

CONCEPT NOTE

26th Programme Coordinating Board meeting Thematic Session: Linking Sexual and Reproductive Health (SRH) services with HIV/AIDS interventions in practice

I. Rationale:

At the 24th Programme Coordinating Board meeting, agreement was reached on the thematic session of the 26th PCB meeting, entitled *Linking Sexual and Reproductive Health (SRH) services with HIV/AIDS interventions in practice*. This session will enable the PCB to:

- sharpen its substantive focus, allowing for more in-depth consideration of key issues affecting the global AIDS response; and
- create space for a broader range of actors to interact, exchange views and present experiences on matters of common interest.

In selecting this theme, the PCB cited changes in the global political architecture and emerging entry points to address integrating health services, and requested that issues related to gender and youth (education) be considered under this theme.

The call to integrate the services for SRH and HIV interventions globally has frequently been made by several stakeholders, and research on the benefits of SRH/HIV linkages has been conducted. However, in many cases, HIV and SRH activities remain in silos, and it seems difficult to put an integrated approach into practice. Given that the UNAIDS Joint Programme unites the efforts of key UN organizations that can influence this debate and propose concrete actions in consultations with civil society and governments, the PCB meeting provides an important opportunity to highlight and move this important agenda. It will also allow participants to review challenges of integrating SRH services with HIV interventions and vice-versa, and share lessons and best practices.

II. Relevance of the theme:

The importance of linking sexual and reproductive health (SRH) and HIV is widely recognized¹. Combined services, promotion and strengthening service delivery systems should improve client services and promote efficiency. The international community agrees that the Millennium Development Goals will not be achieved without ensuring universal access to SRH and HIV prevention, treatment, care and support. Most of UNAIDS Cosponsors within their respective mandate, are involved in improving sexual and reproductive health, enhancing human rights and promoting HIV prevention services.

Examples illustrating the relevance of an integrated approach:

¹ Sexual & Reproductive Health and HIV- Linkages: Evidence review and recommendations IPPF/UCSF/UNAIDS/UNFPA/WHO 2009

- Promotion of dual protection whereby e.g. condoms are not only distributed within the scope of birth control but also as a measure to prevent the spread of sexually transmitted infections (STIs) including HIV. And vice-versa e.g. HIV prevention campaigns that also address prevention of unwanted pregnancies. Family planning services have the advantage of reaching groups that are more difficult to reach in HIV prevention campaigns such as girls and women in rural areas.
- Integration contributes to reducing mortality from HIV and AIDS. For pregnant
 women living with HIV, the single most significant intervention that could
 reduce maternal mortality, and virtually eliminate vertical transmission,
 namely the timely initiation of antiretroviral therapy for life, remains largely
 underutilized.
- 3. Integrated services can expand the reach of programs and services to more key audiences. For example, young people tend to be more motivated to use condoms to prevent unintended pregnancy than HIV. So programmes that focus on both can broaden their appeal and can include (condom) negotiation skills and have an important impact on preventing pregnancy and STIs.
- 4. Integrated services provide the opportunity to address common challenges to reduce stigma and discrimination to increase access to and use of services. The accessibility of HIV testing and counseling (HTC) can be increased by integrating it in SRH including ante-natal services as this allows people to learn their status in a more anonymous setting than at stand alone HTC centers.
- 5. Provision of counseling services on reproductive choices for People Living with HIV (PLHIV) and their partners contributes to positive health, dignity and prevention and minimizes the risk of babies born with HIV.

As requested by the PCB specific attention will be paid to young people and gender issues. Participants will be invited to discuss the opportunities of women to control or influence their own sexuality and reproduction, to become familiar with the female condom, the state of the art with regard to the development of microbicides and Preexposure prophylaxis (PreP). Progress in involving men and boys in SRH services and programmes that address harmful gender norms will be included. Sexual violence, sexual diversity and sexuality education with due respect to human rights, gender issues and Greater Involvement of People Living with HIV and AIDS (GIPA) will also be addressed.

Linking Sexual and Reproductive Health (SRH) services with HIV interventions in practice will be easier when:

- the linkages are acknowledged and reinforced in national policies on SRH and HIV;
- guidelines are provided on linking the various work of various sectors (e.g. education, agriculture, justice) and the work of various departments within ministries (e.g. departments of reproductive health, sexually transmitted diseases, HIV, etc.)
- > SRH and HIV programmes are integrated in the administrative system at subnational levels (provincial, district and local levels).
- > SRH and HIV programmes serve women and girls men and boys and key populations(lesbian, gay, bisexual and transgender people (LGBT), sex

A legal and social environment enables key populations and PLHIV to access SRH services without discrimination or criminalization

At the end of the thematic segment, the participants have become aware of the:

- large variety of issues related to SRH and HIV
- opportunities and challenges of linking SRH and HIV-services
- conditions which make it easier to link SRH and HIV programmes and services

III. Venue: ILO building, Geneva

IV. Agenda:

09h00 - 09h15: Opening of the Programme Coordinating Board

09h15 – 10h00: Introduction to the Thematic Segment

10h00 - 10h30: Coffee Break

10h30 - 12h30: Two parallel breakout sessions

12h30 - 14h00: Lunch

14h00 – 16h00: Two parallel breakout sessions

16h00 - 16h45: Coffee Break

16h45 – 18h15: Reporting, discussion and conclusions

During the thematic segment, three exhibitions will be held:

- Paintings of Ms. Elisabetta Farina included in the 'Art for Health' project to increase awareness of to promote action towards the improvement of women's sexual and reproductive health conditions around the world.
- A photo exhibition of photographer Mr. Philippe Castetbon showing portraits of men who are criminalized in their own country because of their sexual orientation.
- A display of a wide range of SRH commodities.

The thematic session is designed to be interactive and broadly owned by the participants. The segment is based on an open and frank dialogue that is responsive to the issues at hand and supportive of shared learning. Active participation is encouraged of individuals from all sectors represented at the meeting as well as of resource people, presenters and moderators.

V. Detailed agenda:

Opening of the PCB: Welcome words by the Chair of PCB and EXD UNAIDS

Introduction

The introduction will enable the participants to become familiar with various sexual and reproductive health and HIV services and the current state of the art with regard to integrating these services.

Speakers of different constituents will highlight the importance of linking sexual and reproductive health services with HIV interventions from a global and country perspective as well as from the point of view of service-providers and consumers. The advantages and challenges of integrating services are addressed, as well as policy, programme and cost implications. Attention will be paid to issues related to human rights and opportunities of service integration for stigma reduction. The gender perspective as well as the needs and demands of young people, key populations including people living with HIV are addressed.

At the end of the introduction participants will be prepared to actively participate in the break-pout sessions and take part in in further discussions.

Break-out sessions:

Each break-out session focuses on a different aspect of linking SRH and HIV services in practice: sexuality education which forms the fundament for every aspect of sexual and reproductive health including HIV-prevention, care, support and treatment; provision of integrated SRH and HIV services at country level and how to enhance further integration taking into account the different perspectives of service providers and clients; the current funding opportunities for integrated services and how to enhance commitment and action towards gender-based violence as an infringement of sexual and reproductive health and human rights.

Every session allows for discussion, sharing of experiences, and networking with experts from the field, practitioners and policy makers. In all break-out sessions gender and gender inequality, human rights and the position of and needs and interests of young people as well as of PLHIV will be addressed.

- 1) Empowering young people through comprehensive sexuality education With the guidance of UNESCO a demonstration teaching and learning session will be conducted to provide the PCB participants an opportunity to observe how sexuality education could be effectively delivered in classrooms; observe how young people would react and respond to sexuality education; and have direct interaction with the teacher(s) and students. After the demonstration a panel discussion will be held focusing on views from the field concerning sexuality education and linking SRH and HIV services.
- 2) Models, Magic and Meaning: Integrated Sexual and Reproductive Health and HIV Services

UNFPA and IPPF will lead the participants through an interactive session to explore some of the key elements of bi-directional integrated service delivery and to highlight some of the current programmatic opportunities that could shape and catalyze further action at country level. The specific objectives of the session are to 1) highlight selected country examples that demonstrate the opportunities and challenges of different models of service level integration 2) discuss some of the key parameters that need to be addressed to ensure optimal delivery of meaningful integrated services and 3) showcase the importance of addressing the sexual and reproductive health needs of people living with HIV. The session will enable both service providers and clients to share their experiences with integrated services.

3) Funding opportunities for integrating SRH and HIV services

This panel discussion organised by WHO and the Global Fund to fight AIDS, Tuberculosis and Malaria provides an opportunity to engage multi- and bilateral donors and foundations, UN agencies, governments and civil society organisations in a meaningful dialogue on funding opportunities, advocacy for SRH/HIV, policy considerations and scaling up an implementation at country level.

4) Gender based violence and HIV

This breakout session – led by the UNAIDS secretariat – aims to build joint commitment for accelerated country action against violence against women and girls, as a driver of HIV in and of itself, as well as a manifestation of harmful gender norms. As such, the session will highlight the link between violence against women and girls, gender equality and HIV, and review the current state of evidence and practice in developing and implementing interventions and strategies. It will also provide an opportunity to share the experiences of respective partners.

Reporting, discussion and conclusions

The outcomes of each break-out session will be reported back and discussed in a plenary session at the end of the day. Through a panel discussion, four rapporteurs will highlight the outcomes of the break-out sessions. Panelists will be invited to reflect on the outcomes and draw conclusions for the way forward. All participants will be encouraged to actively participate in the discussion.