someone to whom you have become close and whose everyday life you have taken part in. Now people in rural sub-Saharan Africa have the opportunity to meet people living with HIV/AIDS on film.

The Social Transformation and Empowerment Project (STEPS) has made 36 documentaries about the effects of HIV/AIDS on people's lives and the society around them. Together with the International Video Fair, STEPS has arranged a tour – which includes film showings and discussions – throughout several countries. Sida has also used the films to increase awareness at embassies and Stockholm headquarters.

Since most of the people who live in rural areas do not have access to a TV, their encounters with films usually make a strong impression on them. Therefore, it is also important that these emotions and subsequent questions are captured in the following facilitated discussions, which are arranged in collaboration with local NGOs. The films have been translated into several local languages, making it easier for the viewing public to follow. The fact that the films portray true stories also makes it easier for the viewers to identify with the people in the films.

Sida-support for films and education
Sida has contributed 2,5 MSEK to the production of the films, and is also contributing 16,65 MSEK to support the film showings in Southern Africa from 2003 to 2006 and the facilitators who travel with the films.

Photo: Tomas Agnemo

Photo: IBL

The fight against HIV/AIDS among drug addicts – and the fight for gender equality and peace

Ten years ago, when a handful of organisations began efforts to decrease the spread of HIV/AIDS among young addicts in northeast India, their work was considered controversial and people questioned its merits. Today, thanks to the work of the NEIHAN (the North East India HIV/AIDS Network), made up of 17 organisations that collaborate with churches, the police, community leaders, and the general public, the incidence of HIV/AIDS has decreased. In addition, an increased awareness of gender issues has led to greater gender equality and a strong desire on the part of the network to contribute to constructive peace measures in this politically troubled area.

For many years, the incidence of HIV/AIDS in the states of Manipur, Meghalaya, Mizoram, Arunachal Pradesch, Nagalam, Assam, and Tripura was the highest in India. These states, which border the "Golden Triangle," are used as thoroughfares to transport drugs to and from neighboring countries. The area is also politically unstable, with many ethnic conflicts and high rates of crime and unemployment.

Due to easy access to drugs, primarily heroin, many young people have gotten caught in the web of drug abuse and HIV/AIDS infection through the use of unclean syringes and needles that they share with their friends. This means that their sex partners are also at risk for infection, even if they do not use drugs. Another consequence of the drug abuse in this region is the sex trade, which also increases the risk of disease transmission.

Girls and women – important target groups

When Sida began the support in 1993, the overarching goal was to increase HIV/AIDS awareness among addicts and their sex partners and to change their behavior. This is still the case today. The work includes drug and HIV/AIDS prevention, such as sex education, access to condoms, and a needle-exchange program.

Sida also encourages the NEIHAN project personnel to acknowledge that it is just as important to work with girls who are drug users, prostitutes, and life partners, as it is to work with boys.

Today, the work of the organisations that make up NEIHAN is even broader. Several organisations concentrate on giving support and health information to young drug addicts. Others concentrate their efforts on home care for AIDS

patients or on decreasing drug traffic that threatens children, lured from their families by brokers with promises of work, which, in reality, is prostitution. The organization helps parents "kidnap back" their children. These groups also work actively to ensure that human rights are respected. One of their goals is the right to equal medical treatment for everyone. Previously, hospitals did not accept either HIV-infected individuals or AIDS patients.

Young girls and women and their relatives are given high priority. Drug addiction and HIV/AIDS are just as prevalent among women as among men in this region. However, at the beginning of the 1990s, girls and women were a forgotten group. Young women who were infected with HIV or had AIDS were "hidden away" by their families, and society stigmatized them. Today, awareness and openness have increased, and the position of women in society has been strengthened.

Another result of NEIHAN's work is a developing peace movement. Through its cooperative cross-border endeavors they have realized that conflict is not the only way to solve problems.

™Expertise and economic support from Sida

From the very beginning, several organisations expressed an interest in taking part in the project in northeast India. With Sida's support, a team of experts from Calcutta that included psychiatrists, psychologists, doctors, administrators, and economists, contributed their expertise. Today, the NEIHAN network has 17 member organisations, and Sida plans to continue its financial support for the next three years with a grant of 7,5 MSEK.

Photo: Annica Otter

Women are the key...

Women carry a disproportionate burden of the pandemic. Women and girls take care of the sick, which affects their possibilities to attend school and work outside the home. Women often take responsibility for the welfare of the whole family.

Women and adolescent girls also comprise a majority of those newly infected and they are often infected due to discrimination, sexual harassment and violence, coerced sex and outright rape.

Women must be empowered. The strengthening of the position of women will actively and forcefully contribute to the fight against HIV/AIDS.

There is need for improved and enhanced sexual and reproductive health care and services. The International Conference on Population and Development in Cairo 1994 was a breakthrough. We must all stand firm to the commitments undertaken in Cairo and at the Conference on Women in Beijing 1995.

The Government of Sweden

Photo: Tomas Agnemo

Living life in a dignified manner as an infected person in Uganda

"Living positively". TASO (The Aids Support Organisation) was founded on a simple principle; if you are HIV positive you have the right to live a dignified life. The grass root organisation has been working for many years to support the rights of people who are living with HIV/AIDS. Through TASOs work more and more individuals find the courage to undergo HIV testing and increasing numbers of people are receiving support to live positively.

TASO was founded in 1987 by Noerine Kaleeba when her husband died of AIDS. Since then the organisation has been in contact with 86,000 HIV infected people. The leading idea behind TASO is that the only way to stop the spread of HIV is to support those who are infected. An important part of this work has been to tackle prejudice and discrimination. Close relatives, who are often left without any support when a family member gets sick, can receive help towards education, increasing their chances of getting employment. TASO also arranges activities for the sick through special training centres with courses for those who will be working with people living with HIV/AIDS.

TASO also supports public information activities in order to bring attention to and create discussion about HIV and AIDS, for example through street theatres. The organisation has seven health centres where HIV testing is carried out, medicines are distributed for infections and even "alternative" methods such as aroma therapy and massage are provided. Treatment of opportunistic and other infections slows down the progress of HIV infection to full blown AIDS. At the moment 1,300 people are receiving medicines, but TASO is aiming for treatment of 3,000 people before the end of 2004.

TASO's five year plan 2003-2007 is supported by Sida with 28,75 MSEK.

A new road through Laos – a new road to HIV/AIDS prevention

When National Road No. 8 in Laos was to be rebuilt, the authorities did more than just plan the road work. They also included efforts to minimize the spread of HIV among the road workers and the population in the cities and villages alongside the road. The project provides knowledge about HIV/AIDS for the local authorities and organisations, workers as well as the general population.

Laos has a low incidence of HIV infection of about 0,05 percent. However, in the neighboring countries of Cambodia, Myanmar, and Thailand, the number of HIV-infected individuals is growing. When large populations move within the country and across borders for work, which is the case in Laos, the risk for the spread of HIV/AIDS increases.

About 600 road workers and service personnel from other parts of the country are involved in the reconstruction of National Road No. 8. This kind of project brings with it increased prostitution. When many migrant workers are gathered in one place, the people who live along the road are also exposed to a higher risk of being infected by HIV and other illnesses. Once the work of the road is completed, it will become a major thoroughfare, bringing more temporary visitors to the villages and cities.

Understanding and increased preparedness

In order to decrease the risk for HIV/AIDS, the Laotian authorities decided that HIV/AIDS prevention work would be integrated into the roadwork project. The contractors are responsible for the HIV/AIDS prevention program and the agreement states that it is incumbent upon them to ensure that either they or an outside organisation carries out these activities. In this case, The Burnet Institute, an Australian organisation, was hired to plan and implement the HIV/AIDS prevention work.

Information and education

The most important target groups are the construction crews, people who live in the roadside towns, truck drivers, prostitutes, and local bar owners. The goal is to increase knowledge about HIV/AIDS and change behavior in order to prevent the spread of the virus.

A team made up of contractors, representatives from the military, police, educational system, youth and women's organisations, and local authorities and village leadership have been trained to work with HIV/AIDS issues in the area, and it has built up expertise that can be used in the future as well.

Once the road is finished and the Road No. 8 HIV Prevention Program has been evaluated, it will serve as a model for the integration of HIV/AIDS into other infrastructure projects.

HIV/AIDS in the transport sector

Sida is collaborating with the Ministry of Communication, Transport, Post, and Construction (MCTPC) in Laos for the reconstruction of National Road No. 8. The road work, which started in March 2003, is expected to be completed in March 2005. This joint effort means that Sida also supports the HIV/AIDS prevention program connected with the road work; it is a commitment that is completely in line with Sweden's strategy to integrate HIV/AIDS in all development cooperation.

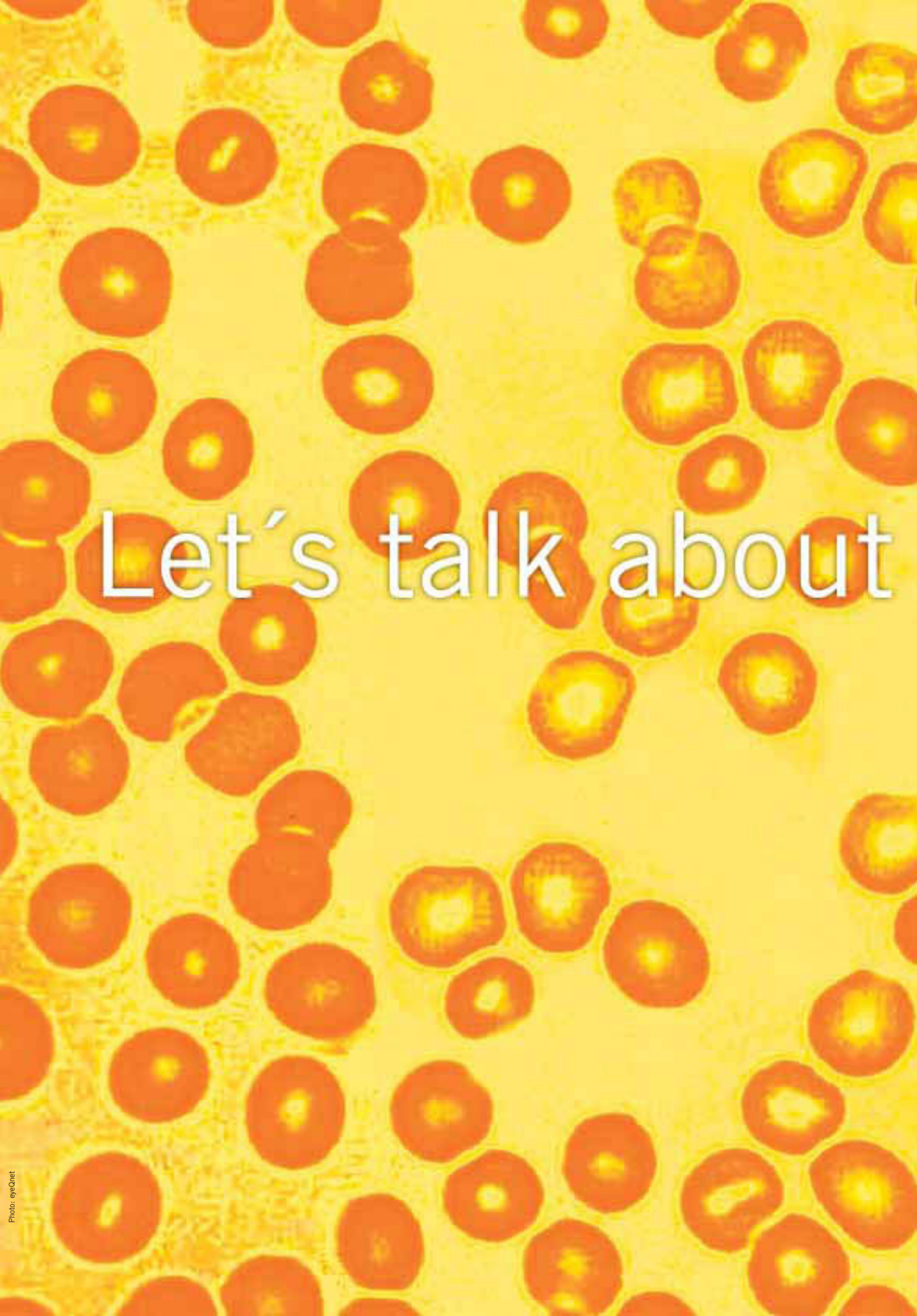


Photo: eyeQnet

"Here in Acholi, parents don't tell us about sex. I thank Straight Talk for talking to us about it."

"Straight Talk Radio Shows have changed my life. From your words I can now make healthy choices. "

"I read in Straight Talk –
You have a right to say: 'Okay, we've been having sex but I want to stop.'
If not, use condoms properly
These words changed my behaviour."

Photo: Phoenix

Young people

When it comes to HIV prevention, young people are the largest and most important target group to focus on. If a country succeeds in protecting its children from being infected, there is hope for the future. There is a general misconception that sex education in school encourages young people to have sex. When you consider all the risks involved – unwanted pregnancies, sexual transmitted infections and HIV – it is perceived that the best way to protect young people is to say nothing. This silence must be broken.

The adult world is obliged to give young people all the tools they need to make decisions themselves on matters that affect their health. In several places throughout the world, projects are being carried out in order to increase openness and keep discussions ongoing about sexuality and reproduction. Vital knowledge is spread via the radio, discussion groups, entertainment, magazines and most important of all: by the youngsters themselves.

MASS MEDIA

Speaking out in magazines and on the radio in Uganda

Each month, two million youths in Uganda will come into contact with Straight Talk by reading a free magazine, listening to the radio or by meeting friends. Straight Talk is about love, relations and safe sex without the risk of unwanted pregnancies, sexual transmitted infections or HIV. It's also about taking your own decisions: "Am I mature enough yet to have sex now, or would it be better if I waited a while longer?" Straight Talk Clubs were started by the youths themselves. They are meeting places where they can talk openly about things that are embarrassing or things that adults have not talked about. By taking part in theatrical exercises and other activities, they get a chance to test their values with others, to build up their self-confidence so they can say yes or no. Straight Talk offers guidance for teachers so that they know what their students need to learn.

Straight Talk started off as a magazine in 1993. There are two million young readers and listeners. The message also reaches out to one million teachers and parents. The magazines Straight Talk (for 15–19 year olds), Young Talk (for 10– 14 year olds) and Teacher Talk are supplements to the common daily newspapers. There are special editions in the local languages for those who do not go to school. Straight Talk radio is broadcast via local radio stations throughout Uganda, a one half hourly programme per week. The Straight Talk Foundation is supported by Sida during 2003–2007 with 8 MSEK. More info at www.straight-talk.or.ug

"Straight Talk always teaches me something new. I now know that abstaining from sex will not lead to the development of a bone in my vagina."

Femina creates intense discussions about sex and HIV in Tanzania

Femina Magazine in Tanzania takes up questions about sex together with lifestyle reporting. Questions about alcohol and drugs are mixed with articles about IT. The idea is called 'edutainment' – to both entertain and to inform and raise concern. Contact with the readers is important. Young people are invited to participate, and part of the editorial staff consists of young people. The magazine is distributed free to the schools and is sold on the streets. Employers have also started to purchase copies to distribute to their employees. In the beginning, the politicians ignored the magazine, but after an interview with the Prime Minister, Femina has become a forum for decision makers to air their views. Now Femina has started a TV show with a young and tough host. The idea is to create an open debate about sex and lifestyles and to put even more pressure on the politicians. By using entertainment as a method to reach out, Femina has had a great impact.

Sida contributes with support, and the private sector in Tanzania also supports the magazine in various ways. Many volunteer organisations have also become involved. But most important is the cooperation with youths, it is their participation that brings Femina to life. Sida is supporting Femina during 2002–2005 with 16,2 MSEK.
More information at www.chezasalama.com

Photo: Phoenix

You and Me – awareness raising in China

Two million is not bad readership figures. The magazine "You and Me" is a part of the undertaking that takes up issues concerning sexuality for boarding school students in the Shaaxi and Henan provinces in China. Those students residing at student homes far from their families, are assumed to become a part of China's mobile population. It is therefore from a HIV prevention point of view of extra importance to reach them. The difference between You and Me in China and Straight Talk in Uganda and Femina in Tanzania is that You and Me is a magazine which is intended to be used for teaching purposes. The magazine is published once a quarter with articles concerning sexuality, identity and relationships. Teacher instruction comes with every issue. Teachers also receive training in new, more interactive teaching methods as well as tips on how to include sex and co-existence into the curriculum. The schools will also be able to have visits by people living with HIV/AIDS, telling students about their existence, in order to reduce discrimination.

The project is run by Marie Stopes China in cooperation with the Swedish Association for Sexuality Education (RFSU) and is supported by Sida during 2004–2006 with 4,3 MSEK.

Peer education step by step in Tanzania

Even if everybody thinks that more education is needed about HIV and AIDS in schools, generation gaps and old-fashioned teaching methods can make it difficult to get the message across. In the Iringa region of Tanzania the problem have been solved with young adults as "bridge builders" between students and teachers. School Health Education Programme and Peer Education (SHEP) train volunteers in the age group 18–25 who are stationed at secondary schools and who act as combined supply teachers, recreational instructors and counsellors. They assist in the school lessons when necessary. In this way they get to know both the teachers and the students at the school. They start up discussions with the students about norms and group pressure, as well as arranging extra curricula activities. The idea with SHEP is that teaching should be stimulating and always be based on the youths' needs. What sort of information do they need to be able to take responsibility for their sexual health? Are there any values that are causing them problems? Do they need support and encouragement? The extra curricula activities, for example, sports, music, dancing and drama, boost a student's self confidence. Students practice problem solving and can take the opportunity to test how much they have learned. Volunteers also help to arrange social activities, such as festivals where the message about sexuality and health is spread to other parts of society. They also act as personal counsellors. Because the age gap is only slight between the volunteers and the students, it makes it easier to talk freely about sensitive issues. The project has become such a great success that the Ministry of Education has asked Student Partnership Worldwide (SPW) to develop the programme in another region, Mbeya.

SHEP is a project under SPW. The organisation is led by youths and uses volunteers in the project, the purpose being to increase the awareness of various health and environmental issues. In 1999 the SHEP project started in Iringa. In the beginning the majority of the volunteers were Europeans, but now almost three quarters are Tanzanians. Most have just finished secondary school, they work with the project for one year as a volunteers before they go on to do a university education.

Access to information – a young person's perspective in India

Adolescence – a time when soaring desires come with uncertainty, anxiety, confusion and awkwardness. In our culture, where issues related to sexual behaviour are still forbidden from discussions, adolescents explore relationships with greater uncertainty. Many of us, the young people, find ourselves in the dilemma of having to choose between temporary attachments and emotional isolation. We move blindly with no one to guide us through the maze of our adolescence, encountering situations we never had encountered in the past peer pressure, sexual anxiety, exposure to drugs, rebellion against the social norms and a tendency to risky behaviour.

Since my association with the MAMTA-RFSU project, I realised how little we knew of HIV/AIDS. We had heard of it from various sources, but no information was comprehensive. I realise now how our little knowledge acted as a sources of prejudice and stigma. On hindsight today, probably, without the right knowledge of HIV/AIDS, I too would have reacted "knee-jerk", like billions of people around the world, to an interface with AIDS in my life.

I now share with my parents, relatives, friends, teachers and all my acquaintances' information on HIV/AIDS, without the anxiety or hesitation I had earlier. Even they appreciate the right information that they get. I firmly believe that

Photo: Pressens Bild

public education is the only way the AIDS epidemic can be controlled. Once for education, our Government promoted, "Each One, Teach One!". It's time to change our slogan for controlling HIV/AIDS and make it, "Each One, Reach One!"

This is a statement from Frederick Sydney Correa, a 17-year old boy studying in St. James' Convent in Kolkata, West Bengal, India. He is a Youth Ambassador associated with the Sida supported MAMTA-RFSU project on Young People's Reproductive & Sexual Health and Rights in India.

A place of their own – Naguru Teenage Information and Health Centre in Uganda

Naguru Teenage Information and Health Centre is the pioneer youth clinic in providing adolescent sexual and reproductive health services in Uganda. It was established in 1994 to increase awareness, motivation and the adoption of safe reproductive health behaviour and practices. But they also increase accessibility and utilisation of adolescent sexual and reproductive health services and work to advocate adolescent sexual and reproductive health and rights. This clinic is considered a model for the country and among the best practices in the region. This is the place to discuss all bodily and emotional concerns you can possibly have as a young person.

Among the centre's services are:
Medical services: Sexual Transmitted Infection (STI) diagnosis and treatment, pregnancy testing, menstrual problems, antenatal, post-natal, acne, post abortion care, infertility, hygiene.

Counselling: Sexual problems, relationships, child care, and substance abuse – to mention a few.

Voluntary Counselling and Testing for HIV: The first initiative of this kind in the region specifically targeting young people.

Teen Radio Program: "Speak Out Teen Radio Show" on FM station Radio Simba. Airs every Sunday 8.00 PM – 9.00 PM. Live phone in talk show with involvement and participation of young people.

Since the centre opened in 1994, it has been visited by over 92,000 young people. There has been a steady increase in visits – from 1,408 by the end of 1995 to 21,945 in 2003. **Sida supports the centre from 2004 to 2008 with 8 MSEK.**

Photo: Phoenix

Photo: IBL

Mainstreaming gets the message through in Bolivia

In Bolivia, 14 percent of teenage girls become mothers before age 18. This is one of the major reasons for the high drop-out rate for girls. Ninety-two percent of the target population (including men) have expressed their awareness of contraceptive methods. But amazingly only 10 percent apply their knowledge, and not even 5 percent use modern contraceptive methods. There is still a lack of awareness of the double protection provided by condoms. HIV/AIDS is not yet a significant problem in Bolivia, but the problem will most likely increase due to the scarce knowledge of protection methods, since the rates of Sexually Transmitted Infections (STIs) are on the same level with those of other countries.

There are guidelines at government policy level and there are several initiatives on the matter of sexual and reproductive health education for teenagers. But the projects are small, and there is lack of coordination between the counterparts involved: municipalities, district education entities, vice-ministries, local institutions with the purpose of addressing gender related violence, and NGO's. They need to be linked up in order to work effectively.

To address these shortcomings, the UNFPA, in cooperation with Danida and Sida, run a project with the general objective of strengthening and institutionalising a cross-sector model to address youth. The basic method is based on cooperation and coordination with government authorities and municipal authorities. The adolescents themselves are involved at an early stage, through their own networks. The model for integral attention provides the same message in targeting the teenagers in school, by their own youth leaders, their family members and the health institutions. The project is run in St. Cruz, La Paz and El Alto, and is the biggest one ever in Bolivia with the sole purpose of addressing youth. **Sida supports the project during 2003–2007 with 35 MSEK.**

The role of boys and men...

Sexual and Reproductive Health and Rights concerns men as well as women. Studies confirm that men often neglect their own sexual and reproductive health. To empower women there is a need for change in beliefs, attitudes and behaviour of many men.

A focus on the role of men and boys in combating HIV/AIDS and promotion of gender equality will benefit everyone and the society as a whole. Men and boys are also negatively affected by certain ideas about masculinity.

Engaging boys and men as partners will encourage them to take responsibility for their sexual behaviour and to respect the rights of women and girls.

The Government of Sweden


sex and lifestyle!

Photo: TAC

Equality and justice for all

Every day, people living with HIV or AIDS face problems because of discrimination. People struggle to get access to proper medical treatment, schools for their children and job opportunities. It is difficult to buy a house when it is impossible to get insurance. The AIDS Law Project in South Africa specialises in helping people with HIV/AIDS to deal with these problems.

The overall purpose of the AIDS Law Project (ALP) is to protect the human rights of people infected with or affected by HIV/AIDS. The project focuses particularly on women, children and prisoners.

The ALP provides quality legal advice and litigation services to people who have suffered from unlawful discrimination. They do research on many difficult social, legal and human rights issues surrounding AIDS. They use their findings to develop law, policies and "good practice" recommendations on issues such as AIDS and employment, AIDS and pregnancy, AIDS and development and AIDS and women. The ALP also produces media materials aimed at creating awareness of rights perspective within government and civil society, and promotes effective advocacy and public participation.

Advice on human rights and legal action

The ALP was founded in 1993 by Justice Edwin Cameron, a human rights activist and a person living with HIV/AIDS. Now he is a distinguished judge at the Supreme Court of Appeal.

Today, the ALP is located at the Centre for Applied Legal Studies at the University of Witwatersrand in South Africa. The ALP has a Legal Department with two paralegal officers who can answer questions, give advice and refer people to other organisations for support. There are also two qualified attorneys. They initiate legal action if the matter is one of public importance and could help to establish legal recognition of the rights of people with HIV and AIDS.

It´s about power and rights...

HIV/AIDS is about power. Traditional power structures that put obstacles in the way of confronting and combating HIV/AIDS must be challenged.

It is also about rights, the right to knowledge and information. The right to health, the right to counselling and condoms, the right to control over one´s own body and sexuality.

This touches on sensitive issues, such as the imbalance of power between men and women, between children and parents and between rich people and poor.

This makes HIV/AIDS prevention one of the most controversial topics in the world today. It challenges both patriarchal structures and conservative dogmas.

The Government of Sweden

Law and Treatment Access Unit

A critical issue in the HIV/AIDS pandemic from a legal and human rights perspective is that of access to essential medicines for preventing and treating HIV infection and AIDS-related illnesses. The law, both at national and international level, has restricted access to antiretroviral drugs (ARV).

The Law and Treatment Access Unit (LTAU) within the ALP was set up in January 2002 to address this crucial issue, as well as other barriers that limit access to treatment for HIV/AIDS. This unit has established a reputation for the quality of its work in deploying a number of pioneering strategies using the South African legal framework to challenge the high price of essential medicines.

In December 2003, as a result of a formal complaint to South Africa's Competition Commission lodged on behalf of the Treatment Action Campaign (TAC) and 12 other organisations, the LTAU effectively concluded negotiations with two major pharmaceutical companies that will ensure better access to antiretroviral medicines throughout sub-Saharan Africa. This matter received international attention and is the first case in the world in terms of licensing and production of generic drugs in countries where such medicines are still under patent protection.

Networks and associations

The ALP is linked to important networks of professional, medical and activist organisations. They work closely with two organisations in particular: the AIDS Consortium and the Treatment Action Campaign (TAC). The ALP also collaborates with the AIDS Law Unit in Windhoek in Namibia, the Canadian HIV/AIDS Legal Network and UNAIDS.

Sida-support for the fight for human rights

Respect for human rights plays a crucial role in ensuring effective support is made available to people infected with HIV or living with AIDS. This is why Sida provides support to projects such as the Aids Law Project in South Africa, which uses human rights as a tool for improving the situation and status of those affected by HIV/AIDS. Sida will provide the ALP with 4 MSEK between 2004 and 2006.

Photo: TAC

Monks in Mekong provide compassion, care and support

Over the past six years or so, monks from the Mekong subregion have been able to assist people with HIV and their families by helping to reduce stigmatization, giving counselling, using traditional medicines and healing practices, providing material and spiritual support and giving access to medical and welfare services.

In Vietnam, Buddhist temples in Ho Chi Minh city now have a regular stream of families affected by HIV seeking counselling and herbal medicine from the monks and nuns. In China, Thailand and Cambodia, many monks have been providing this kind of spiritual and emotional support over a long period of time, often in conjunction with local hospitals and health services.

In Savannakhet, Lao monks visit the hospital self-help group to counsel and lead meditation sessions. In Cambodia, where more people are falling ill as the pandemic advances, home visiting is an important contribution to affected families.

In Myanmar, Cambodia, Vietnam and, to some extent, Thailand, monks and nuns traditionally provide education and care to large numbers of disadvantaged children, including an increasing number who have lost their parents to AIDS.

Photo: Phoenix

Sida-support to Buddhist monks and UNICEF

Sida is supporting UNICEF's regional programme in five countries in the Mekong region: Laos, Burma, Cambodia, China and Vietnam. The main components of the programme are behavioural development and change, life skills, prevention of mother–child transmission, care and support to families affected by HIV. Important recipients of support are orphans and vulnerable children. As early as 1997, UNICEF initiated a partnership with the Buddhist community as part of the Mekong programme. UNICEF sought to build on the experience of Northern Thai monks and nuns who had been coping with the HIV/AIDS pandemic at grass root level since it first began to decimate their towns and villages in the early nineties. Sida's support amounts to 31,4 MSEK between 2001-2004.

HIV prevention in the Russian correctional system

Close to 900,000 people are incarcerated in Russian prisons. Almost 16 percent or 37,250 of individuals officially registered as being HIV-positive in Russia are serving time, most of them for drug-related crimes. The combination of overcrowded spaces, widespread HIV infection, and a high number of needle addicts increases the spread of HIV/AIDS both inside and outside the prison walls.

The Russian correctional system employs 350,000 people in 763 prisons around the country. Most of the prisoners know very little about HIV/AIDS, and the prison personnel often lack a basic understanding of the disease. This leads to risky behavior and complete isolation of those who are infected or sick.

Drug injection, tattooing with unsterile needles, and unprotected sex are very common practices among the prison population. In collaboration with Sida, the World Bank, and the Russian Ministry of Justice, the AIDS Foundation East-West developed an educational program for HIV prevention for the entire correctional system – doctors, psychologists, correctional officers, teachers, and prisoners.

Information about transmission and prevention is disseminated in brochures, posters, videos, and among the prisoners themselves. Disinfection equipment and condoms are also distributed. Since HIV is closely associated with gender, the program pays particular attention to this issue. The project organisers strive for equal participation of female and male employees in the correctional system.

During the next three years, Sida will support the project with 13 MSEK.

Photo: IBL

Leadership is necessary...

We know that leadership is necessary. Strong leadership has been a common characteristic in countries that have succeeded in reversing the spread of the pandemic.

Leadership is not only about countries and nations. It also concerns business, national and international organisations and civil society at large.

Without a strong and committed leadership the pandemic will continue spreading like wildfire. Leadership is, therefore, also about accountability. Accountability to citizens, employees, family members, children and many others.

The Government of Sweden

Photo: Pressens Bild

A comitted president, Yoweri Museveni, Uganda

Extending knowledge on HIV/AIDS budgeting

The institutional mechanisms for making funds available to national and provincial governments determine whether spending is effective and transparent. This is the reality in many countries in both Africa and Latin America, and it impedes the government's attempts to tackle HIV/AIDS.

Both regions are currently implementing coping strategies, prevention programmes and building capacity to respond to the pandemic. There are experiences in both regions that are equally relevant and important. One example is the government of South Africa's approach of providing anti-retroviral (ARV) drugs for AIDS patients. On the other hand, Brazil is a leading example of a country that is already manufacturing and distributing ARV drugs.

The Institute for Democracy in South Africa (IDASA) and the Latin American organisation Fundar have joined, with funding from Sida, to carry out comparative research on governments in Latin America and Africa on HIV/AIDS budgeting and programming, and on how they make information available to policy-makers and government officials.

The goal is to extend the knowledge on HIV/AIDS budgeting as a tool for effective national planning and budgeting, and to enhance the advocacy towards policy-makers/politicians who are making decisions regarding HIV/AIDS. The countries involved are Brazil, Peru, Chile, Costa Rica, Nicaragua, Zambia, Namibia, Botswana, Mozambique and Zimbabwe.

Sida-support to comparative research in Latin America and Africa

Sida supports the IDASA project on extending knowledge on HIV/AIDS budgeting during 2002–2004 with 2,7 MSEK.

Photo: Phoenix

Partnership strenghtens mobile populations in Southern Africa

The International Organisation for Migration (IOM) is at the centre of a new partnership in Southern Africa to build capacity to combat HIV/AIDS among mobile populations.

The vulnerability of mobile populations to HIV transmission is well known. Lower-income countries have high levels of mobility, as people move in search for work, are involved in trading, or are stationed through their jobs. Migration often involves a degree of social exclusion from the host society and residence in deprived environments that lack strong community cohesiveness and norms. In sum, the conditions tend to be conducive to risky behaviour. Moreover, Sexual and Reproductive Health and Rights information and services are often not available.

Desk review in nine countries

The Partnership on HIV/AIDS and Mobile Populations in Southern Africa (PHAMSA) originated from a Sida-supported desk review, by IOM, on the vulnerability of mobile populations to HIV/AIDS in nine countries in Southern Africa. The objectives of the partnership are to build capacity among stakeholders in HIV/AIDS prevention and mitigation through direct inputs and research. Furthermore, the partnership aims to build capacity for advocacy and to advocate for needs of mobile populations regarding Sexual and Reproductive Health and HIV/AIDS.

Capacity building involves organising prevention campaigns and providing employers with the technical means to increase condom distribution and integrate HIV/AIDS knowledge in worker training programmes. The research section includes studies on the vulnerability to HIV/AIDS of mine-workers and their families in areas where migrants work, and research on men having sex with men in all-male work environments. Advocacy involves developing radio programmes targeting mobile populations, commissioning journalists to write articles, and organising public information campaigns to address discrimination and xenophobia.

The full chain of activities...

The national and international response to HIV/AIDS must be scaled up. Additional resources are required, that must be provided in a foreseeable way and based on long term commitments in order to be sustainable. More effort must also be put into promoting peace and preventing conflicts, as conflict is one of the prime causes of the spread of HIV-infection.

Sweden will continue to put an extra effort into the work against the pandemic. The Swedish response means a comprehensive approach where prevention is still the main focus.

Renewed focus will be put on treatment, care and mitigation, on the development and availability of vaccines and microbiocides, and on access to affordable medicines.

Renewed focus will also be put on the human rights perspective. The fight against the pandemic must have as its point of departure a rights based approach. A number of rights have to be protected and ensured; the right not to be excluded and the right not to be subject to stigma and discrimination, to mention a few.

The Government of Sweden

Sida-support to a new partnership

The IOM-PHAMSA project will be running during a three-year period, from 2003 to 2006. Sida's contribution is 15 MSEK.

Below is a selection of additional projects/ programmes supported by Sida

Africa regionally

Knowledge of the consequences of HIV/AIDS

SAfAIDS, Southern Africa AIDS Information Dissemination Service, in Harare, Zimbabwe, considers HIV/AIDS as central to all development work. The organisation helps countries and other organisations with information regarding the socio-economic consequences of HIV/AIDS. They focus on educating and informing the media. SAfAIDS, also acts in an advisory role with regard to "good practices" in the fight against HIV/AIDS.

A mapping out of the effects on agriculture

RENEWAL is a network of organisations which investigate the effects of HIV/AIDS on, among other things, agriculture, and present suggestions and solutions to the governments. RENEWAL, Regional Network on HIV/AIDS, works with the project Rural Livelihoods and Food Security in Malawi, Uganda, Zambia and South Africa.

Preventive work among guest workers

Guest workers are often exposed to great risks of infection by HIV/AIDS. They work far from home and do not have the same access to information and health care as the indigenous population. ILO, the International Labour Organisation, is now surveying the situation and is initiating preventive HIV/AIDS work among the guest workers in Uganda, Ghana, Tanzania and South Africa.

Internet as a meeting place for artists

DRAMATOOL is a network of theatrical groups, drama teachers and artists in Uganda, Tanzania, Kenya, Ethiopia and Sweden. The network works with ICT, Internet Communication Technology, to create meeting places and cooperation between people and groups who work with drama as well as to stimulate, for instance, people's knowledge about HIV/AIDS.

Tanzania

Studies of mother to child transmission

Studies of Mother-to-Child Transmission (MTCT) of HIV started as early as 1989 in Dar es Salaam in Tanzania. The results have been used for instance to identify what factors increase the risk for MTCT of HIV and to develop methods for the early diagnosing of infants with HIV. The work continues with a follow up of mothers and children from earlier studies. The results will be used to develop methods which can prevent MTCT and develop treatment methods for mothers and children who have been affected by HIV/AIDS.

Uganda

Information and education for youths in the slum areas

The youth centre Mprerewe in Kampala, Uganda, arranges activities such as dances and sporting events for youths from the slum areas in order to reduce the spread of HIV/AIDS. The youths can even receive training in sewing, mechanics, catering and electronics to name a few. At the centre there are "health providers" for HIV testing and counselling, treatment of Sexual Transmitted Infections (STI), family planning and the distribution of condoms. Every day, several "peer providers" also work in the field in order to spread information and to encourage people to come to Mprerewe. The youth centre is run by UYDEL, Uganda Youth Development Link, with the support among others of IOGT-NTO.

Mozambique

Efforts with the electrification project

The state owned Road and Transport Authority has integrated preventive HIV/AIDS work into a road and electrification project. By informing and spreading knowledge of HIV/AIDS, providing HIV tests and distributing condoms, the risk of contracting HIV/AIDS in connection with the building project is reduced. The target groups are: the staff employed in the project, construction workers, the local population and prostitutes. They also cooperate with the local authorities and health centres in the areas where the roads and the electricity network are being built.

Ethiopia

How to combat HIV with help from the education system

An international seminar "Accelerating the Education Sector Response to HIV/AIDS" was recently held in Addis Ababa for regional and woreda (district) educational planners in Ethiopia. One of the outcomes was that the planners returned to their region with draft strategies and plans on how to work with HIV issues in the educational system including mitigation, prevention, orphaned and vulnerable children and a HIV/AIDS workplace policy. The most important aspect brought forward by the government is the issue of mainstreaming HIV/AIDS activities into the school system. In all schools in Ethiopia there will be an anti-AIDS club whose members are teachers and pupils from the school.

Namibia

The Schools' own web sites about HIV/AIDS

SchoolNet in Namibia is a non-profit organisation and is working to increase the use of the Internet in schools. Part of the work is to encourage the schools to produce their own web sites on how HIV/AIDS affects the students' towns and villages. At www.schoolnet.na more information is provided.

Gender and HIV/AIDS mainstreaming

Men's and women's poverty is often caused by different factors; the consequences of poverty often differ for men and women, as do their strategies for coping. The risk of getting infected by HIV also differs – women are two-and-a-half times as likely to be infected as their male counterparts in Africa. In Namibia, the linkages between gender inequalities, HIV/AIDS and poverty are essential if a successful poverty strategy is to be implemented in the country. This is why gender and HIV is mainstreamed into Namibia's National Poverty Reduction Action Programme – NPRAP – with support from Sida.

Zimbabwe

A strong light on HIV/AIDS in the countryside

Four missionary hospitals in Zimbabwe are carrying out a comprehensive HIV/AIDS project targeting the population in the countryside of the Manicaland and Masvingo provinces. The project's name is Ruvheneko, which in Shona means "strongly directed light". Ruvheneko's goal is to provide the population with access to HIV testing, counselling and home based care. They also work by providing allowances so that orphans can go to school, support children who are sick with AIDS, provide a medical and legal referrals service and support activities that contribute to financial independence.

India

Support for orphans and single mothers

The Lifeline Foundation in India provides direct support by paying for school fees and books for children who have lost one or both parents due to AIDS or a drug overdose. If necessary the children may receive medicines and care. Further, the children's relatives get information and counselling in order to reduce stigmatization and discrimination. The children's mothers are offered legal support, professional education and loans to be able to start their own business.

Europe

The Right to Know

A HIV prevention project is in operation in Bosnia-Hercegovina, Macedonia and Serbia-Montenegro which is called "What every adolescent has the Right to Know". The project is planned, designed and carried out entirely by youths and is very much aimed at interaction and the media. Among other things there are theatre performances, web sites, journalistic workshops and sporting events – all designed to increase the young person's awareness of the risks of HIV/AIDS and other diseases, and to change their behaviour.

Russia

The young peoples' right to knowledge on sexuality

The Russian Family Planning Association (RFPA) and the Swedish Association for Sexuality Education (RFSU) focuse on youths' sexual and reproductive health. Sexuality education in the schools, education about gender equality and a focus on openness and the right to knowledge on sexuality will reduce the risks of contracting HIV/AIDS. The project is being carried out in Moscow and the Pskov, Novgorod, Petrozadovsk, Murmansk and Archangel regions. They are also working to make the politicians and the media aware of HIV/AIDS questions.

Ukraine

"Condom week" will get more people to protect themselves. During the "Condom Week" in Kherson, Ukraine, youths received information about HIV/AIDS and they competed in inflating condoms. This is an example of how the UNDP together with the organisation Mangost, in a playful manner, work with preventive action in this area. The project also works to reduce drug misuse and to stop the spread of HIV/AIDS among drug addicts.

Swedish civil society

Sida supports 13 larger Swedish non-governmental organisations in their cooperation programs with local NGOs in developing countries. The support amounts to about 1 100 MSEK annually out of which about 13 MSEK is estimated to address direct HIV/AIDS interventions. One example is the Church of Sweden and its local partner Lutheran World Service within their support to one of the hardest hittest district in the south of Uganda. The "Rakai Community Based HIV/AIDS Project" creates possibilities for the local authorities to support young people and marginalized groups in accessing information, care and support, education and income generating activities.

All actors are needed

Sweden believes that all actors are needed to win the fight against HIV/AIDS; multilateral agencies, bilateral cooperation, private business sector, churches, civil society at large. All the "instruments" in the "tool box" must be used.

Sweden is a strong supporter of multilateral work. Sweden supports UNAIDS, WHO, UNFPA and other UN agencies with activities on HIV/AIDS.

UNAIDS as a Joint Programme within the UN system has the mandate to enhance and coordinate the UN response to HIV/AIDS.

WHO with its normative mandate on health matters is also crucial for the fight against the pandemic. The recent decision on the "3 by 5" initiative, a joint WHO and UNAIDS initiative, will forcefully help to advance the treatment agenda. Another important role for WHO is to secure the quality of new drugs.

With its mandate on sexual and reproductive health, UNFPA also plays a vital role in the fight against the pandemic, and is a UN convening agency, along with key non-governmental organisations, of the Global Coalition on Women and AIDS Task force.

Sweden also strongly supports the Global Fund To Fight AIDS, Tuberculosis and Malaria as a major funding partner in this work

Sweden believes that non governmental organisations have a major role to play in the fight. This goes for international organisations like the IPPF, but also small local community based organisations.

All actors are needed. And they all have to work in a coordinated way. Sweden therefore strongly supports the UNAIDS "three ones initiative" which at country level stands for one agreed HIV/AIDS action framework that provides the basis for coordinating the work of all partners, one national AIDS coordinating authority, with a broad-based multisectoral mandate, and one agreed country-level monitoring and evaluation system.

"It is easy to feel overwhelmed when one meets people with HIV/AIDS. I believe that our most important task is not to give up. We must find the strength to continue our engagement, for the sake of all the women and men who are struggling for a better future, for all the children who have been forced into adulthood overnight. To give up would be to let them down, with no hope for the future."

Carin Jämtin
Minister for Development Cooperation

"In the light of the spread of the epidemic, it is not enough to merely "take HIV/AIDS into consideration" in our development cooperation. I believe, that in high prevalence countries, HIV/AIDS increasingly needs to be the point of departure for all activities Sida engages in."

"The great challenge now facing Sida is to set concrete goals that both clearly express our ambition and also provide us with tools to review the results. Mainstreaming is no longer enough. It is time to shift the focus to the whole chain of necessary interventions; prevention, care & treatment and impact mitigation."

Maria Norrfalk
Director General, Sida

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