

## Summary Report - 9<sup>th</sup> ICAAP Symposium 11 August 2009, Bali, Indonesia

### Caring for children and families affected by HIV in concentrated and low-level epidemics: Government and community responses that are making a difference!

Nearly 300 delegates from different countries attended the symposium entitled, “Caring for children and families affected by HIV in concentrated and low-level epidemics: Government and community responses that are making a difference!” at the 9<sup>th</sup> International Congress on AIDS in Asia and the Pacific (ICAAP), held on 11<sup>th</sup> August 2009 in Bali, Indonesia. It was jointly organized by the United Nations Children’s Fund East Asia and Pacific Regional Office (UNICEF EAPRO), Family Health International (FHI), and the Joint UN Program on HIV & AIDS (UNAIDS).

There were five resource speakers: **Anupama Rao Singh**, Regional Director of UNICEF EAPRO; **Dr. Hao Yang**, Deputy Director-General of the Disease Control Bureau of China’s Ministry of Health; **Satish Raj Pandey**, FHI Deputy Director in Nepal; **Kimberly Green**, Senior Technical Advisor for HIV/AIDS Care and Support of FHI Asia-Pacific Regional Office; and **Mme Dame Carol Kidu**, Minister for Community Development of Papua New Guinea. Their presentation highlights are shown below:

#### Children and Women living with and affected by HIV & AIDS

- Asia-Pacific has 151,000 children aged 0-14 living with HIV. Approximately 90% of HIV infections among children are associated with mother-to-child transmission.
- With growing feminization of AIDS in the Asia-Pacific region, children continue to be at risk of infection, and more are facing the grim prospect of orphan-hood. In Asia, one-third of HIV infections are found in women, who were infected mainly by their partner. Although more women are receiving antiretroviral therapy (ART) for prevention of mother-to-child HIV transmission (PMTCT), coverage is still low especially for HIV-positive women receiving ART for their own health and survival.
- China had an estimated 700,000 people living with HIV (PLHIV) as of end October 2007. Up to 31 May 2009, there were 295,417 reported PLHIV cases, of which, 1.7% were children (0-14 years), with 1.1% infected through mother-to-child transmission.
- Nepal has an estimated total of 70,000 PLHIV, of whom 1,857 are children.
- Vietnam has a concentrated HIV epidemic and approximately 45% of PLHIV in care have children.
- In Papua New Guinea, an estimated 1,727 children were living with HIV and about 3,730 children were orphaned from AIDS-related causes in 2007. Owing to a range of factors, including poverty, about 30% of children are at risk of HIV infection. PNG is facing a critical child protection situation, with an estimated 75% of children and women experiencing violence in their home.

#### HIV & AIDS strategies

- In a study of 127 China CARES (China Comprehensive AIDS Response) program counties, it was found that 93% of 8,644 double orphans received educational assistance. Among the national responses to children affected by AIDS in China were the formation of a special committee on AIDS prevention and control, development of the National Strategic Plan and policies to support local implementation, and the forging of cooperation with international organizations such as UNICEF to support women and children.
- Universal Access for Children Affected by AIDS in Nepal (UCAAN) is a national partnership that focuses on achieving universal access to treatment, care and support for children affected by AIDS (CABA). Jointly launched in November 2007 by UNICEF, National Association of People Living with HIV/AIDS Nepal, FHI and USAID Nepal, UCAAN now has 38 partners including nine

core partners. It promotes community involvement for CABA's protection, care and support, and contributes to the development of guidelines and strategies for child-and family-centred programs. So far, 16 private sector agencies have pledged their support (in cash or kind).

- The Vietnamese Government and FHI together with PEPFAR/USAID have supported 18 Continuum of Care (CoC) sites. CoC adopts a 5-pronged approach to increase access by orphans and vulnerable children (OVC) to care using a family-centred care case management - with focus on minimizing stigma and integrating OVC and families in existing social welfare services: 1) active but discrete identification of OVC in need of care; 2) family case management – routine assessment and care; 3) enhanced package of services and family clinic; 4) partnership with local social welfare services; and 5) addressing barriers to services through work with local leaders to address problems and improve community acceptance.
- The Catholic Diocese of Kundiawa in Simbu Province in PNG implements an integrated protection, care and support model through an adaptable, community-based approach with strong participatory focus. It identifies children affected by HIV & AIDS and other vulnerable children and provides community-based outreach, monitoring and additional care and support where needed through trained child protection volunteers. Its care centre concept provides additional resources for communities and service access point for vulnerable children. It maintains comprehensive case data on each child's situation, needs and progress. Financial support in the amount of US\$7,000 for 50 children and US\$500 per centre per annum is provided.

### Challenges and Ways forward

- Asia-Pacific: Social protection measures for children and families, and combining prevention and protection measures to address multiple vulnerabilities faced by children living with or affected by HIV. National governments should improve surveillance and assessment to identify most at risk children and adolescents, improve operational linkages between health and social sector, and strengthen evidence on AIDS impact on children as well as put children on costed National Strategic Plan for protection, prevention, care and support.
- China: The income generating programmes are constrained by lack of funding and capacity to support all vulnerable children and their families, and by social discrimination and stigma. As ways forward, the government will develop a children welfare system, mobilize more resources for children and their families, and collect more data to develop innovative strategies for heightened local participation and high service quality provision.
- Vietnam: The Family Centred Care (FCC) needs strengthening of child communication and counselling, and rolling out of the National Plan of Action especially in institutionalizing FCC approaches within the government's social welfare system.
- Ensuring that most vulnerable children have greater access to education, immunization and other basic services. Need for continuing advocacy for access to basic services, to integrate VCT within the context of integrated approach including maternal and child health care.
- Institutional care should be avoided because it leads to long-lasting impairment of children. Long-term institutional care is extremely expensive.

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