



## FOCUS ON HIV/AIDS II/2007

Dear colleagues,

This is FOCUS ON HIV/AIDS, the former "SDC's HIV/AIDS newsletter". The electronic medium lives through interaction. You are invited to send us your suggestions, requests and information flashes. Please mail to: [claudia.kessler@unibas.ch](mailto:claudia.kessler@unibas.ch) or [helen.prytherch@unibas.ch](mailto:helen.prytherch@unibas.ch) who have developed this issue in collaboration with Sandra Bernasconi, from SDC SoDev /health desk [sandra.bernasconi@deza.admin.ch](mailto:sandra.bernasconi@deza.admin.ch) The editors are grateful for any contribution received!

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## SDC internal

- **SDC SOSA HIV/AIDS Community of Practice Evaluation Findings**

The East and Southern Africa Division of SDC established a Community of Practice (CoP) for those involved in the HIV/AIDS response in 2001. It is an informal network put in place to foster exchange and continuous learning about how to respond to the pandemic. Main instruments include moderated e-discussions - with country focused inputs led by staff in Coofs and thematic inputs led by moderators. The CoP also serves as a platform for general advice seeking, information sharing and circulation of documents. An extensive evaluation of the CoP has now been undertaken. The findings indicate that although there are areas in need of improvement, overall people very much appreciate the CoP. The satisfaction relates to the CoP's continued existence, the quality and intensity of exchange and the professionalism of the moderators. Many respondents provided concrete examples where they received information or support from the CoP that helped them to move things forward. The CoP has furthermore been found to have a motivational effect for members. It is valued positively as a practical learning space where workable interventions are shared. In addition the access that the CoP provides to summaries of international debates and conferences is a service to which high importance is attached given the pressures on everyone's time and the amount of literature currently being generated about HIV/AIDS. For a copy of the evaluation or to be taken up in the CoP mailing list please contact [sandra.bernasconi@deza.admin.ch](mailto:sandra.bernasconi@deza.admin.ch)

- **Atelier sur le "mainstreaming" dans la Région des Grands Lacs**

Au mois de mai 2007, un atelier de trois jours a été organisé à Kibuye au Rwanda, par les bureaux de coordination (BuCo) de Kigali et Bujumbura, avec l'appui de la SOSA et de l'Institut Tropical Suisses. 24 participants venant de la région des Grands Lacs (des programmes de la coopération au développement et de l'aide humanitaire) et constituant un groupe hétérogène ont répondu à l'invitation.

L'objectif de l'atelier était de fournir aux participants les connaissances et les outils nécessaires pour une intégration effective de la lutte contre le VIH/SIDA ("*mainstreaming*") dans les programmes appuyés par la DDC et dans les BuCos. Plus précisément, l'atelier portait sur la sensibilisation, l'information et la formation des participants et participantes sur les concepts et approches de l'intégration du VIH/SIDA et leur mise en lien avec les activités sur le terrain.

La première journée portait sur la formation sur le "*mainstreaming*" VIH/SIDA, son concept et sa mise en oeuvre dans une approche multisectorielle. La deuxième journée était consacrée à la réalité sur le terrain, avec la visite de deux groupes d'entraide de personnes vivant avec le VIH/SIDA. Ces visites ont permis de faire le lien avec les deux thèmes de discussions proposés ensuite : la féminisation de l'épidémie, principale conséquence des inégalités entre femmes et hommes et de la discrimination des femmes ; et les effets importants qu'ont les interventions spécifiques de lutte contre le VIH/SIDA sur le système et les programmes de santé.

La troisième journée a été focalisée sur la mise en action, où chaque participant a pu se situer dans son travail par rapport à l'intégration de la lutte contre le VIH/SIDA et définir ensuite en groupe les possibilités d'amélioration.

Cet atelier a été évalué très positivement par les participants qui ont exprimé leur souhait de continuer l'échange des expériences en réseau et le besoin de soutien continu. Un CD-Rom avec les présentations, documents et informations sur l'atelier existe et peut être commandé auprès de [sandra.bernasconi@deza.admin.ch](mailto:sandra.bernasconi@deza.admin.ch)

- **SDC set to launch new HIV/AIDS Strategy**

The current SDC AIDS policy (2002-2007) that has guided the many activities of SDC and its partners since 2002 is approaching the end of the intended five year timeframe. The updated AIDS policy shall receive the status of an SDC strategy, give guidance for SDC's HIV/AIDS response for the coming years and focus on "how to do it". A participatory approach has been ongoing this year with inputs from the members of the Community of Practice and from colleagues in the Headquarters. An SDC internal and external consultation, involving Swiss society organisations (aidsfocus), will take place before the end of this year.

## Switzerland

- **Aidsfocus Annual Meeting: "The Future is Grey. Elderly people in the HIV/AIDS Crisis: Victims and Part of the Solution"**

The aidsfocus.ch platform, supported by SDC, and run by Medicus Mundi Switzerland now has more than 30 Swiss organisations as active members. The platform offers a forum for Swiss players involved in HIV/AIDS in the context of international cooperation to exchange experiences so that they can act effectively to counter the pandemic and its impact and strengthen international solidarity. <http://www.aidsfocus.ch/>

This year's aidsfocus annual meeting in Bern drew participants attention to the ever growing proportions of elderly people around the world - in 2005 674 Million over 60 year olds – with 64% of them citizens of developing countries, the difficulties they face in view of the lack of social security systems and the vital role many of them are playing to care for those infected with HIV and the orphans who are left behind. The work of the "Kwa Wazee" project in Tanzania– was presented and discussions held on how best these hard-working grandparents – most commonly grandmothers – can be supported. It has been shown that the modest pension provided by „Kwa Wazee" makes a significant difference in the lives of the supported grandmothers as well as the children in their care. The approach has also been confirmed by recent studies, which conclude that the elderly are best supported by a regular cash input.

Further information about "Kwa Wazee" can be found at:

<http://www.aidsfocus.ch/organisations/Organisation.2006-06-29.1234/Project.2006-06-29.1604/view>

A photographic exhibition accompanied the meeting and can be viewed at:

[http://www.helpage.de/material/fotoaust\\_begleith.pdf](http://www.helpage.de/material/fotoaust_begleith.pdf)

- **AIDS HILFE SCHWEIZ marks World AIDS Day**

AIDSHILFE Schweiz is an umbrella organisation of the 21 cantonal und regional AIDS-support centres and further 31 organisations which are active in the area of HIV/AIDS. The Swiss World AIDS Day campaign was officially opened with a call for support from Bundespräsidentin Micheline Calmy-Rey, who reminds us all of the solidarity that the day demonstrates with all those affected with HIV/AIDS around the world. She continues to state that HIV/AIDS is one of the greatest challenges for the international community, and that Switzerland is firmly committed to providing development cooperation to combat HIV/AIDS, in line with the UN Millennium Development Goals.

Whereas the number of those affected in Switzerland is small compared with many developing and transition countries and the well functioning health system is able to provide medication to those in need, it is still difficult to be infected with HIV. Those affected are left alone by society. Even today people who are HIV positive can face many problems eg. at the work-

place. Only a society that expresses solidarity and looks to its weaker members is a strong society. Every single human being with HIV/AIDS needs our solidarity and concrete support – every day, not only on World AIDS Day.

For the full speech see: <http://www.aids.ch/d/index.php>

## International

- **UNAIDS 2007 AIDS epidemic update**

The latest estimates are based upon improved and expanded epidemiological data and analyses which now provide an enhanced understanding of the global epidemic. Advances have been made regarding the methodology used to generate prevalence estimates. Over 30 countries, mainly in Africa, now conduct nationally representative population-based household surveys rather than using specific groups – such as pregnant women – who form part of a sexually active age-group. This change in methodology explains the substantial revisions from previous estimates.

Global HIV incidence – the number of new HIV infections per year – is now estimated to have peaked in the late 1990s at over 3 million and for 2007 is estimated to be 2.5 million. The number of people dying from AIDS-related illnesses has declined in the last two years, due in part to the life prolonging effects of antiretroviral therapy.

The latest figures from UNAIDS show that the global HIV prevalence – the percentage of people living with HIV – has levelled off and that the number of new infections has fallen – in part as a result of the impact of HIV programmes. However, in 2007 33.2 million people were estimated to be living with HIV, 2.5 million became newly infected and 2.1 million people died of AIDS.

Of the new infections in 2007, an estimated 1.7 million occurred in sub-Saharan Africa – marking a significant reduction since 2001. However, the region remains the most severely affected. An estimated 22.5 million people living with HIV, 66% of the global total, are in sub-Saharan Africa. In 2007, almost 61% of adults living with HIV are women.

Since 2001, when the UN Declaration of Commitment on HIV/AIDS was signed, the number of people living with HIV in Eastern Europe and Central Asia has increased by more than 150% from 630,000 to 1.6 million in 2007. In Asia, the estimated number of people living with HIV in Vietnam has more than doubled between 2000 and 2005. Indonesia has the fastest growing epidemic.

However, whilst HIV prevalence is levelling and mortality declining globally, the world is still seeing 6,800 new HIV infections and over 5,700 deaths due to AIDS every single day. In addition, this global trend masks important regional variations.

To download the full update see: [http://www.unaids.org/en/HIV\\_data/2007EpiUpdate/default.asp](http://www.unaids.org/en/HIV_data/2007EpiUpdate/default.asp)

- **AIDS vaccine development suffers major setback**

After 23 years of effort and billions of dollars spent upon research, the world seems farther from an effective AIDS vaccine than ever. Indeed the vaccine development world is now in a state of stunned shock since the trial that many believed had the greatest chance of success was halted. Merck's experimental vaccine did not simply fail to protect people. There were more infections among men who got the vaccine — 49 out of 914 — than those receiving a placebo — 33 of 922. There is no way the vaccine itself could have infected people. But the

results raise the frightening prospect that the vaccine actually increased people's chance of getting infected through sex or injection drugs! This trial – called STEP – recruited 3, 000 volunteers in the United States, Canada, Australia, South America and the Caribbean. Merck will not say what it spent to develop the vaccine but outside experts say tens of millions would be a conservative estimate.

Activities have now been completely halted. On December 12, a panel of experts will meet at the National Institute of Health to try to begin to chart the course forward. The biggest challenge is to try to understand what happened with STEP. One of the simplest answers is to the question of why there was no effect in women who made up half the volunteers. Here it is supposed that many of the female sex workers in the trial have become good at insisting that their clients wear condoms. Future trials will have to recruit women whose boyfriends or husbands may be putting them at risk. The other challenge is the reaction amongst the mostly gay male volunteers. Preliminary analysis of the data finds that those who became infected with HIV mounted the strongest immune reaction to the “vaccine” substances. This could be a chance reaction, but it also could be something far more significant. It could be a sign that increased T cell response makes infection more possible which would indicate a major flaw in all research efforts to far. Vaccines based on other research concepts are still in the laboratory and testing in humans is “years and years away.”

The International AIDS Vaccine Initiative emphasizes that the race to find a vaccine is a “marathon not a sprint” and we should not lose sight of the goal. Others say that given we do know that treatment works well for those who are infected and that old-fashioned prevention efforts keep people from getting infected in the first place - perhaps it is time to re-think the priorities? <http://www.ippf.org/en/News/Intl+news/Finding+the+way+after+failed+AIDS+vaccine.htm>

- **Mainstreaming HIV/AIDS in urban planning and human settlement issues**

Most countries in the world are undergoing rapid urbanization. Urban HIV/AIDS prevalence rates in many countries are higher than national averages. Slum conditions – under which up to 72% of urban dwellers in Sub-Saharan African live – are marked by inadequate housing and settlements which place their inhabitants at heightened vulnerability to HIV infection. Slum dwellers are largely excluded from formal employment activities, from access to basic health and education services and often have insecure land tenure or property rights. The heavily congested environment exposes children to early sexual activity, there is a lack of safe places and stressful conditions have been correlated in studies with greater use of alcohol and higher levels of domestic violence. UN-Habitat and Scandinavian Development Agencies are leading efforts for urban planning sectors to mainstream HIV/AIDS – be this at the level of local authorities workplaces, within urban settlement construction projects, through housing associations or trying to reach out to the particularly precarious spaces occupied by the homeless. A body of literature is emerging on the extent to which lack of stable and poor housing conditions exacerbate opportunistic infections in those living with HIV, deprives those affected of fundamental human dignity and makes the situation of those trying to care for those infected at home even more difficult. For further information see the forthcoming 2008 special addition of 'Open House International' (OHI) on 'Settlement Development planning and HIV/AIDS' or contact the editors [christine.wamsler@hdm.lth.se](mailto:christine.wamsler@hdm.lth.se) [nicholaz.wilkinson@emu.edu.tr](mailto:nicholaz.wilkinson@emu.edu.tr)

## Africa

- **Africa's Great Lake Region Ministers Propose Initiative to Address HIV/AIDS amongst refugees, internally displaced and returning populations**

Ministers from Africa's Great Lakes Region – Uganda, Tanzania, Burundi, Rwanda and DRC - met in Mombasa, Kenya, to announce the creation of a joint intervention programme to address HIV/AIDS amongst member nations. The programme will commence in nine refugee camps in the region and also aims to reach long-distance drivers along Kenya's northern corridor. It hopes to reach the estimated 6 million people living with HIV in the region and more than three million children who are orphaned by or vulnerable to HIV/AIDS. It was underlined that this joint intervention was meant to reinforce the national strategies of local states already underway and that a close cooperation with the United Nations High Commission for Refugees is foreseen. The programme has received USD 20 million from the World Bank's International Development Association for the next four years.

For more information see the Kaiser Network at:

[http://www.kaisernetwork.org/daily\\_reports/rep\\_index.cfm?hint=1&DR\\_ID=46513](http://www.kaisernetwork.org/daily_reports/rep_index.cfm?hint=1&DR_ID=46513)

Information in the East African Standard at:

<http://www.eastandard.net/archives/index.php?mnu=details&id=1143971924&catid=159>

- **Evaluation of Programmes for Orphans & Vulnerable Children in E. Africa**

Fourteen million children in sub-Saharan Africa have lost one or both parents to AIDS. These children face an increased risk of injury and illness; inadequate food, shelter, and medical care; exploitative caregivers; mental trauma; and other challenges. Yet despite the recognition of the magnitude and negative consequences of these problems, there is little evidence for what kinds of programmes best improve the well-being of children affected by HIV/AIDS. MEASURE Evaluation is actively engaged in work to improve programmes for orphans and vulnerable children (OVC) by providing much-needed data about programmes and populations, and by sharing information with the countries and other implementing agencies.

There are four major components to MEASURE Evaluation's OVC work:

- public health evaluations of existing programmes;
- examinations of behavioural habits and other characteristics of at-risk populations;
- the Child Status Index, a new toolkit to aid OVC programmes; and
- mapping of OVC populations in relation to available aid organisations, health centers, and other locations.

OVC programmes do not have an established literature of what practices do and do not work and how much activities cost. Additionally, established OVC programmes have few opportunities to communicate with each other and share the lessons they have learned. MEASURE Evaluation is currently conducting ongoing evaluations of OVC programmes in five unique settings -- two in Kenya, and three in Tanzania. Four case studies written from these public health evaluations discuss successful innovations that OVC programmes have implemented, as well as long-term challenges that programmes face and efforts that have been unsuccessful:

The four case studies can be downloaded from: <http://www.cpc.unc.edu/measure/leadership/ovc>

## Asia

- **VIETNAM: Methadone Programme launched to reduce spread of HIV amongst Injecting Drug Users (IDUs)**

Health officials in Ho Chi Minh City are introducing a methadone programme modelled along the same lines as the one in Hong Kong in an effort to reduce the spread of HIV amongst injecting drug users. HIV in Ho Chi Minh is largely concentrated amongst groups at high-risk – such as commercial sex workers and IDUs. A needle-exchange programme is already in operation, and the new methadone programme will be the first in the country. The programme is funded by WHO and the President's Emergency Plan for AIDS Relief (PEPFAR). The deputy director of the city's health services commented that there could be many problems amongst the 10,000 IDUs who have completed detoxication programmes. He added that about 3% begin injecting drugs again after returning to the community. The methadone programme is intended to discourage those who return from detoxication programmes from re-using and sharing needles.

For more information please see:

<http://www.ippf.org/en/News/Intl+news/Vietnamese+City+To+Launch+Methadone+Program>

- **CHINA: SDC at Global Forum for Health Research in Beijing**

Between 29.10-02.11.2007 SDC representatives were in Beijing. The agency led a panel discussion entitled “**Bridging the Gap: The role of transport in improving poor people's health**”. In the session, led by a member of the Swiss Tropical Institute, the theme of mobility and health was introduced highlighting the urgent need for research to address the knowledge gap on this theme that is crucial to improving access to care among the rural poor and ultimately achievement of MDGs 3, 4,5 and 6. SDC has supported strengthening the knowledge base on mobility and access to health services in rural resource-poor settings with the International Programme of Networked Research. Outcomes of studies conducted under the programme in Asia, Africa and Latin America were also presented on themes including maternal access to health care, the impact of intermediate means of transport on health and accessibility issues of vulnerable groups such as people affected by HIV and AIDS in South Africa. For more information see [http://www.globalforumhealth.org/Site/000\\_Home.php](http://www.globalforumhealth.org/Site/000_Home.php)

- **Parliamentarians for Global Action Programme in South Asia**

Parliamentarians for Global Action (PGA) is a network of over 1300 legislators representing 118 Parliaments worldwide, including the Swiss Parliament. PGA is active in three programme areas: Sustainable Development, Health and Population (including HIV/AIDS), International Law and Human Rights and Peace and Democracy. SDC South Asia Division has been supporting PGA since 2004, through a series of "small actions", each financing specific events and conferences organised by PGA in the South Asia region (in Pakistan, Bangladesh, India and Sri Lanka). In view of the promising results, PGA's activities in the field of HIV/AIDS and migration will be supported over the next three years. It is expected that through these activities PGA will mobilise and assist members of Parliaments of numerous countries to create an enabling environment for the implementation of internationally agreed development goals (including ICPD PoA, the MDGs and the UN Declaration of Commitment on HIV/AIDS). [http://www.pgaction.org/prog\\_sust.asp](http://www.pgaction.org/prog_sust.asp)

## Eastern Europe and Central Asia

- **RUSSIA: Businesses take centre stage in context of Government inaction**

Up to 1.3 million people are living with HIV in Russia and the number of cases continues to rise. About 40,000 new HIV cases were reported in 2006. The number of new cases reported in the first quarter of 2007 increased by 8% to 10% compared with the same period last year, with some 100-110 new cases being registered daily. About 80% of these new infections are occurring amongst young people between 15-30yrs and is seen to present a serious threat to Russia's future economic development. About 90% of those infected remain unaware of their status, states the Global Business Coalition on HIV/AIDS, TB and Malaria, and continue to spread the virus unintentionally. Businesses are slowly waking up to the fact that – given what they say is Government inaction and a lack of public awareness - they can become major stakeholders in preventing HIV and AIDS. Coca-Cola has introduced workplace programmes for their staff in Russia, Ukraine and Belarus and recently joined the Global Business Council in Russia. “Our motivation for doing so is very selfish”, says Coca Cola President, Clyde Tuggle, “the company is depending upon one thing – the sustainability of this community, on a successfully, healthy and prosperous Russia. Without that I will have no business”.

For more information see:

[http://kaisernet.org/daily\\_reports/rep\\_hiv\\_recent\\_rep.cfm?dr\\_cat=1&show=yes&dr\\_DateTime=10-26-07](http://kaisernet.org/daily_reports/rep_hiv_recent_rep.cfm?dr_cat=1&show=yes&dr_DateTime=10-26-07)

## Latin America and the Caribbean

- **HAITI: Mainstreaming HIV continues with introduction of Memory Work**

As reported in the last Focus newsletter, SDC has been supporting the fragile state of Haiti since 2004 with a major humanitarian effort. The work focuses upon food security, rehabilitation of social infrastructure and HIV/AIDS. An HIV mainstreaming workshop held for 13 different organisations collaborating with relief activities was successfully held in Port au Prince at the end of last year. Despite the challenging context there was a lively and constructive exchange and the organisations all elaborated actions plans for 2007. The implementation has proceeded well, with Action Aid International Haïti/République Dominicaine requesting an input upon the subject of memory work as a key psychosocial support tool. In November 2007 the coordinator of aidsfocus.ch facilitated a workshop with 25 participants, 22 women and 3 men, most of them HIV-positive. Many of them are concurrently members of HIV-support and solidarity groups and organisations and as such will also be able to pass on the knowledge they gained. It was a very intensive and emotional process. Participants started to prepare „Memory Books“. The course was evaluated as highly successful – with the participants favouring the „empowering“ effect of the workshop and stating that they can now “live in peace” and “free from the terror of dying and being forgotten”.

Over half the women present in the course already decided to share the “Memory Books” with their children as a “way in” to talking to them about their lives and what will happen in the future. Others resolved to share them with their partners or good friends. Others would like to continue the writing process and put a “treasure chest” of personal artifacts together which they will pass on together with their personal story.

For more information on memory work see: <http://www.aidsfocus.ch/topics/Topic.2004-09-15.3736>

- **BRAZIL: AIDS policy heralded as “remarkable”**

Bargaining with pharmaceutical firms to bring down the price of AIDS drugs and producing cheap generic versions has saved Brazil \$1 billion, a study has shown. Infection rates in the Latin American country have been kept at a similar level to the US, the report finds. What is more – over 180,000 Brazilians have gained access to AIDS treatment.

Brazil's achievement is described as "remarkable", in the study published by researchers at the Harvard School of Public Health in the United States.

Brazil's policy for dealing with HIV and AIDS has long been widely admired for its commitment to effective treatment combined with an aggressive promotion of the safe sex message. In 1996 it became the first developing country to commit to providing free and universal access to AIDS drugs.

Now a study published in the Public Library of Science journal by researchers from the Harvard School of Public Health highlights not only the health gains made – but also amount of money the country has saved between 2001 and 2005.

By threatening to produce cheaper generic versions of existing drugs, the government has repeatedly persuaded companies to reduce their prices. Earlier this year Brazil broke the patent on the AIDS drug Efavirenz and decided to import a cheaper version from India.

Drugs companies have warned that action like this would only discourage them from carrying out the expensive research needed to improve the drugs required to treat HIV. Brazil says the decision was taken in the public interest, which is why it also produces generic versions of eight drugs that do not have patents. It has recently been seen that other developing countries are now also starting to produce cheaper, generic AIDS drugs.

For more information see <http://news.bbc.co.uk/2/hi/americas/7093809.stm>

## Useful resources

- **Improving Partnership and Harmonisation on AIDS**

With increased funding and technical support resources available for AIDS, the need for co-ordinated, harmonized and aligned national AIDS responses has never been greater. To help countries ensure inclusive, participatory national responses to AIDS, UNAIDS with the World Bank has developed the 'Country Harmonization and Alignment Tool' (CHAT) to help map stakeholders in countries and assess the strengths and weaknesses of their engagement with the national AIDS response.

[http://www.unaids.org/en/MediaCentre/PressMaterials/FeatureStory/20070921\\_CHAT.asp](http://www.unaids.org/en/MediaCentre/PressMaterials/FeatureStory/20070921_CHAT.asp)

- **Dreams and Desires: SRH experiences of HIV positive women**

At the turn of the new Millennium and for the first time in the history of the epidemic, more women than men have been infected with HIV. Whilst more and more women become infected, the possibility for HIV positive women to live long, productive, sexually fulfilling lives and to give birth to healthy babies has increased with the expansion to anti-retroviral treatment (ARV) and care. IPPF, with support of SDC and other agencies, has compiled 13 stories of women from around the world which highlight what it means to be a sexually active HIV positive woman. <http://www.ippf.org/en/Resources/Reports-reviews/Dreams+and+Desires.htm>

- **UNICEF: Reproductive Health Game for Adolescents**

This exciting new game conveys comprehensive sexual and reproductive health messages and information about HIV prevention in a lively, interactive way. It is available in English and Swahili: [http://unicef.org/voy/explore/aids/explore\\_1360.html](http://unicef.org/voy/explore/aids/explore_1360.html)

- **Effectiveness of Highly Active Antiretroviral Therapy in HIV-Positive Children: Evaluation at 12 Months in a Routine Programme in Cambodia**

Increasing access to highly active antiretroviral therapy to reach all those in need in developing countries (scale up) is slowly expanding to HIV-positive children, but documented experience remains limited. This study provides additional evidence of the effectiveness of integrating HIV/AIDS care with highly active antiretroviral therapy for children in a routine setting, with good virologic suppression and immunologic recovery achieved by using split adult fixed-dosage combinations.

This highly informative article was published online in PEDIATRICS on 22<sup>nd</sup> October, 2007 by Bart Janssens, Brian Raleigh, Seithaboth Soeung, Kazumi Akao et al and can be accessed at: <http://pediatrics.aappublications.org/cgi/reprint/peds.2006-3503v1.pdf>