The National AIDS Commission

One Response E-Bulletin



Vol. 2. Issue 2 21 Dec 2011

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In closing, we wish all a warm and joyful Christmas Holidays!

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Partners in Education Join the Response by Observing World AIDS Week in Schools Across Belize

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Many Schools welcomed relevant guest speakers from their communities and social partners to deliver presentations on the state of HIV, STIs, Teenage Pregnancies, the importance of sexual and reproductive health education and other components of comprehensive sex education. Students made presentations and skits depicting common perceptions and behaviours surrounding HIV in the school setting and wider society while also promoting greater respect and support for peers infected or affected by HIV/AIDs. School Managements recognize the unique challenges that their students face that increase their vulnerabilities to HIV, STIs, issues relating to gender inequality and oppressive environments. Recognizing the excellent opportunities that AIDS Awareness Week provides for SRH education, the NAC wishes to encourage social partners and other members of the HIV response towards continued and increased support to schools in their communities and beyond.





Kudos to the District Committees for Conducting a Series of Successful and Vibrant **2011** World AIDS Day Activities promoting HIV Testing and Education!









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Partners are encouraged to continue sharing the exciting news with our young people to ensure that their unique insights and perspectives are also reflected in this New Generation Leadership strategy being defined.

For further information, kindly visit: www.crowdoutaids.com

Social media are powerful platforms to engage young online users especially in issues that affect their daily lives. Another important online medium to note for regular updates on services and developments is the *National HIV Programme, Ministry of Health, Belize* fan page on Facebook. Everyone is encouraged to visit this online fan page and benefit from the useful updates.

2011 Year in Review: Accomplishments

The following are major accomplishments in the three areas of focus on that NSP which are Coordination, Prevention and Care and Treatment. These are excerpts of the presentation made by the Executive Director of the NAC's Secretariat at the World AIDS Day Press Conference.

COORDINATION

- The NAC Secretariat built the capacity of District Committees to increase collaboration and lead the response at the district level with the establishment of District Committees in every district.
- We welcomed new partner organizations into the response like Sazani Associates Belize which is part of an international initiative that works in England, Africa and now Belize, in creating employment opportunities, food security and sexual and reproductive health training for women and youth. Go Joven specializes in Sexual and Reproductive Health Training for young people and have already started master training of 16 Go Joven Fellows who will then be able to conduct SRH training of their own in youth groups, church groups, schools and in rural communities across the country.
- With the support of PASCA and UNDP we held two national training sessions on Monitoring and Evaluation for all key partners to increase our collective capacity and establish systems to better research, plan, monitor and evaluate the national response to HIV/AIDS.

- Partners such as PASMO, the CDC, the BDF and the MOH helped to provide valuable strategic information on condom use among female sex workers, men who have sex with men, knowledge attitudes and surveillance among the BDF, and a comprehensive Situation Analysis of our national response. The CDC is currently funding a Behaviour Surveillance Study which will also tell us for the first time a scientific estimation of the number of men who have sex with men and sex workers in Belize so that we can use those numbers to target our interventions and measure their success. This study more than any before will also inform us of the sub populations with largest incidence of HIV so that again we can target our future prevention initiatives more accurately.
- The country response was successful in procuring a 6 million US Dollar grant from the Global Fund to Fight AIDS Tuberculosis and Malaria. The grant will allow us to increase and expand our prevention, care and treatment, research initiatives over the next four years.
- The next major accomplishment in coordination of the national response this past year is the development of our new National Strategic Plan which is now complete in draft and ready for submission to Cabinet for endorsement. This document will ensure higher levels of coordination, efficiency and transparency in all that we do and sets the bar for more strategic steps toward the overarching goals of Zero New Infections, Zero Stigma and Discrimination and Zero AIDS-related deaths.

PREVENTION

- Our many partners who work in public education continued their outreach to youth, men
 who have sex with men and sex workers in targeted face to face interventions. The
 amount of these interventions was increased thanks to funding from our new Global Fund
 Grant. This behaviour change approach to prevention has a lot to do with the continued
 decrease in new infections being reported today.
- Through the Global Fund, the Ministry of Education and Youth has done an assessment of the teaching of the Health and Family Life Education Curriculum in primary schools across the country. This assessment paves the way for the strengthening of the curriculum which will now be rolled out in high schools. The Peace Corps has helped with specialized training and a manual for teachers to increase their capacity to deliver the HFLE curriculum where it is most needed.
- The Women's Department has contributed to the education of women about their rights and how the Gender Based Violence Legislation protects them from sexual behaviour. This ongoing educational and empowerment initiative plays an important role in the overall reduction of new infections. The department also started to work with men to help them see how they can play a key role in creating gender equality and reducing the risk of unwanted STI transmission to women.
- This year marks the formation of our first registered NGO made up of and working for Persons Living with HIV. We are all very proud of this milestone in our efforts to increase the meaningful participation of PWHIV in our national response. The network called, the Collaborative Network of Persons with HIV have procured funding for activities now being implemented. These include prevention education for those living with HIV, another key component of successful comprehensive prevention.
- The Ministry of Labour is currently training another set of 12 companies so that they are empowered to establish workplace HIV Policies and action plans to educate, protect and care for their employees. This will expand our prevention and behaviour change outreach to a significant component of one of our target populations. The Ministry also published the Belize Employer's Guide on HIV and AIDS in the Workplace.

CARE AND TREATMENT

- The MOH worked with PWHIV and the doctors on the front line as well as health policy
 experts to revise and upgrade our national guidelines for treating HIV/AIDS. These
 guidelines ensure the highest standard of ARV treatment, diagnostic testing and
 monitoring of positive clients which will now translate into longer and better quality lives
 for those living with HIV.
- The Capacity Project, our partners in the public health facilities have formally linked with Civil Society and other Government and Community stakeholders to form a Continuum of Care which is client centered and focused on ensuring the highest possible standard of care and treatment for PWHIV. Each district's NAC District Committee which includes adequate representation of the MOH now serves as the nexus of the CoC to respond to gaps identified in the delivery of services or quality of life of those we serve. Most of this year was spent developing, expanding and training these District Committees to serve as the guardians of the Continuum of Care.
- The government continues to ensure free Anti-Retroviral Therapies for all those deemed ready to start ARV drugs. The list of drugs available has been upgraded to include second line medication when clients become resistant to first line medications. The government, working with international partners, has also procured funding to expand the level of diagnostic testing to include Viral Load testing and drug resistance testing which will help to limit the levels of drug resistant strains of HIV in Belize while helping doctors to prescribe more accurate drug therapies. As the number of persons who are afforded these tests increases over the next few years we look forward to increasing numbers of PWHIV minimizing the negative impact of the virus on their bodies and quality of life.
- The National AIDS program conducted sensitization sessions with the new national network
 of HIV Positive individuals to make it easy for them to use the Ministry's complaint
 system. Any client now has easy access to redress if they feel that their patient rights
 have been infringed on or if they are dissatisfied with the quality of service being given to
 them.
- The Ministry of Labour led amendment of the Labour Act 13th April 2011 to introduce an
 expanded definition of unfair dismissal which now makes it illegal for an employer to
 dismiss an employee because they were the victim of sexual harassment at the
 workplace or because of their HIV status.

2011 Year in Review: Challenges

With all of these advancements, challenges faced include:

- While there are ample funds for programming for the next few years, we have seen several
 key partner agencies downsize because of lack of administrative funds. We must get
 other sectors, social and private partners to see themselves as stakeholders in the
 national response to HIV so that it becomes completely mainstreamed into their action
 plans and reduces the cost burden from a selected group of agencies, or government
 departments.
- We are still without all the proper strategic information about the size and risk level of behaviour in our sub populations. Without this specific profile of HIV in Belize we limit the potential impact of our prevention initiatives. Without this information we will have to continue using data from other countries to calculate our national prevalence which may never allow us to share the most accurate picture of HIV in Belize.
- Though we have a guaranteed supply of ARVs we need more advanced diagnostic and resistance testing made available across the board to inform the procurement of more optimized drugs with minimal toxicities, higher resistance thresholds, limited drug interactions and easier to use cocktails.
- Our larger barrier that limits the number of Belizeans who willingly take an HIV test or show up regularly for treatment once they know they are HIV positive is stigma and

- discrimination. We still don't have laws that protect the basic human rights of those infected with or vulnerable to HIV. Without such rights defense will limit the possible success of our prevention and treatment initiatives.
- Persons living with HIV do not have the same ease of access to care and treatment in every district due to limitations in the capacities of the public laboratories to provide necessary diagnostic testing in a speedy manner.
- We still must work harder to change negative cultural values such as those that encourage multiple sexual partners among young males while demonizing women with multiple sexual partners, those that encourage men to have sex without a condom because it "feels better" and most importantly those that promote an imbalance in equality between men and women and foster sexual violence against women, marital rape, unwanted unprotected sex, and the objectification of women as passive objects for male domination and sexual gratification.

2011 Year in Review: Next Steps

Looking back at 2011 Belize is improving its management of HIV/AIDS in a concerted manner that is producing specific measurable milestones. The work is not done however as our challenges prove, which is why we must look forward as strategically as possible to make sure we continue our current trend toward our overall goals. Our New Strategic Plan, which will guide the national response to HIV over the next five years, provides an overview of the key strategies and actions.

The mission of the new NSP is:

By the end of 2016, Belize will have continued to reduce the number of new HIV infections; extended the length and quality of life of people with HIV and their families; significantly reduced discrimination against persons vulnerable to HIV; and effectively coordinated a multi-sectoral response which is human rights based and gender responsive.

The Overall Goals Fall into Three Priority Areas:

- 1. Creating an Enabling Environment (anti stigma legislation, more administrative funding for NGOs in the response or for others to take up the NSP interventions, improved M&E systems and function)
- 2. Ending New Infections (adoption of personal protection plans by the general public, assessment of personal risk by vulnerable populations and the development of behaviour change via personal protection plans that respond to the complex array of predetermining factors, protection of victims of GVB from all STIs and pregnancy)
- 3. Improving Health and Well being (getting more positive persons on ART and adhering to their ART, more psychosocial support made available to PWHIV, more diagnostic testing to scale up effect of ART)

The Principal Strategies we plan to implement are:

Priority Area 1 Creating an Enabling Environment Principal Strategies

- Improve access to law and legal services
- Reduce and mitigate the impact of stigma and discrimination for those

affected by or vulnerable to HIV

- Reduce legal or policy barriers to equal opportunities and universal access
- Systematic mainstreaming of a high quality HIV response in sector plans to enhance a sustainable response
- Strengthen the HIV/AIDS surveillance, compilation and processing of data, disaggregated for sub-populations.
- Conducting further research in relation to the characteristics of the epidemic and the effectiveness of the response.

Priority Area 2 Ending new HIV infections Principal Strategies

- Design cutting-edge, evidence-informed interventions for sexual behaviour change, especially among identified vulnerable groups.
- Reduce barriers to wide-spread HIV-testing in key affected populations
- Establish systems to produce and sustain a national profile of transmission to guide prevention interventions
- Implement socialization programs that address the underlying causes of high risk cultural norms that increase HIV transmission such as those that facilitate Gender-based Violence

Priority Area 3
Improving Health and Wellbeing
Principal Strategies

- Improve national access to quality HIV treatment, care and support services.
- Improve overall parameters of clinical management of care and treatment services for HIV, other STIs and OIs (including TB) across the country.
- Implement treatment education initiatives for people with HIV and those most vulnerable to HIV infection.

The many activities that it will take to implement these strategies will be laid out in our National Operational Plan to be published along with the NSP in January of 2012. These publications will allow our entire national response to anchor their work plans over the next five years in one overarching national roadmap which should translate into enhanced impact of the national response.



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