Report on the
UNGASS Declaration of Commitment
on HIV and AIDS

Ireland 2009
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HIV and AIDS in Ireland

The epidemiological development of HIV and AIDS is similar to that experienced in other Western European countries. The condition was originally viewed as an imported virus but this view changed in 1985 when it became clear that the HIV virus had become endemic in Ireland and that Ireland had become part of the ‘global crisis’. It also became clear that a particular problem existed in relation to the spread of infection amongst intravenous drug users, men who had sex with men and through infected blood products.

In response to this, an Irish National AIDS Strategy Committee (NASC) was established in 1991. It published its first strategic report in 1992. NASC took a multi-disciplinary approach, involving statutory and non-statutory organisations and people who were living with HIV and AIDS.

In 2000 “AIDS Strategy 2000” was published as a follow up to the first report and this is the policy from which we still operate. This policy is comprehensive in its approach incorporating a range of interventions covering prevention, treatment and care strategies. In Ireland there are extremely dedicated consultants, non consultant hospital doctors, nurses, counsellors, health advisers, social workers, pharmacists and all the other staff who form cohesive multi-disciplinary teams, working with those who are HIV positive or at risk of testing positive. HIV treatment and prevention services are provided by both NGOs and statutory agencies. Dedicated prevention strategies with both universal and targeted approaches are core to the response to HIV.

HIV Infections

The Health Protection Surveillance Centre (HPSC) is Ireland’s specialist agency for the surveillance of communicable diseases. Case Based Reporting of HIV was introduced in July 2001, which allows for the linkage of HIV cases with AIDS cases. A total of 405 newly diagnosed HIV infections were reported to the HPSC during 2008. This compares to 391 diagnosed during 2007 and represents a 4% increase. During quarters 1 and 2 of 2009, there were 210
newly diagnosed HIV infections reported to the HPSC and this brings the cumulative number of HIV infections reported up to the end of June 2009 to 5,453.

Newly diagnosed HIV infection rates per 100,000 population were at their highest in 2003 at 10.03 per 100,000 population (Figure 1). In 2008 there was an estimated rate of 9.55 newly diagnosed HIV infections per 100,000 population.

*Figure 1: New HIV infections in Ireland per 100,000 population 1993 – 2008 (source WHO European health for all database & HPSC).*

Since 1999, there has been a general upward trend in the number of HIV infections being reported.

In 2008, 330 of the 405 new cases included information on the probable route of transmission. Of these 185 were acquired heterosexually; 36 were among Injecting Drug Users (IDUs); 102 were among men who have sex with men (MSM) and there were 7 Mother to Child infections; 2 of which had been born in Ireland and the remaining 5 were older children born elsewhere.
There has been a notable reversal in the rate of infections among MSM which has risen to 102 in 2008 compared to a low of 46 in 2002. Heterosexual transmission remains high at just under 50% of all cases.

In 2008, 127 (39.2%) of the 324 cases where geographic origin was known, were born in Ireland; 125 (38.5%) were born in sub-Saharan Africa, 56 (17.3%) were from other European countries with the remaining 16 (4.9%) coming from the rest of the world.

During the first half of 2009, of the 210 new cases reported to the HPSC, geographic origin was provided in 171 cases. Of these 81 (47.4%) were born in Ireland and 50 (29.2%) were born in sub-Saharan Africa with the remaining 40 (23.4%) being born elsewhere.

**Antenatal HIV testing**

Routine antenatal testing has been routinely available in the majority of maternity hospitals since 1999. Antenatal HIV testing is effective in identifying women who are HIV positive at an early stage in pregnancy which allows for treatment to reduce the perinatal transmission rate. In 2008, of 62,242 pregnant women who were offered the test, the uptake was 99.9%. Among these there was a prevalence of infection of 2 cases per 1,000 tests (n=122).

**AIDS cases**

A cumulative total of 1,015 cases of AIDS were diagnosed in Ireland for all years up to the end of June 2009. Up to the end of 2008 411 deaths from AIDS have been reported. The number of AIDS diagnoses made each year has remained at a fairly consistent level in recent years with the number of deaths from AIDS remaining low.

**Treatment**

Over €7m additional annual funding has been provided to the health services since 1997 to address the treatment of HIV and AIDS and other STIs. This has
resulted in a substantial increase in the facilities in place including an increase in the numbers of Genito Urinary Medicine (GUM) and infectious diseases consultants who are the key service providers for HIV in Ireland. There are currently ten consultants based in Dublin, located in St. James’s, The Mater, Beaumont, Temple Street Children's Hospital and Our Lady’s Hospital for Children, and one each in Cork and Galway University Hospitals. Irish policy is that appropriate treatment is made available free of charge to all who test positive for HIV.

Prevention

HIV is preventable and tackling the problem requires a multi-sectoral approach involving statutory and voluntary agencies as well as people living with HIV. This approach has been promoted in Ireland through the National AIDS Strategy Committee, currently chaired by Áine Brady T. D., Minister of State at the Department of Health and Children and its sub committees on Education and Prevention, Surveillance and Care and Management.

In taking a life cycle approach to the prevention of HIV and AIDS, significant statutory investment is made in ensuring that all children and young people have the knowledge, attitudes and skills required to negotiate safer sexual practices. To this end the implementation of Relationships and Sexuality Education in schools as part of the national curriculum is a basic component of the prevention strategy. The health and education sectors work in partnership to support schools in the delivery of this curriculum in a manner that aims to meet the needs of young people. A number of NGOs also play a role in supporting schools. Similar educative processes are supported in the youth sector. Some of these initiatives include outreach services and more specifically designed programmes for young people at risk.

Ongoing investment is also made by the health sector in delivering safer sex messages to the broader youth population through direct advertising and marketing campaigns in places of entertainment etc. These campaigns have become a key part of the sexual health promotion infrastructure in Ireland and
over the past 15 years have continued to reinforce the core message of condom use and early testing.

To improve the planning and development of prevention work, the Irish Survey of Sexual Knowledge, Attitudes and Behaviour was undertaken in 2005.

A network of voluntary organisations provides services to people living with HIV and AIDS as well as delivering primary prevention campaigns. These are funded both by fund-raising and directly through the health services with a view to developing and delivering expanded prevention programmes for vulnerable groups such as men who have sex with men, sex workers, drug users and migrant populations who come from high endemic areas for HIV.

Voluntary organisations and NGOs address the many different aspects of HIV and AIDS. Many dedicated HIV and AIDS organisations provide support to one or more targeted sub-groups of people at risk of becoming infected with or living with HIV and AIDS. Most of these organisations depend largely on part-time volunteers to deliver their services. The services that they provide include primary and secondary prevention programmes, campaigns promoting safer sex practices, provision of condoms, needle exchange programs, the provision of meals and complementary therapies to people with HIV as well as emotional and practical support to people affected by HIV and AIDS. Other organisations, such as LGBT support lines, also provide primary prevention information in the form of safer sex advice as a part of their services, while others provide HIV prevention as part of a wider sexual health agenda, including sex education programmes in schools including peer-led education.

The participation of voluntary organisations in the prevention of HIV achieves a greater flexibility than statutory organisations alone provide. Involving people living with HIV in the design and evaluation of prevention strategies results in more effective campaigns as they are more focused and likely to reach their target audiences. The members of the Education and Prevention sub-committee of NASC published the Education and Prevention plan for 2008-2012 in 2008.
Stamp Out Stigma Campaign

The ‘Stamp Out Stigma’ campaign, which was launched on World AIDS Day 2006 by the Taoiseach, Bertie Ahern, T.D., aimed to tackle HIV related stigma and discrimination and promote a greater understanding of HIV in Ireland. A multi-stakeholder forum has been established to deliver on this campaign. This is a unique consortium of partners representing domestic and international civil society organisations working on HIV and AIDS, the Department of Health and Children, Irish Aid and HIV positive people. While focused nationally, the campaign has sought to link global and local experiences of stigma and discrimination through the active engagement of international partners and shared experiences of HIV-related stigma across a range of cultures. The campaign aims to tackle the stigma associated with HIV and challenges both direct and indirect discrimination experienced by people living with HIV in Ireland, while informing learning from experiences in developing countries. It is essentially a public awareness campaign specifically targeted at improving the understanding of HIV and the issues that HIV positive people have to deal with. It is also aimed at reducing the discrimination of HIV positive people in working environments, in promoting safer environments for people to disclose their status and access necessary services. The initial campaign culminated with the launch of national television and newspaper advertisements on the eve of World AIDS Day 2007 and the release of initial research findings on experiences of HIV-related discrimination in Ireland. Three separate surveys were carried out on: attitudes of the general public to PLHIV; attitudes in the workplace with a specific focus on: secondary schools, small businesses, trade unions, GPs and dentists; and a self-completion survey of PLHIV. These research findings point to the need for continued efforts to tackle the stigma and discrimination faced by people living with HIV and a full report was published in November, 2008.
Ireland’s Role in the Global Response to the HIV and AIDS pandemic

HIV and AIDS is a key priority of the Government of Ireland, as endorsed in the White Paper on Irish Aid (2006). Ireland’s commitment to addressing HIV and AIDS is demonstrated at the highest political levels through the sustained leadership of the Taoiseach (Prime Minister), the Minister of Foreign Affairs and the Minister of State responsible for Overseas Development.

Ireland’s response to HIV and AIDS through the Government’s official aid programme, Irish Aid, has been guided by its HIV and AIDS Strategy ‘A HIV/AIDS Strategy for the Ireland Aid Programme’ linking poverty and vulnerability to HIV and AIDS. The rapidly changing context of HIV and AIDS globally both in terms of the epidemic itself and the knowledge on the effective tools available to fight it and its drivers has required Irish Aid to update this strategy. The revised strategy ‘Tackling HIV and AIDS to reduce poverty and vulnerability – HIV and AIDS Policy and Strategy’ will be completed later in 2010.

At the 2005 UN Summit the Taoiseach stated that Ireland would double its spending on the fight against HIV and AIDS and other communicable diseases to €100 million annually, and put the battle against HIV and AIDS at the very centre of our programme. These additional resources include a stated commitment for 20% of the increased resources to be allocated to interventions that will benefit children affected by HIV and AIDS and other communicable diseases. To guide this initiative the document ‘Irish Aid, Guidelines on Children Affected by HIV and AIDS’ was finalised in March 2008.

Despite the current global economic and financial crisis, Ireland has continued to honour the commitment and total expenditure on HIV/AIDS and other communicable diseases was €114 million in 2009.
Irish Aid’s focus of support is on strengthening country responses to HIV and AIDS. The approach adopted has been to work with a range of partners and support interventions at global, regional, national and sub-national levels.

Representing about 16% of total overseas development assistance, funds for HIV/AIDS and other communicable diseases are allocated through an earmarked central HIV and AIDS Fund, the budgets of Irish Aid’s bilateral aid programmes in priority countries, and civil society and multilateral budgets. Funds are channelled through a range of organisations working at global, regional, country and community levels.

Ireland’s support to, and engagement with, both global and multilateral HIV and AIDS initiatives forms a critical component of its overall HIV response. It has enabled Ireland to play an important role in their evolution and influence their strategic direction while advancing its own policy goals. Critical among these is ensuring that global and multilateral initiatives adhere to the principles of the Paris Declaration on Aid Effectiveness and the Accra Agenda for Action and align their support to country priorities, plans and procedures.

Global and multilateral HIV initiatives receive a significant proportion of Irish Aid funding with the Global Fund, the Clinton Health Access Initiative and UNAIDS being key partners. The Global Fund is the single biggest recipient of Irish Aid’s HIV and communicable diseases funding. Ireland works with UNAIDS at global, regional and country levels and supports its efforts to bring greater coherence to national HIV responses through support of the ‘Three Ones’ principles.

Irish Aid’s partnership with the Clinton Foundation HIV/AIDS Initiative has enabled it to scale up funding for specific country responses in Mozambique and Lesotho. For example, the number of HIV positive mothers who received prevention of mother-to-child infection increased nearly a hundred fold in Mozambique between 2003 and 2009, and national coverage of HIV counselling and testing increased from less than 10% in 2007 to almost two thirds of the population of Lesotho in 2009.
In recognition of the need for increased investment to accelerate the research and development of new prevention technologies Irish Aid is funding both the International AIDS Vaccine Initiative and the International Partnership for Microbicides to advance research into these much-needed preventive technologies.


1) the new HIV and AIDS Strategy ‘Tackling HIV and AIDS to reduce poverty and vulnerability - HIV and AIDS Policy and Strategy’ be completed and adopted as soon as is practicable;

2) Irish Aid continue to develop performance measurement frameworks further with special reference to core policy objectives of Irish Aid;

3) Irish Aid examine how its financial management information system can better, and more efficiently, track its HIV and AIDS funding;

4) Irish Aid should increase its efforts to promote aid effectiveness with its global and national partners and ensure that the new HIV and AIDS policy and strategy has a strong focus in this area; and

5) Irish Aid should continue to exert influence to help ensure that Global Fund and other programme activities are harmonised and aligned with existing planning and management systems at country level. Irish Aid’s Management Response welcomes all these recommendations.

**Regional Response**

Ireland’s regional response to HIV and AIDS aims to provide regional added value by addressing common priorities at a regional level that maximises the effective use of resources, facilitates horizontal learning and ensures the dissemination of lessons learned, best practice and information within and across countries. Primarily focused on Southern and Eastern Africa, progress in Irish Aid’s regional response has been most significant in the last four years.
with partnerships developed with key inter-governmental bodies such as the Southern African Development Community (SADC) and the East African Community (EAC), regional NGO networks and other donors.

In recognition of the fastest growing HIV and AIDS epidemic in Eastern Europe and the Commonwealth of Independent States, and in response to the Dublin Declaration on HIV and AIDS (2004), Irish Aid entered into partnership with UNICEF to address HIV and AIDS prevention and care in the region. Covering six countries, this programme has developed targeted interventions for most at risk adolescents. In Vietnam Irish Aid is contributing to developing local research capacity on virus control including HIV.

**Country response**

Through its work in developing countries, Irish Aid aims to strengthen government capacity to respond to HIV and AIDS and to support sub-national and NGO responses at district and community levels. Strategic partnerships with governments, development partners and implementing organisations have been developed in support of interventions shown to be effective in having an impact on the progress of the pandemic.

Support is informed by and aligned with national strategic plans to address HIV, and national poverty reduction strategies. Embassies and offices are providing support for HIV service delivery and associated activities, and for mainstreaming HIV within country programmes and within the programmes of government and NGO partners. A strong emphasis on coordination, harmonisation and alignment of efforts with recipient country-led priorities and programmes is core to all Irish efforts. Irish Aid has demonstrated a clear commitment to harmonisation adhering to and supporting the implementation of the Three Ones. A strong national AIDS authority is critical to a well coordinated and effective country response as is a clear HIV strategy and monitoring framework.

Ireland’s increasing engagement in upstream aid modalities - sector wide approaches (SWAPs) and budget support - has enabled Ireland to take on a
strong advocacy role and engage in high-level policy dialogue on HIV and AIDS. Recent emphasis on strengthening inter-sectoral programming is offering opportunities to strengthen sectoral responses to HIV and AIDS; and an increasing focus on addressing vulnerability is providing opportunities for Irish Aid to build on its HIV and AIDS programming as an entry point in tackling extremes of vulnerability.

Supporting the work of Civil Society Organisations

Irish Aid provides significant funding to civil society organisations, including faith based organisations, in recognition of their critical role in the global response to HIV and AIDS. Informed by a strong commitment to partnership, support is provided for organisational capacity building, HIV service delivery and advocacy at all levels of Irish Aid’s response. All organisations applying for funding to Irish Aid’s Multi-Annual Partnership Scheme (MAPS) are required to demonstrate how they prioritise HIV and AIDS in their overall programmes and HIV and AIDS is one of four thematic priorities in the Civil Society Fund (CSF).

Regionally, and through Irish Aid country programmes support is provided to national NGOs and NGO networks for policy development, advocacy, information and communication, organisational capacity building and HIV service delivery. Irish Aid also promotes the inclusion of civil society in global and national level policy forum and programme design and implementation. In particular, promoting the rights of people living with HIV and AIDS is core to Irish Aid’s programme response. Support has focused on building the capacity of networks of people living with HIV and AIDS at all levels, as well as ensuring that people living with HIV and AIDS are represented in policy dialogue, programme development and implementation.

International Development NGOs based in Ireland are organised under an umbrella body - Dóchas. Irish Aid and the Dóchas HIV and AIDS working group work together in developing and representing national positions at international fora and provide a platform for learning from experience.
Presenting this work and experience forms a key part of annual World AIDS Day events.

**Mainstreaming**

Mainstreaming HIV and AIDS is central to Irish Aid’s approach to poverty reduction. Through mainstreaming, Irish Aid aims to have a greater impact on poverty reduction and improve the effectiveness and quality of its development approach.

Considerable investment and progress has been made in mainstreaming HIV and AIDS over the past three years. In addition to defining policy commitments, Irish Aid has invested in capacity development and training of its staff in both internal (such as Work Place Policies) and external mainstreaming. Increased attention to HIV and AIDS is evident in new country strategies and related programmes. Guidelines and policy products with increased attention to mainstreaming HIV and AIDS provide frameworks for country planning and implementation.

A number of programme countries are advancing mainstreaming in their development programmes. Of particular note is progress in mainstreaming HIV and AIDS in the health and education sectors. The health and education sector responses to HIV and AIDS have been, and will continue to be, key priorities for Irish Aid.

Integrating HIV awareness in education is a key priority for Irish Aid. In its support to education, Irish Aid focuses on building national education systems and ensuring equitable access to quality education. Irish Aid’s focus is on strengthening institutional capacities to ensure that education plans are gender responsive and address HIV and AIDS, while prioritising access and retention for the girl child and children who have been orphaned by AIDS.

**Hunger and HIV**

Despite great advances in addressing the HIV and AIDS pandemic, Ireland recognises that new infection rates and progression from infection to full
blown AIDS and mortality in developing countries remain unacceptably high. A major contributing factor is that over one billion people live with hunger and that the HIV and AIDS pandemic overlaps to a large degree with populations already experiencing low diet in terms of quality and quantity.

It is clear that poor nutrition remains a major contributor to infection, sickness and death from the HIV virus. Domestic food insecurity is clearly a driver of the pandemic as a lack of food often triggers dangerous coping strategies such as selling sex for food. The direct effects of poor nutrition on HIV status are also clear: malnourishment weakens the immune system thus increasing likelihood of infection, by both sexual and mother-to-child transmission. Once infected, progression to AIDS is accelerated by malnutrition. People with AIDS are less able to absorb nutrients and undernutrition affects the ability of HIV-infected people to process antiretrovirals.

Combating global hunger and HIV and AIDS and other infectious diseases are two of the eight UN MDGs. Ireland recognises that the complex interaction between food insecurity, nutritional deficiencies, immunosuppression and HIV seriously threatens the achievement of these goals. We are currently designing ways to integrate Irish Aid’s response to HIV and AIDS and our activities directly and indirectly related to hunger reduction, food security and fighting under-nutrition. We are appraising all of our Irish Aid supported programmes and projects through a ‘hunger lens’ and will ensure that our hunger reduction actions, and particularly targeted nutritional interventions, are well coordinated with other key programme priorities including the fight against HIV and AIDS.

**Priorities for reaching Universal Access to Comprehensive HIV prevention, treatment, care and support**

Over the course of the next two years Ireland will seek to:

- Support policy interventions address the social, economic and political factors that drive the epidemic.
• Support country level responses to HIV and AIDS through increased focus on prevention interventions that are based on local and regional evidence.

• Advocate against stigma and discrimination and prioritise the rights of people living with HIV and AIDS - their right to participation in national development processes, to universal access to HIV and other services, to protective legislation, and to non-discrimination in the labour market.

• Continue to promote a broad based development response to HIV and AIDS.

• Support efforts that look at Irish Aid supported HIV and AIDS programmes through a ‘hunger lens’.

• Advocate for the recognition in national strategies that gender inequality and the subordination of women are drivers of the HIV epidemic and that redressing these requires the active involvement of both men and women.

• Place particular emphasis on the importance of ensuring that national, regional and global level engagement is consistent, harmonised and aligned with country level priorities, planning and budgeting cycles, and systems.

• Advocate at the board level of global health and HIV partnerships for implementation at country level of commitments to the Paris principles on aid effectiveness and the Accra Agenda for Action.

• Continue to mainstream its HIV response at country level by supporting national, sectoral and local development plans that are adequately informed by evidence of the links between poverty and HIV.

• Prioritise systems strengthening for the efficient, effective and sustainable delivery of HIV services, using support for HIV and AIDS as an entry point to address key systems issues and to strengthen the link
between HIV and other health services, in particular sexual and reproductive health and TB services to the poor and vulnerable.

- Strengthen Government-led coordination of technical assistance at country level to ensure maximal benefit of capacity building efforts in tandem with systems strengthening.
Glossary of Terms and Abbreviations

AIDS      Acquired Immune Deficiency Syndrome
ART       Anti-retroviral therapy
CSF       Civil Society Fund
Dóchas    Dóchas is the association of Irish Non-Governmental Development Organisations
EAC       East African Community
GUM       Genito Urinary Medicine
HC        Heterosexual Contact
HIV       Human Immunodeficiency Virus
HPSC      Health Protection Surveillance Centre
IDU       Injecting Drug User
LGBT      Lesbian, Gay, Bisexual and Transgender
MAPS      Multi-Annual Partnership Scheme
MCT       Mother to Child Transmission
MSM       Men who have sex with men
NASC      National Aids Strategy Committee
NGO Non-Governmental Organisation

PLHIV People living with HIV

SADC Southern African Development Community

SWAps Sector Wide Approaches

“Three Ones” The principles are: 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.

UNGASS United Nations General Assembly Special Session

UNICEF The United Nations Children's Fund