



International Community of Women Living with HIV & AIDS (ICW Eastern Africa)

Promoting the voices and improving the situation of women living with HIV worldwide



*Getting to the Zeros: Zero New HIV Infections, Zero Discrimination and Zero AIDS Related Deaths
“Re-engaging leadership of women living with HIV for effective HIV prevention”*

MESSAGE ON WORLD AIDS DAY 2012, KAMPALA:

1st December 2012

The International Community of Women Living with HIV & AIDS Eastern Africa (ICWEA) join the rest of the world in commemorating World AIDS Day 2012 and committing to achieve *zero new HIV infections, zero stigma and discrimination and zero new AIDS-related deaths*.

We commend the East African regional governments and respective Ministries of Health for their commitment to this mission. In recent years, they have developed comprehensive eMTCT plans, adopted new scientific advances such as safe medical male circumcision, and recognized the preventive and other benefits of starting treatment earlier.

However there are still alarming numbers of new HIV infections in women and children in our region.

- In Kenya, it is estimated that 12,894 children under age 15 became newly infected with HIV in 2011, with the overwhelming majority contracting the virus through pregnancy, delivery, or as a result of breastfeeding.¹
- In Uganda, it is estimated that 22,000 babies are being born with HIV each year (65 babies per day).²
- In Tanzania, over 48,000 children are infected with HIV each year because of a shortage of PMTCT services. Of the 596 people infected with HIV every day, 118 children are infected during pregnancy, childbirth and breastfeeding.³

To achieve the ambitious goal of Getting to Zero, the re-engagement of women living with HIV is required.

Zero New Infections

Lack of information about the range of family planning options and low uptake of services, including HIV counseling & testing and PMTCT continues to be an issue in Eastern Africa. High user costs associated with family planning methods such as IUDs, and implants are also a barrier to access. Antiretroviral coverage for pregnant women living with HIV is just 36% in Burundi⁴ and 65% in Uganda.⁵

To achieve *zero new infections*:

- Greater efforts are required to provide Women Living with HIV with information and a comprehensive range of preventative methods, including family planning options.
- Women Living with HIV must be *re-engaged at the center* of the implementation of eMTCT plans. This requires that organizations and networks of Women Living with HIV are funded so that they are able to meaningfully engage.
- Our governments must scale up HIV treatment as Prevention for women living with HIV will decrease the risk of mother to child transmission

Zero Stigma and Discrimination

Stigma and discrimination deter Women Living with HIV from accessing family planning and PMTCT services. Pregnant women living with HIV report alarming rates of abuse and stigma by health workers, ranging from

¹ Office of the President National AIDS Control Council & National AIDS and STI Control Programme, *Kenya AIDS Epidemic update 2011* (2012).

² Uganda AIDS Commission, *Global AIDS Response Progress Report: Uganda Jan 2010 – Dec 2012* (April 2012).

³ Rosina, John, *Over 48,000 children born with HIV annually*, THE CITIZEN, 31 March 2010, available at: <http://www.thecitizen.co.tz/news/51-other-news/1036-over-48000-children-born-with-hiv-annually.html>.

⁴ UN AIDS, *Data Tables 2011*, page 10.

⁵ Uganda AIDS Commission, *Global AIDS Response Progress Report: Uganda Jan 2010 – Dec 2012* (April 2012).

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judgmental attitudes about sexual and reproductive choices to forced sterilization and tubal ligation, as has been documented by ICWEA in Kenya. Young Women Living with HIV in particular report significant fear of attending antenatal clinics because they often face discrimination for being young and sexually active or for desiring children when HIV-positive.

“Many girls I have interacted with go to hospitals and come back and tell me that they cannot go back to the health centers – there is too much stigma. How are we going to help these young girls who have refused to go for antenatal due to stigma?”

- A young girl who participated in ICWEA’s Sexual and Reproductive Health Training

The legal environment in East Africa fuels discrimination against Women Living with HIV, hinders access to services, and slows down achievement of *zero new infections and zero new deaths*. For example, the policy of mandatory HIV testing for all pregnant women and couples testing has deterred women from attending antenatal care because they fear being diagnosed.

To achieve *zero stigma and discrimination*:

- Women Living with HIV *must be re-engaging at the center* of prevention of vertical transmission implementation efforts, working as and alongside service-providers, mentor mothers, and supporters of pregnant Women Living with HIV;
- East African governments must ensure that legal and policy environments are favorable to Women Living with HIV and conducive to accomplishing *zero stigma and discrimination*. Criminalization of HIV transmission, sex workers, and sexual minorities must be eliminated so that these key communities can access HIV-related services;
- Female controlled preventive intervention including virginal microbicides, cervical barriers (the latex diaphragm), pre-exposure prophylaxis (PrEP) should be promoted by our governments and;
- Governments must fund and scale up programmes that reduce Stigma and Discrimination and related Gender based violence for women living with HIV - the evils contributing to new HIV infections.

Zero New AIDS-related Deaths

Lack of adequate information about PMTCT and maternal health services for Women Living with HIV persists at the community level, which keeps attendance rates low. Insufficient access to treatment and frequent drug stock outs plague East African Countries and many people living with HIV (PLHIV) are dying because they cannot access ARVs.

To achieve *zero new deaths*:

- More efforts must be made to reach Women Living with HIV at the community level. Funding grassroots organizations and support groups is essential to ensuring that all PLHIV have the correct information about care options.
- Underlying issues relating to access to treatment and supply chain management must be addressed, especially as we transition to eMTCT.

The Community of Women Living with HIV in Eastern Africa hereby call on our governments and policy-makers to live up to their commitments to women and girls by allocating resources and capitalizing on synergies and the leadership abilities of Women Living with HIV to achieve *zero new HIV infections, zero stigma and discrimination and zero AIDS-related deaths*.

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