



# HIV/AIDS Prevention Guidance for Reproductive Health Professionals in Developing-Country Settings

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United Nations Population Fund



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The Population Council is an international, nonprofit, nongovernmental organization that seeks to improve the well-being and reproductive health of current and future generations around the world and to help achieve a humane, equitable, and sustainable balance between people and resources. The Council conducts biomedical, social science, and public health research and helps build research capacities in developing countries. Established in 1952, the Council is governed by an international board of trustees. Its New York headquarters supports a global network of regional and country offices.

The United Nations Population Fund (UNFPA) supports developing countries, at their request, to improve access to and the quality of reproductive health care, particularly family planning, safe motherhood, and prevention of sexually transmitted infections (STIs) including HIV/AIDS. Priorities include protecting young people, responding to emergencies, and ensuring an adequate supply of condoms and other essentials. The Fund also promotes women's rights, and supports data collection and analysis to help countries achieve sustainable development. About a quarter of all population assistance from donor nations to developing countries is channelled through UNFPA, which works with many government, NGO, and UN partners.

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# Introduction

After more than two decades of sustained and expanding HIV/AIDS interventions, it is clear that effective HIV services, programs, and policies for prevention, care, support, treatment, and impact alleviation require multi-sectoral responses from governments, international agencies, and international and national nongovernmental organizations (NGOs). However, organizations and institutions that provide reproductive health services—be they family planning services, antenatal/postpartum clinics, maternal/child health services, clinics for the treatment of sexually transmitted infections (STIs), or any number of integrated service delivery points—stand at the center of HIV/AIDS interventions. While these programs and services are usually geared toward their own particular goals—providing information about family planning options and technologies to meet the needs of individuals and couples, providing information about and appropriate treatment for STIs, providing information and care for pregnant and postpartum women, and providing services that meet the special needs of youth—it is appropriate and indeed imperative that they be aware of how their particular area of work intersects with the demands of effectively confronting HIV/AIDS at a national level.

It is now widely recognized and acknowledged that effective responses to HIV/AIDS must intervene along a continu-

um from prevention of new infections to providing treatment, care, and support for those infected, to mitigating the economic, social, and political impact of those affected by HIV/AIDS. The way in which any particular international agency responds is largely determined by its mandate and area of expertise. The Joint United Nations Programme on HIV/AIDS (UNAIDS) is supported by eight UN co-sponsoring organizations and a Secretariat.<sup>1</sup> As a UNAIDS co-sponsoring agency, UNFPA plays a central role in spearheading HIV/AIDS interventions as part of its overall stated goal of ensuring universal access to high-quality sexual and reproductive health services to couples and individuals by the year 2015. More specifically, UNFPA's recently published *Strategic Guidance on HIV Prevention* has emphasized three core areas: preventing HIV infection in young people, strengthening male and female condom programs, and preventing HIV infection in pregnant women.<sup>2</sup> UNFPA has further stated its commitment to promoting programming and policy activities within an overarching commitment to the goals outlined in the International Conference on Population and Development (ICPD) Programme of Action, as further elaborated at ICPD+5 (United Nations 1999, 1994).

While the integration of information, technologies, and services to respond to

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<sup>1</sup> These are the World Health Organization (WHO), the United Nations Population Fund (UNFPA), the United Nations Children's Fund (UNICEF), the United Nations Development Programme (UNDP), the United Nations Drug Control Program (UNDCP), the United Nations Educational, Scientific and Cultural Organization (UNESCO), the International Labour Organization (ILO), and the World Bank.

<sup>2</sup> The UNFPA Strategic Guidance can be accessed at [www.unfpa.org/aids/strategic/index.htm](http://www.unfpa.org/aids/strategic/index.htm).

HIV/AIDS may seem closely related, there are a variety of issues that continue to create obstacles to integration. Among these are the particularly stigmatizing nature of HIV infection and AIDS and discrimination faced by those who are infected or perceived to be infected; sexual practices and identities that remain socially unacceptable; gender roles and relations that make it difficult for women and men to access information, services, and technologies on HIV prevention; reluctance to recognize the special needs and vulnerabilities of young people; and the significant barriers to service delivery created by broader economic, social, cultural, and political factors. Of perhaps greatest concern to reproductive health service providers are the burdens associated with providing additional services and resources needed for facilities, technologies, treatment options, and comprehensive training.

This document is designed to provide an overview of the issues, challenges, and opportunities around integrating a broad range of

HIV/AIDS interventions into existing reproductive and sexual health programs and services, and to provide some practical examples of interventions that have been successful.

However, providing comprehensive programmatic or training-related guidelines is beyond its scope. Whenever possible, references are provided to additional sources of information for service providers and program designers.

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## Chapter 1

# Contextual Factors Related to Reproductive Health and HIV/AIDS

As the HIV/AIDS pandemic enters its third decade, the comparatively hopeful predictions made in the early 1990s that the worst epidemics had reached their plateau have since yielded to the sobering reality that, indeed, the pandemic continues apace—in some cases at alarming rates. Not only is this true in the case of relatively new epicenters such as Eastern Europe and Russia, but it is also true in Africa—a continent that undoubtedly has borne the heaviest burdens of HIV/AIDS since the disease was first identified in the early 1980s. An estimated 5 million people throughout the world became infected in 2001—800,000 of them children (UNAIDS 2002). In the words of Peter Piot, the executive director of UNAIDS, HIV/AIDS is simply “the worst epidemic in human history.” While UNAIDS estimates that 40 million people currently live with HIV/AIDS, the number of deaths by the year 2010 is likely to surpass 65 million (UNAIDS 2002). As has been the case since

demographic, yet only one-third of that commitment has been met so far (Piot 2002).

Understanding the enormity of the global pandemic of HIV/AIDS is only a first step in mounting an effective set of responses. In reality, the “pandemic” actually comprises a variety of concurrent yet highly varied regional epidemics, each with its own qualities and characteristics. Although more than 70 percent of all infections worldwide occur as a result of heterosexual contact, a variety of other economic, social, and political realities in different parts of the globe determine the extent and severity of regional epidemics. These include demographic factors (such as the age of a population), economic pressures associated with “globalization,” migration patterns, patterns of sexual behavior and drug use, and gender roles and relations. The depth and severity of regional epidemics are also associated with poverty, lack of resources, intractable conflicts, and human rights violations.

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