

WLHIV AT THE CENTER OF THE NATIONAL AND COUNTY HIV&AIDS RESPONSE

Who We Are

We, Kenyan women living with HIV (WLHIV) from the organizations and networks of women living with HIV ((young; older women; women with disabilities; and engaged in sex work) representing most of the counties of Kenya participated in two consultative meetings for priority setting from our perspective for informing the process of development of the Kenya HIV and AIDS Strategic Framework 2014/15 – 2018/2019 and for the Global Fund Concept Note drafting process on October 4, 2014 at Olive Gardens Hotel and on 21st-23rd October 2014 at Silver Springs Hotel. This meeting was held in line with the principles and requirements for the New Funding Model (NFM) for Global Fund for Tuberculosis, HIV and AIDS, and Malaria Prevention.

As the International Community of women living with HIV, Kenyan Chapter (ICW- K); we welcome the fact that there is need to increase visibility and involvement of Women Living with HIV (WLHIV) in Kenya **at all decision making levels.**

ICW- K expressly welcomes the fact that WLHIV in Kenya can unite, only in this way can a “level playing field” be achieved, a basic prerequisite for advocating favorable policies at both devolved and national levels.

This paper aims to provide a position statement by girls and women living with HIV; of the need to have girls and women living with HIV in Kenya at the center of the national and county HIV and AIDS response.

Why Women and Girls Living with HIV

Statistically, Kenyan women and men as well as girls and boys are disproportionately affected by HIV, tuberculosis (TB) and malaria disease burden. Women aged (15-64 years) have a higher HIV prevalence (6.9%) compared to their male counterpart (4.4%) same age group. Young women aged (20-24 years) are 4 times more likely to be infected (4.6%) compared to their male counterpart (1.3%) same age group (Kenya AIDS Indicator Survey, 2012).

The evaluation of the previous KASP III revealed that despite the various successful interventions towards mitigation the impact of HIV and AIDS, women and girls continue to face challenges in accessing HIV prevention, treatment, care and support services that are compounded by an acute unmet needs for FP and SRHR services for WLHIV which potentially limits their access to health services and information.

Therefore the participation and inclusion of WLHIV in the development, implementation and monitoring of the next KASF and other related policies, strategies and programs at county and national level will ensure increased access to services by women and girls and reverse the trend of the epidemic at both the national and county level.

KEY PRIORITIES FOR WOMEN LIVING WITH HIV

Increased Access to Treatment for Women and Girls

- There is need to ensure comprehensive, quality, and dignified health care for women and girls living with HIV.
- To promote the universal right of all women and girls living with HIV to access reliable, comprehensive, and sustainable care, treatment, and support services.
- Women living with HIV must be supported by ensuring services are provided in a human rights framework to be able to make informed decisions about their own treatment and care.
- Improve treatment adherence and retention through community based counseling support.
- Early voluntary access to CD4 and viral load testing
- Ensure zero tolerance for VAW and girls to ensure uptake and adherence to ART
- Intensify treatment preparedness that includes treatment literacy, adherence counseling and nutrition
- Financial support for Psychosocial Support at community level
- Ensure easy access to viral load testing services.

Sexual Reproductive Health and Rights for Women and Girls

Living with HIV

- Increase comprehensive Sexual Reproductive health and rights information and services targeting women, adolescence and young women living with HIV including sexuality and peer to peer education. A range of options available to women – ensuring that “method mix” including long acting reversible methods that are hormonal and non-hormonal is a priority
- Revise and modify policies and laws that restrict women and girls living with HIV from accessing HIV and SRH services including criminalization laws, forced and coerced sterilization and institutional violence.
- Ensure girls stay in school by various interventions
- Initiate social protection programmes at community level for young women and girls living with HIV
- Review and amend the harmful and discriminatory provisions in the HIV and AIDS Prevention and Control Act, 2006.
- Intensify legal literacy for WLHIV including young women and adolescence living with HIV at all levels and scale up stigma and discrimination reduction interventions.

Reduction of Stigma and Discrimination

- Stigma, discrimination, and other barriers to treatment and care must be eliminated in order to ensure that women and girls living with HIV and other marginalized populations can receive the care they need and are entitled to.

- Increase capacity of networks of women living with HIV including female sex workers, women who use drug to advocate for rights based HIV care services
- Social protection programmes should address needs of women living with HIV and TB, young women and orphans living with HIV, this will empower them and mitigate the effects of stigma and discrimination.

Zero Tolerance to Gender Based Violence against Women Living with HIV

- Harmful gender norms continue to create stumbling blocks for women living with HIV seeking health services. Promote and support programmes that will eliminate gender based violence, gender stereo types against women and girls living with HIV.
- Institutional and domestic violence against women living with HIV is endemic and largely underreported. Women who experience domestic violence are at increased risk of HIV acquisition and, in turn, women living with HIV are at increased risk of violence. As a result, women living with HIV continue to receive substandard or harmful health care
- It is imperative to ensure the sexual and reproductive rights of women living with HIV and to empower women to make informed decisions on matters related to their sexual and reproductive health and rights
- Women living with HIV must have adequate resources and support to provide for their basic economic and social human rights, including the right to sustainable livelihoods, housing, sanitation, adequate clean food and water. We seek recognition of the right of women living with HIV to own and inherit property.
- We seek an immediate end to forced and coerced sterilization of WLHIV. We demand respect by healthcare workers, families, and community members for WLHIV sexual and reproductive health and rights.

Research, Monitoring and Evaluation

- Carry out research that is informed by the needs and priorities of WLHIV including young women and adolescents.
- Ensure that research is gender responsive at all levels – planning, implementation, and post research processes.
- Meaningful representation of WLHIV at the national research bodies
- Data should be desegregated and HIV indicators should be designed to track progress towards achieving gender equality.

Community Systems Strengthening

- Institutional strengthening of women living with HIV networks to provide leadership, effective governance and service delivery at community level
- Strengthen WLHIV support groups to increase uptake of prevention, treatment and care services
- Train and remunerate WLHIV in communities to scale up prevention, treatment and care services.
- Support formation and recognition of a WLHIV advisory committee