

# Promoting Linkages Between Children's HIV Programming and Child Protection System Strengthening

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# First: review of evidence 2013

2013 IATT CABA review found:

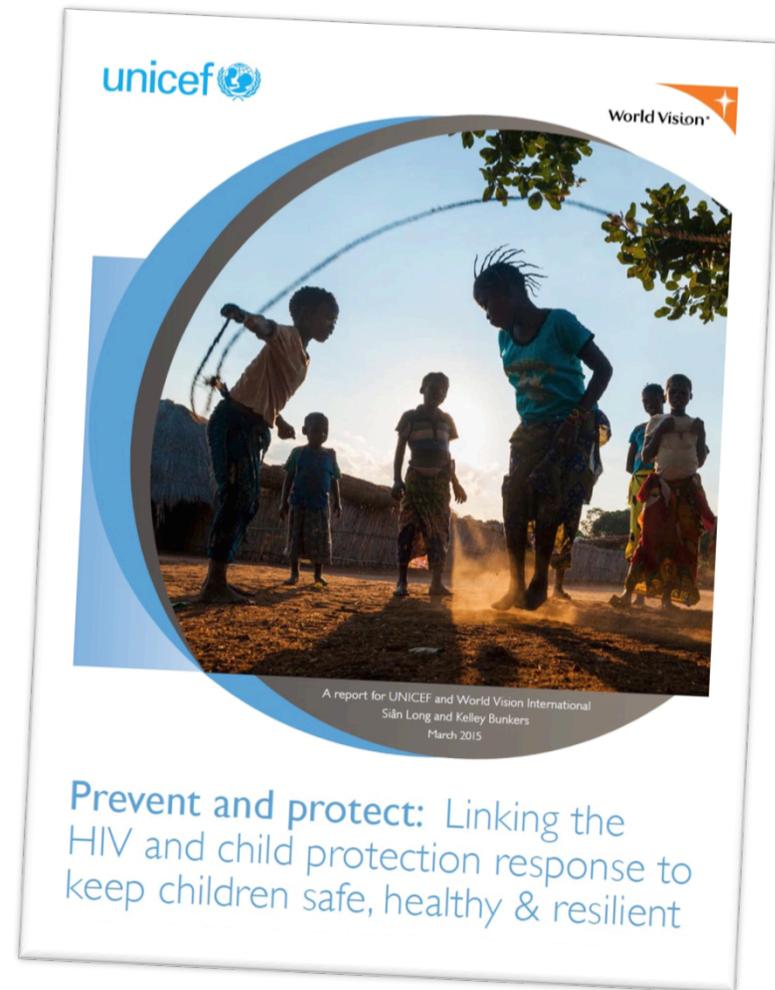
- Children living with and affected by HIV face specific risks of abuse, violence, exploitation and neglect
- Children experiencing violence, abuse, exploitation and neglect face increased HIV risks

Recommended CP and HIV actors must prevent, respond and support children facing these combined risks



# Promising practices study 2015

- Case studies in Nigeria, Zambia, Zimbabwe
- Documented approaches, interventions & tools that have effectively supported linkages between CP & HIV sectors
- Provide recommendations for more effective engagement across CP, HIV, and health sectors.
  - Policy makers & practitioners have inherent understanding of links BUT
  - Need action to translate into policies and practice



# Strengthening HIV & CP Linkages: A Checklist

unicef 

World Vision 

JULY 2016



CHECKLIST

**Protection and resilience:**  
A simple checklist for why, where and how,  
to coordinate HIV and child protection policy  
and programming

This short checklist has been developed in response to the call from practitioners in sub-Saharan Africa for some practical guidance on how to link HIV and child protection policy and programming.

- Draws on evidence and emerging practice.
- Presents practical options for HIV and child protection actors to build an integrated response.
- For use as a starting point for stimulating future action.
- Set of key questions to stimulate reflection on linkages
- Table outlining entry points, desired results and key actors

# HIV and CP Linkages: The Evidence

<b>Children Affected By HIV</b>	<b>Children Experiencing Violence, Abuse, Exploitation, and Neglect</b>
<ul style="list-style-type: none"><li>• Face an increased risk of physical and emotional abuse, material and educational neglect, and child labour</li><li>• Have higher rates of transactional sex or increased (unsafe) sexual activity and/or sexual abuse</li><li>• As orphans, have two times the likelihood of having HIV than their non-orphaned peers</li><li>• Children living with HIV have improved treatment outcomes when their psychosocial needs are met</li></ul>	<ul style="list-style-type: none"><li>• Face increased risk of HIV infection later in life</li><li>• Childhood sexual abuse is linked to higher rates of sexual exploitation, earlier initiation into injecting drug use, sex work and living on the streets</li><li>• Children living in extended family care or institutional care disproportionately experience discrimination, neglect, exploitation and abuse</li></ul>

# Policies and Strategies

<b>HIV Policy Makers/Managers</b>	<b>Social Welfare and Child Protection Policy Makers/Managers</b>
<ul style="list-style-type: none"><li>• Involve child protection experts in HIV prevention, treatment, and care and support working groups</li><li>• Ensure HIV policies support child protection outcomes</li></ul>	<ul style="list-style-type: none"><li>• Involve HIV experts in child protection and social welfare working groups</li><li>• Ensure CP policies address the influence of HIV on neglect, abuse, violence and exploitation outcomes</li></ul>

# Workplans, Budgets, and the Workforce

<b>HIV Sector Service Delivery Managers</b>	<b>Social Welfare and Child Protection Service Delivery Managers</b>
<ul style="list-style-type: none"><li>• Ensure strategies, plans and budgets promote identification and referral for child protection issues</li><li>• Use case management protocols that promote links to social welfare, child protection, and education</li><li>• Enable HIV counsellors and primary care workers to explore issues of abuse and violence in relation to HIV risk, identify signs of abuse or neglect, and refer appropriately</li></ul>	<ul style="list-style-type: none"><li>• Ensure strategies, plans and budgets promote identification and referral for HIV issues</li><li>• Use case management protocols that promote links to HIV and health sector services</li><li>• Receive HIV training, and explore issues of HIV-related stigma and HIV risk</li></ul>

# Service Delivery

<b>HIV Service Providers</b>	<b>Social Welfare and Child Protection Service Providers</b>
<ul style="list-style-type: none"><li>• Have received basic child protection training</li><li>• Have protocols that include consideration of protection factors and referrals to and from child protection services</li><li>• Ensure services targeting key populations are child-sensitive</li><li>• Meet regularly with local child protection providers</li></ul>	<ul style="list-style-type: none"><li>• Have received basic HIV awareness training</li><li>• Have case management assessment protocols that include HIV-related factors and support referrals to HIV prevention, treatment and support services</li><li>• Meet regularly with local HIV prevention and treatment providers</li></ul>

# Community Mobilization and Advocacy

<b>Community Based HIV Services and PLHIV Networks</b>	<b>Community Based Child Protection Services and Campaigns</b>
<ul style="list-style-type: none"><li>• Have received basic child protection training, including issues related to sexual abuse and violence</li><li>• Know where children and young people in need of CP services can go for support</li><li>• Involve children and adolescents living with HIV</li><li>• Involve children, parents and caregivers from key populations</li><li>• Aware of the effects of neglect, abuse, violence or exploitation</li><li>• Measuring child-specific experiences of stigma</li></ul>	<ul style="list-style-type: none"><li>• Have received basic HIV awareness training and address issues of sexual abuse and violence</li><li>• Know where children or young people can go for HIV testing and counselling or treatment</li><li>• Involve children and adolescents living with HIV</li><li>• Aware of the effects of neglect, abuse, violence or exploitation</li><li>• Promotes adult-child communication, family resilience and strong social networks, and positive parenting</li></ul>

# Monitoring and Evaluation

<b>National HIV M&amp;E Systems</b>	<b>National Social Welfare and Child Protection M&amp;E Systems</b>
<ul style="list-style-type: none"><li>• Consider evidence related to child protection in terms of HIV outcomes</li><li>• Measure key protection-related outcomes e.g., reduction in coerced sex for adolescents</li></ul>	<ul style="list-style-type: none"><li>• Consider evidence related to HIV in terms of preventing and responding to violence, abuse, neglect, and exploitation</li><li>• Measure key HIV-related outcomes</li><li>• Track how HIV affects children living in alternative care settings, especially residential care</li></ul>

## And finally.....

- Practical linkages remain intuitive - practitioners are seeing links. The growing body of experience needs documentation and translation into policy
- Systems strengthening offers an approach to enhance sector coordination and integration
- Interventions that focus on building up individual, family and community resilience can interrupt cycles of escalating risk and harm
- The biggest impact on reducing risky sexual practices amongst adolescent girls in heavily HIV-impacted countries is a combination of economic support and social welfare support



**“We can only achieve an AIDS-free generation by addressing the social and economic factors that continue to fuel and impact the HIV epidemic. Inequity, exclusion, poverty, violence, and stigma continue to increase risk, decrease resilience, and compound the impact of the epidemic.”**

Global Partners Forum, July 2014. *Protection, Care and Support for an AIDS-Free Generation: A call to action for all children.*

# Thank you!



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