



International Federation of Red Cross and Red Crescent Societies  
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## HIV/AIDS policy

### Introduction

The International Federation of Red Cross and Red Crescent Societies (International Federation) has a long tradition of working in the area of health and care. National Red Cross and Red Crescent Societies have been supporting individual HIV/AIDS projects since the mid-1980s. Although national and international initiatives have been successful in helping many individual beneficiaries, they have lacked the consistency and scale to make a significant impact on the HIV/AIDS epidemic. At its General Assembly in 2001, the International Federation took a truly global approach to the fight against HIV/AIDS and called for its 1987 HIV/AIDS policy, which had been reviewed in 1991 and 1993, to be updated. This policy provides a framework to support National Society implementation according to local needs and feasibility.

### Scope

The policy addresses the strong recommitment of the International Federation to continuing and scaling-up prevention, destigmatization, advocacy and provision of health care and other services related to HIV/AIDS, in particular to vulnerable populations, noting:

- the close relationship between health and human rights and the importance of involving people living with HIV/AIDS (PLWHA) in the fight against AIDS expressed in the International Federation's HIV/AIDS policies since 1987;
- that prevention, care, treatment, support and fighting stigma and discrimination are closely interrelated interventions and are inseparable in successful community responses to HIV/AIDS, as underscored by the 13th session of the International Federation's General Assembly which took place in November 2001;
- the need for scaling up the above-mentioned approaches in order to curb the epidemic as expressed in the Ouagadougou Declaration adopted at the Red Cross and Red Crescent Pan-African Conference in 2000;
- the need to develop further the scale and effectiveness of programmes in order to really focus where the Red Cross Red Crescent can make a difference, including reaching out to those groups most vulnerable to HIV/AIDS, as expressed in the Berlin Declaration adopted at the 6th European Red Cross and Red Crescent Conference in 2002;
- the need for jointly and urgently addressing HIV/AIDS as a major global development and potential security problem as expressed in the Declaration adopted by the United Nations' General Assembly Special Session on AIDS in 2001 in which the International Federation is mentioned as one of the important players in the fight against HIV/AIDS (article 34);
- that health – which should be viewed as a state of complete physical, mental and social well-being and not merely the absence of disease and infirmity (World Health Organization (WHO), 1948) – is an inalienable right of all people without any regard to race, religion, colour, nationality, sex or origin.

- Health of the individual is fundamental and is an indispensable prerequisite to global, national and individual development, as expressed in the International Federation's health policy (1999);
- HIV/AIDS is a major development problem, which exacerbates other health problems such as tuberculosis (TB), malaria and other common health problems;
  - that the HIV/AIDS epidemic affects all sectors of society and in extreme cases erodes the social fabric of society, leaving the elderly and young people to fend for themselves;
  - poverty, inequity, instability, the widening gap in social justice, gender inequity and lack of respect for human rights are important factors driving the HIV/AIDS epidemic.

### **Statement**

The International Federation and each individual National Society shall:

1. Strive to be a strong and qualified voice of social conscience and knowledge in promoting and protecting the health of vulnerable populations, not least families and communities infected and affected by HIV/AIDS;
2. Show leadership in fighting stigmatization and discrimination everywhere and by creating tolerant and supportive environments for PLWHA within the organization;
3. Form and participate in relevant international forums and alliances, such as the International Partnership against AIDS in Africa and the Caribbean and working with GNP+ internationally;
4. As auxiliary to government advocate for government commitment and leadership at the highest political level in the fight against AIDS at all levels and participate actively in the Country Co-ordinating Mechanism for the Global Fund to fight AIDS, TB and Malaria, national AIDS committees and plans. Furthermore, to advocate for the rights of all vulnerable groups to information and protection and to live a full and dignified life;
5. Within its mandate and competence, identify appropriate areas for addressing the true needs of vulnerable people and provide corresponding preventive, care and supportive services. The services thus provided shall be complementary to those of the government and/or the other partners in health care and shall be developed in such a manner as to promote effectiveness, efficiency and sustainability;
6. In the design of interventions give priority to integrated community-based programmes, thus ensuring sustainability and maximum benefit to the beneficiaries of these services. This requires joint planning and the direct participation of beneficiaries, not least PLWHA and young people, in identifying needs, planning, implementation and evaluation. Special attention shall be paid to the specific roles of women and men, as well as gender aspects of the epidemic. Particular emphasis shall be placed on sensitizing the target communities about their primary responsibility in maintaining and developing their health through means such as a healthy lifestyle, behavioural changes and mutual support;
7. Ensure, to the extent possible, that the comprehensive community-based HIV/AIDS prevention and care programmes are part of or integrated into existing Red Cross and Red Crescent community-based health programmes and are coordinated with efforts aimed at other common health problems

- such as TB and malaria. Moreover, all possible efforts must be exerted to integrate HIV/AIDS programmes into all other feasible programmes;
8. Ensure that Red Cross and Red Crescent HIV/AIDS programmes put special emphasis on advocacy and health promotion (access to health, education, life skills, livelihood, workplace safety and support), prevention (information education and communication, peer education, mobilization of non-remunerated blood donors, harm reduction for injecting drug users (IDUs), condom promotion). Whenever possibilities and appropriate conditions exist, efforts must be exerted to promote access to voluntary counselling and testing. Home-based care, referral and community-based support to survivors (orphans, other affected children, the elderly, etc.) as well as to families living with HIV should complement the preventive efforts and be a mainstay of the Red Cross and Red Crescent's role;
  9. Promote and where appropriate facilitate access for vulnerable groups to prevention of mother-to-child transmission (MTCT), treatment of opportunistic infections and to anti-retroviral (ARV) drugs, according to international standards and the capacity of the Red Cross and Red Crescent, based on scientific studies of various community-based Red Cross and Red Crescent pilot schemes;
  10. Guided by sound public health and humanitarian principles, promote and where appropriate facilitate harm reduction strategies for high risk behaviours and traditional practices, including advocating for law reform as necessary. The secretariat will produce guidelines to assist National Societies with humanitarian advocacy work and programme development and to ensure that responses are tailored to what is feasible and needed in each country;
  11. Ensure that the Red Cross and Red Crescent programmes developed are within the context of government plans and of National Societies' role as auxiliary to their government and are complementary to the efforts of other organizations. Moreover, ensure that interventions are based on updated knowledge and experience and continuously adjusted and adapted to the special characteristics of their own countries and communities as well as to current and future trends as they affect the health of the vulnerable populations;
  12. Advocate for governments to take a proactive, well-informed and effective leadership role in provision of prevention, treatment, care and support, including, where feasible, prevention of MTCT, access to treatment and access to harm reduction programmes;
  13. Take all possible measures to ensure that utmost universal precautions are taken (sterilization of medical appliances, personal protection and precaution) to prevent nosocomial infections in all health care settings run by the International Federation's secretariat and National Societies;
  14. Ensure that all health services provided in emergency settings shall take into consideration all feasible HIV/AIDS-related programmes with the assurance that services provided in any prolonged emergencies shall develop into sustainable integrated community-based health care;
  15. Make a special and concerted effort to urgently ensure the availability of financial, material and high-quality human resources for advocacy and the provision of health-care services, including AIDS prevention and care, as described above;
  16. Show leadership in the global fight against HIV/AIDS and promote collaboration among relevant partners at all levels;
  17. Make a commitment to document and share lessons learned in the fight against AIDS within the International Red Cross and Red Crescent Movement,

especially through strengthening and developing the Movement's own regional HIV/AIDS networks, and with other actors locally, nationally and globally.

## **Responsibilities**

National Societies have the responsibility to develop their own HIV/AIDS and/or health policies and to ensure that their practices are in conformity with the prevailing standards set by WHO and the Joint United Nations Programme on HIV/AIDS (UNAIDS) and to encourage their governments to adopt the policies established by said organizations.

National Societies are encouraged to incorporate HIV/AIDS into their resource mobilization plan, and enter into partnerships both within the Red Cross and Red Crescent Movement and beyond. The International Federation's secretariat should pay particular attention to supporting the coordination of such partnerships.

National Societies have the responsibility to identify their role in an overall country programme with regard to health while adhering to the International Federation's health policy, this HIV/AIDS policy and the International Federation's HIV/AIDS strategy.

National Societies and the International Federation have a responsibility to ensure that all health programmes adhere to the disease prevention, treatment and control protocols officially promulgated by WHO and UNAIDS and are in compliance with this policy; that all staff and volunteers participating in such programmes are aware of the rationale and details of this policy; and that, to the extent possible, all governmental, intergovernmental and non-governmental partners are adequately informed of this policy.

National Societies have the responsibility to develop, introduce and implement a mechanism for monitoring and verification of compliance with this policy, and the International Federation's secretariat shall take the lead in developing such mechanisms.

## **References**

This policy was adopted by the Governing Board meeting on 6 November 2002.

The policy replaces all previously established HIV/AIDS policies, and will be operationalized through guidelines and manuals including:

- Guidelines on first aid and HIV/AIDS (2001)
- Orphans and other children made vulnerable by HIV/AIDS – Principles and operational guidelines for programming (2002)
- Home-based care guidelines (2002)
- Harm reduction guidelines (2003)
- AIDS, health and human rights manual (with Harvard School of Public Health, 1995)
- Positive Development Manual (Global Network of PLWHA, 1998)
- Action with youth: HIV and STD manual (2000, second edition)

- Reducing household vulnerability to HIV/AIDS and other infectious diseases – Global Programme 2002–2005 (2002 and annual updates)
- ARCHI 2010 Volunteers and community health (2001)
- ARCHI 2010 Toolkits (2000–2002)