



Policy Workshop on HIV/AIDS
and Family Well-being
Windhoek, Namibia

28 – 30 January 2004

United Nations Department of Economic and Social Affairs

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Background

1. The Policy Workshop was organized by the United Nations Department of Economic and Social Affairs and hosted by the Government of Namibia, National Planning Commission Secretariat. It was held at Windhoek, Namibia.
2. The purpose of the workshop was to bring together representatives of governments and non-governmental organizations as well as academic experts and practitioners from various countries in southern Africa to discuss the impact of HIV/AIDS on families in the region, to consider how families and communities are coping with the disease, and to contribute to the development of a strategic policy framework to assist Governments to strengthen the capacity of families and family networks to cope. In order to compare experience across regions, a participant from Eastern Europe was also invited to the workshop.
3. The workshop was organized in the light of outcomes of recently-held international conferences, in particular the special sessions of the United Nations General Assembly on HIV/AIDS (New York, 25-27 June 2001) and on social development (Geneva, 26 June-1 July 2000). The workshop also promoted the achievement of the development goals of the United Nations Millennium Declaration: Goal # 6 relates to combating HIV/AIDS, malaria and other diseases (*Target 7: "By 2015, to have halted and begun to reverse the spread of HIV/AIDS"*). HIV/AIDS is seriously affecting progress toward reaching the other MDGs, including the goals to reduce income poverty, reach universal primary education, achieve gender equality, reduce hunger, and improve child health.
4. In addition to participants from the host country, Namibia, international participants in the workshop came from Lesotho, Mozambique, South Africa, Swaziland, Ukraine, Zambia and Zimbabwe.
5. During the Workshop, discussions focused on:
 - a) Exploring the effects of HIV/AIDS on family and family networks, changing generational roles, and related social integration issues;

- b) Identifying coping mechanisms at different societal levels to mitigate the impact of HIV/AIDS on the family;
- c) Reviewing existing policies and programmes to determine whether they respond to the needs of families affected by HIV/AIDS;
- d) Drafting a policy framework and recommendations for addressing family issues and changing intergenerational roles in HIV/AIDS policies and strategies;
- e) Identifying further capacity-building needs and knowledge gaps for follow-up activities.

Opening of the Workshop

6. Mr. Samuel IGôagoseb, Permanent Secretary of the National Planning Commission Secretariat, addressed the workshop and welcomed the participants to Namibia. He stated that Namibia recognized it faced a dreadful threat from the HIV/AIDS pandemic in terms of its development efforts, future plans and its vision of political, social and economic stability. As a result, the Government had made efforts to combat HIV/AIDS a critical part of its Second National Development Plan. In its future vision for Namibia, Vision 2030, the Government's main focus will be on the well-being of all people and the strengthening of family units. He expressed confidence that the workshop would make a significant contribution by assisting Governments to incorporate useful international policy experience into national efforts to combat the disease.

7. A statement was given by Mr. Bob Huber of the Division for Social Policy and Development, UNDESA. He referred to the observance of the tenth anniversary of the International Year of the Family in 2004, and quoted the Secretary-General of the United Nations, Mr. Kofi Annan, "while families have always been the essential social unit in all societies, the observance of the International Year of the Family drew worldwide attention to the issue as a fundamental issue of policy. Ten years later, it is time to take stock, and to determine whether the situation of families has improved, and to consider what more can be done on issues of direct concern to families, such as poverty, the spread of HIV/AIDS, migration and the ageing of societies." Mr. Huber expressed appreciation to the Government of Namibia for its generosity in agreeing to host the workshop, and thanked the participants for their contribution to what promised to be very fruitful and interesting discussions concerning the impact of the epidemic on families in the sub-region, its effect on their ability to support and care for all their individual members, and the policies and programmes that Governments and their partners in civil society can implement to help families to cope better with the challenges they face.

8. Mr. Kemal Mustafa of the United Nations Fund for Population Activities addressed the opening session on behalf of the United Nations Namibia Country Team. He stated that HIV/AIDS was more than just a health issue – it was an issue of development, of economics, of security, and of human rights. The effects of HIV/AIDS

are diverse and overlapping. They include wiping away gains in life expectancy, depletion of workforces and loss of earnings. HIV/AIDS affects the productive capacity of families, reduces labour productivity, and depletes farm household resources. It severely affects family structures and functions, as parents die and children are sent to live with relatives, often grandparents. Roles within the household are reversed, and become confused. Households suffer greatly from stigma, discrimination and economic insecurity. Young people are particularly vulnerable to contracting the virus: it is estimated that half of all new adult infections, around 6,000 daily, occur among youth. Older persons are also greatly affected by HIV/AIDS: as family structures change due to deaths of young parents, grandparents must provide economic and psychological support to orphaned children. This workshop would mitigate the negative effects of HIV/AIDS, through encouraging and assisting governments and civil society to develop, and implement, policies and programmes to support and protect families and family networks.

Situational and Policy Analysis

9. Participants in the workshop conducted situational and policy analyses of the impact of HIV/AIDS on families in the sub-region. The situational analysis explored demographic, economic and social transitions under way in the Africa region as a whole, which include modernization and urbanization trends, and changes brought about as a result of the HIV/AIDS epidemic – all of which impact families, and social and economic life. Concomitant with these transitions and changes is a trend of family nucleation, whereby traditional extended family structures are giving way to nuclear family forms, particularly in urban settings. Implications of these changes are diminished kin support available to families rendered vulnerable by HIV/AIDS. Despite a growth in the nuclear family form, families typically remain multigenerational. However, families now bear the cumulative brunt of multiple strains, which diminish their capacity to cope, and to nurture and care for their members. As a result of the transitions, new family forms are emerging, such as skip-generation families (where the parent generation has succumbed to AIDS related illnesses) and child-headed families (where grandparents are not available to care for orphaned grandchildren), as well as a so-called “generation of orphans” – all of which suffer particular vulnerabilities and are in need of attention. Stigmatization and discrimination of persons infected with the virus and families affected by the epidemic further reduce the ability of families and communities to cope. (Reports prepared for the policy workshop give comprehensive situational analyses and are annexed to this document.)

10. An analysis of existing policies on HIV/AIDS in countries in the sub-region, which included an assessment of available resources and capacities for both new policy development and implementation of policies, identified gaps in existing policies and ineffective implementation of policies. Overall, policy approaches were found to be sectoral; different policies not harmonized or integrated; responsibility for policy formation compartmentalized; and communities seldom involved in policy development. In addition, the roles of different actors in the implementation of the policies were found to be unclear, and Governments often leave implementation of the policies wholly to civil

society. Policies and programmes were moreover found to address issues in a piecemeal way, focusing on the effects of the epidemic on individuals in different age groups and overlooking the effects on families and communities. A need for a shift in the focus of policies and programmes was therefore identified, whereby responses to the special needs of vulnerable and affected persons in specific age groups are expanded to address the needs of whole families in a comprehensive and integrated way. A major goal of such a shift of focus should be the promotion of intergenerational family cohesion. Programmes to mitigate the effects of HIV/AIDS should thus target not only individuals but also their families, in order to sustain family structures and rebuild family capital, while assisting families to care for members and to continue their support and socialization functions.

Policy Framework

11. The United Nations General Assembly Special Session on HIV/AIDS (New York, 25-27 June 2001) called upon Governments to develop or strengthen strategies, policies and programmes which recognize the importance of the family in reducing vulnerability and coping with the impact of the disease. The policy framework set out here is designed for policy makers and practitioners working to stop the spread of HIV/AIDS and to mitigate its impact on families, communities and societies. The framework is a practical tool for stakeholders to review and analyze existing policies and programmes, in order to determine whether they support family care-giving functions and strengthen families and communities to cope with the impact of the disease.

12. The framework will contribute to the development of a policy approach that recognizes the centrality of family in combating HIV/AIDS. Many policies and programmes are designed to meet the specific needs of individual family members without giving due attention to the family context. Effective policies and programmes should help families to retain and strengthen their care-giving functions. This framework was developed by the workshop participants and represents the outcome of their active and detailed discussions on the issues.

13. The framework proposes seven desired *targets, or outcomes* of policies to combat HIV/AIDS. An overarching *principle*, or basis for action, is suggested for each of these outcomes, followed by a series of *recommended actions* and *topics for research* to provide additional evidence-based and policy-relevant information. A degree of overlap among the seven outcomes and the recommended actions will be noted and is to be expected. Some recommended actions and research topics will apply to more than one desired outcome. The reader is encouraged to consider this framework as a “work in progress” and is invited to provide feedback and propose additions or alterations to the United Nations Department of Economic and Social Affairs, Division for Social Policy and Development.

14. While recommending a wide-ranging series of actions to promote family well being, the framework does not identify specific actors or stakeholders responsible for each action or activity. Because of differences in national and local circumstances,

traditions and structures, the identification of responsibilities for action should result from a process of consultation among national policy makers, practitioners and all stakeholders.

15. To promote family well being it is essential to encourage healthy family relationships based on mutual support, shared responsibilities and gender equality. In their Millennium Declaration (September 2000), heads of state and government promised to promote gender equality and the empowerment of women as effective ways to combat poverty, hunger and disease and to stimulate development that is truly sustainable. Achieving gender equality and the empowerment of women are fundamental for reducing the vulnerability of women and girls to HIV/AIDS as well as for strengthening the abilities of families to cope with the disease.

16. Appropriate policies and programmes to support families must also promote the full realization of human rights and fundamental freedoms for all persons infected with or affected by HIV/AIDS, including in the areas of prevention, care, support and treatment. The participation of persons living with HIV/AIDS in the definition of issues and problems, and in the development and implementation of policies and programmes, is essential.

Policy recommendations and topics for research

TARGET 1: Reduced risk for and prevented spread of HIV/AIDS

Principle: All family members should have access to information and resources (testing, counselling, protection) to protect themselves against HIV infection and to prevent the spread of the infection.

Recommendations:

- a) Review existing HIV/AIDS awareness and prevention promotional materials (information, education and communication materials) and tools (knowledge and skills) to ensure that all family members are targeted appropriately.
- b) Develop and disseminate messages which promote sexual behaviour change among family members to prevent the spread of HIV/AIDS.
- c) Encourage dialogue within families on sexual relationships, with an aim to reduce risk-taking behaviour and encourage responsible sexual behaviour.
- d) Develop and conduct public information campaigns to break down taboos, refute myths, combat superstitions and eliminate sexual abuse and exploitation.
- e) Enact legislation and strengthen legal efforts to eliminate sexual abuse and domestic violence.

- f) Provide accurate information on HIV/AIDS and how it is spread to traditional healers, traditional leaders and faith based organizations.
- g) Encourage the media and the entertainment industry to undertake awareness campaigns and to promote responsible sexual behaviour.
- h) Provide information, counselling, support and life skills training to empower families and to strengthen intra-family relations.
- i) Promote voluntary counselling and testing (VCT) for individuals and couples.
- j) Provide more information on the non-sexual transmission of HIV and ensure access to essential supplies, including sterile injecting equipment, for all family members, to ensure against non-sexual transmission of HIV.
- k) Discourage practices and beliefs which further the spread of HIV.

Research topics:

- a) Analysis of the impact of HIV prevention information and dissemination strategies including whether the strategies are achieving their goals and whether awareness and prevention information strategies are reaching all generations.
- b) Assessment of the incorporation of traditional beliefs and practices in HIV/AIDS prevention efforts.
- c) Comparison of different techniques and evaluation of best practices for HIV/AIDS prevention and information campaigns.
- d) Analysis of whether current approaches to prevent the spread of HIV/AIDS are accessible and appropriate for families living in poverty.
- e) HIV/AIDS knowledge, attitude and practice (KAP) studies, including impact on changes in sexual behaviour.
- f) Analysis of the role and impact of the media in promoting awareness and behaviour change for HIV/AIDS prevention.

TARGET 2: Avoided stigma and discrimination

Principle: Stigmatization of, and discrimination against, HIV-positive persons and persons and families affected by HIV/AIDS, should be eradicated.

Recommendations:

- a) Forge political commitment to, and support of, destigmatization and anti-discrimination efforts.
- b) Review and revise legislation that is discriminatory against persons living with HIV/AIDS.
- c) Review, enact and apply legislation to ensure a workplace free of discrimination against people living with HIV/AIDS (PLWHAs).
- d) Promote dialogue about HIV/AIDS in society and families, to counter ignorance and prejudice.
- e) Review the requirements of confidentiality and discretion in testing and treating HIV-positive persons, and assess whether the requirements contribute to stigma and discrimination.
- f) Promote destigmatization of HIV/AIDS within families by targeting information campaigns to, and providing counselling for, all family members.
- g) Empower HIV-positive persons to lead anti-discrimination and destigmatization efforts.
- h) Promote the social acceptance and involvement in self-help efforts of persons living with HIV/AIDS.
- i) Offer support group assistance to HIV-positive persons.

Research topics:

- a) Identification of factors which contribute to HIV/AIDS stigma and discrimination.
- b) Analysis of the definition and nature of HIV/AIDS stigma and its effects in different communities.
- c) Assessment of the social impact of medical approaches to discretion and confidentiality regarding HIV infection and testing.
- d) Analysis of family attitudes to HIV-positive family members and responses to disclosure of their status.
- e) Review of positive and negative roles played by traditional healers and traditional leaders in the destigmatization of HIV/AIDS.
- f) Analysis of attitudes of religious leaders and the role of religion in reinforcing or reducing HIV/AIDS stigma.

- g) Review of legislation to determine whether it discriminates against persons living with HIV/AIDS (PLWHAs).
- h) Exploration of individual decisions relating to voluntary counselling and testing (VCT) for HIV infection and disclosure of HIV status.

TARGET 3: Supportive family and community networks

Principle: Families affected by HIV/AIDS must be supported to help them to cope with its impact, with recognition given to the special needs of family members of different generations.

Recommendations:

- a) Ensure that interventions to support families and community networks recognize generational interdependence and promote intergenerational interaction and healthy intra-family relationships.
- b) Promote strong community mobilization to support families affected by HIV/AIDS in appropriate ways.
- c) Assist communities to support families affected by HIV/AIDS, including identification of community strengths and needs.
- d) Coordinate community support efforts to target families as a whole, while recognizing the specific needs of members of different generations.
- e) Expand community home-based care and build capacity among community health workers in home-based care and information dissemination.
- f) Provide psychosocial support to families and individual family members.
- g) Provide support for couples affected by HIV/AIDS, including counselling, to accept and adjust to the impact of HIV/AIDS.

Research topics:

- a) Comparative studies of positive and negative coping mechanisms of families affected by HIV/AIDS in different communities, including traditional ways of coping and solving problems.
- b) Analysis of the relationships between family coping mechanisms and community support practices.
- c) Review of interventions that assist and support affected families, and identification of

specific needs of different generations.

- d) Identification, evaluation, dissemination and replication of best practices in community and family care and support.
- e) Identification of harmful and helpful traditional practices.
- f) Assessment of the role of traditional medicine as a complementary therapy for HIV/AIDS.
- g) Evaluation of how families, including family members of different generations, perceive their needs for assistance, and the extent to which communities can meet these needs.

TARGET 4: Diminished economic vulnerability

Principle: Families affected by HIV/AIDS should be empowered to sustain economic viability.

Recommendations:

- a) Ensure HIV-positive persons and affected families retain entitlements to benefits and services.
- b) Improve access to social grants for eligible family members, including child support grants, foster care grants, disability grants and old age pensions.
- c) Strengthen efforts to reduce the costs of medicines, especially anti-retroviral treatments, and provide subsidies for these treatments.
- d) Ensure the implementation of laws and practices that protect the rights of HIV-positive persons in the workplace.
- e) Promote community solutions to reduce economic vulnerability, through community-based cooperative arrangements and schemes to reduce costs and enable savings, including rotating credit schemes, burial societies and mutual aid societies. Provide education to ensure transparency and honesty in the operation of the schemes.
- f) Provide non-cash inputs to cooperative agricultural projects, e.g. seeds, fertilizers.
- g) Ensure that families affected by HIV/AIDS retain legal ownership of their land.
- h) Educate and assist individuals to write wills to protect their dependants' inheritance.
- i) Assist individuals and families to start and sustain income generation projects, e.g., crop sharing, livestock sharing, land sharing, petty trading, hawking and food

gardening.

- j) Educate people in financial management, e.g., prudent budgeting, savings and income consumption, and provide financial advice.
- k) Discourage expenditure on expensive rituals that deplete family and community resources, such as lavish funerals.
- l) Provide incentives for families affected by HIV/AIDS to keep their children in school, especially girls. Assist families to continue to school their children through reductions in school-related expenses, e.g., school fees and the cost of uniforms.

Research topics:

- a) Assessment of whether income-generation projects assist families affected by HIV/AIDS to sustain economic viability.
- b) Review of factors and mechanisms which contribute to the impoverishment of families affected by HIV/AIDS.
- c) Assessment of the effectiveness of various economic empowerment programmes for families affected by HIV/AIDS.
- d) Assessment of the extent to which Government poverty reduction strategies sustain and benefit families affected by HIV/AIDS.
- e) Review of experience and practices in writing wills to safeguard family inheritance.

TARGET 5: Improved care and service provision to support family functions

Principle: Provision of care and services to persons infected with or affected by HIV/AIDS should address family needs in an integrated way.

Recommendations:

- a) Ensure provision is made in Government departmental budgets for programmes to help families affected by HIV/AIDS to cope.
- b) Provide service packages to support families affected by HIV/AIDS, which meet the needs of all family members.
- c) Provide more child care facilities to mitigate or alleviate the burden of child care on families affected by HIV/AIDS.
- d) Provide food parcels and nutritional advice to HIV-positive persons and their families.

- e) Simplify procedures to access grants and services.
- f) Compile and maintain a directory of information and services, including rights and entitlements, to facilitate families' access to these resources.
- g) Develop, expand, implement and monitor home-based care services.
- h) Assist communities to prioritize their needs, to enable them to respond to the support needs of families affected by HIV/AIDS.
- i) Strengthen and support the capacity of families and volunteers to render home-based care.
- j) Promote volunteering and mobilize groups of volunteers to provide services, and provide support for their work, including where possible, provision of stipends.
- k) Promote greater involvement of men in care and service provision.

Research topics:

- a) Analysis of the needs of families affected by HIV/AIDS for integrated service provision.
- b) Identification of existing and potential service providers and evaluation of services provided.
- c) Comparative analysis and evaluation, including cost-effectiveness, of the implementation of different approaches to service provision, such as:
 - Different forms of home-based care;
 - Centralized versus de-centralized service provision;
 - Generationally-targeted services versus integrated services targeted at families.
- d) Evaluation of support and assistance provided to caregivers.

TARGET 6: Mitigated effects of a “generation of orphans”

Principle: Comprehensive responses to the needs of families affected by HIV/AIDS will enable them to provide care, support and skills to children orphaned by AIDS.

Recommendations:

- a) Policies and programmes for children orphaned by AIDS should support family caregiving as a first resort.

- b) Encourage foster care and adoption as alternative placement solutions for vulnerable children and orphans. Provide institutional care as a last resort and work to improve the quality of such care.
- c) Clarify the legal status and protect the rights of children placed in foster care.
- d) Ensure that institutions maintain family contacts for children in their care.
- e) Consider temporary placement solutions for children in distress and to offer respite to caregivers.
- f) Build capacity among, and provide life skills training for, vulnerable and orphaned children and youth, with particular attention paid to the special needs of street children and youth

Research topics:

- a) Demographic and situational profiles of children orphaned by AIDS, including their needs and available services.
- b) Analysis of the situation and needs of child-headed families.
- c) Comparative analysis of the costs and benefits of different strategies to care for orphans and vulnerable children, including institutionalization, foster care and other forms of residential and support care.
- d) Evaluation of the long-term effects of alternative forms of care on the individual development of children orphaned by AIDS.

TARGET 7: Intergenerational cohesion

Principle: Healthy intergenerational family relationships should be promoted in policies and programmes addressing HIV/AIDS.

Recommendations:

- a) Review policies and programmes to determine their impact on intergenerational family relationships and the ability of affected families to cope with HIV/AIDS, and revise policies and programmes as necessary.
- b) Ensure service programmes that target individual family members infected with or affected by HIV/AIDS contribute to strengthening family integration.
- c) Ensure that policies and programmes that support children affected by HIV/AIDS promote a strong sense of family.

- d) Ensure that policies and programmes for families affected by HIV/AIDS encourage fathers and grandfathers to support and sustain their families.
- e) Share information about programmes which address the needs of families affected by HIV/AIDS in an integrated way.

Research topics:

- a) Analysis of the dynamics of intergenerational relations within families affected by HIV/AIDS.
- b) Analysis of the impact of HIV/AIDS on family structures and family generational roles.
- c) Review of new parenting roles and styles: children's reactions, confusion and adjustment.
- d) Study of the effects of the loss of role models for children affected by HIV/AIDS.
- e) Analysis of grandparents' feelings towards caring for grandchildren affected by HIV/AIDS.

Advancing the Framework: Towards a plan of action

17. The Policy Framework embodies a new perspective for combating HIV/AIDS and mitigating its effects, which focuses on the family and is aimed at strengthening the capacity of affected families to cope with the epidemic. The framework draws attention to the impact of the epidemic on African families, family structures and intergenerational relations, as well as generational interdependency. It recognizes that this impact is exacerbated by other demographic, economic and social transitions in the sub-region, which diminish the ability of families to function and increase their vulnerability. Thus, the framework should contribute to the development of a policy approach which recognizes the centrality of the family in fighting HIV/AIDS and to comprehensive and integrated policies and programmes to assist Governments to help families to cope.

18. The relevance of the policy framework lies primarily in the new perspective, which is aimed at strengthening the capacity of affected families to cope and enhancing family well-being. The framework recognizes the social and economic vulnerability of families affected by the epidemic and the multitudinous social problems, including poverty and scarcity, which they experience. It furthermore incorporates universal principles of participation, gender equality and human rights; is sensitive to a diversity of traditional, cultural, environmental and economic contexts; and is aimed at poverty reduction, human capital formation, and social and community development.

19. An assumption underpinning the framework is that new policies on HIV/AIDS will emphasize the poverty context of affected and vulnerable families, and that programmes will be designed and implemented which simultaneously address the needs of the families and effect poverty reduction or eradication. Policy action should therefore be aligned with other cross-cutting issues for poor and vulnerable families as well as address broad social development needs, and thus contribute to the achievement of the Millennium Development Goals. An integration of social, health and financial issues and responses in policies as well as in plans and programmes should be ensured.

20. New policies on HIV/AIDS should have implementation guidelines, or be accompanied by a plan of action for implementation, which becomes part of a national development plan. Such a plan of action, based on the framework provided here and incorporating the targets, principles, policy recommendations and topics for research in the framework, is required for each of the countries in the sub-region. The 68 recommendations in the framework call for specific action, which when implemented as a series of actions may achieve the seven desired targets, or outcomes. The Governments and civil society actors should thus forthwith engage in consultations with all stakeholders, including persons living with HIV/AIDS and their families, to ensure grassroots input and wide support for policies and to construct a plan of action for their country. Key components of a plan of action may include awareness raising; assessment and prioritization of needs and setting of targets; information gathering; distillation of local findings into policy relevant formats; adjustment of policies and programmes in accordance with conclusions and recommendations of reviews and appraisals; active involvement of civil society organizations; and provision for civic education on policies and their implementation, and how individuals and families may access programme services.

21. The plan of action should indicate what is to be achieved, who is responsible for the implementation of the plan, and what budget is available or should be provided. Programmes should thereafter be designed and implemented, with multi-sectoral involvement, to achieve the goals of the plan, through service delivery and development activities. In keeping with best practice principles in the sub-region of separating policy making from service delivery responsibilities, the role of the Government in the implementation of programmes should be that of a facilitator rather than a provider of services. Governments should thus create an enabling environment for civil society and the private sector to implement programmes. Furthermore, it is contended that programmes are more effective if their implementation is decentralized to a provincial or local level, where the programmes may be more naturally integrated in the community, and where agencies and agents responsible for their implementation may more readily recognize the family context and respond to families' needs. It should, however, be incumbent on civil society to put pressure on Governments, as well as on international bodies to provide assistance, to ensure that the plans of action are implemented.

22. Coordination of the implementation of policy and the plan of action may be vested in a national coordinating body, which should be a specialized and centralized inter-ministerial body, or lead agency, with strong links to Government entities. If such a

body does not exist, one should be established. A multi-sectoral body should not fall under the control of a single ministry (although the body may reside in a specific ministry); it should have sufficient authority to make decisions and have a dedicated budget. All relevant sectors should make budgetary allocations to the coordinating body for the period of the plan.

23. Responsibility for monitoring the implementation of the plan of action may also be tasked to the national coordinating body. All HIV/AIDS policies, strategies and programmes should be monitored to appraise the extent to which they include a family perspective, and promote family integration and intergenerational cohesion. Such monitoring, according to measurable indicators, may be effected through the use of multiple instruments, including legislative review, budget monitoring, institutional capacity building and training, and should include monitoring of poverty reduction strategies. Omissions and discrepancies in policies and strategies, in terms of their promotion of the well-being of families affected by HIV/AIDS, may thus be detected and corrected. National monitoring efforts may be coordinated with and supported by regional and global review and appraisal exercises.

24. The framework incorporates a series of 39 topics or priorities for policy and action-oriented research and data collection, which represent the workshop participants' determination of areas in which expanded information on issues relating to HIV/AIDS and families is needed to support decision making. These topics or priorities may be viewed as constituting a research agenda on the impact of HIV/AIDS on families in the sub-region. An aim of the research agenda is to support both new policy development, or adjustment, and the implementation of national plans of action. Research can provide additional and relevant local, national and sub-regional evidence and information to inform policies and programmes. Studies can offer families, particularly socially excluded families, an opportunity to articulate their conditions and needs firsthand, as well as provide qualitative information to complement statistical and other information.

25. The heterogeneity of HIV/AIDS related issues affecting families and corresponding policy responses indicates a need within a research programme for multiple entry points for information gathering. The information gathered at local levels should provide periodic feedback to the national coordinating body for distillation and prioritization. The outcomes of this process may inform both policy development and programme design, as well as facilitate adjustments to policies and programmes, as necessary, to result in more appropriate and timely responses. Researchers can contribute valuable information to inform new policy development and more effective implementation. Expanded resources for research, including human capacity, funds, equipment, technical know-how and improved skills, are needed. Provision for such resources should be included in a national plan of action.

26. Overall, and drawing on the seven principles stated in the framework, new or adjusted policies, plans, strategies, programmes and research should all support three major policy domains of a new family perspective to fight HIV/AIDS, which are to reinforce healthy family relationships; protect and increase family resources; and

strengthen the resilience of families in changing environments. Specifically, new programmes which incorporate a family perspective should:

- Recognize the roles of and contribution made by different categories of caregivers to, or within, families, support the caregivers, and enhance their caregiving capacity to enable them to carry out their roles optimally;
- Increase awareness of the impact of HIV/AIDS on different generations and families as a whole;
- Ensure that the needs of individuals of all generations are addressed equitably;
- Improve access of affected and vulnerable individuals and families to programmes and services;
- Address the psychosocial needs of individuals and families;
- Ensure and support the economic independence of affected and vulnerable families;
- Determine the assumptions that policies make about affected and vulnerable families, and how families' needs change, and ensure that policies are implemented before they become obsolete;
- Bridge gaps between HIV/AIDS policies and their implementation, or translation into practice.

27. International cooperation in policy analysis and technical support may be required to assist some of the sub-regional countries in their review, appraisal and adjustment exercises. Such cooperation may include financial and technical support for information and data collection; the dissemination of best practices; and capacity building of Government officials, civil society, researchers and professionals in monitoring, assessment and adjustment, where additional skills and competencies may be required. United Nations funds, programmes and specialized agencies could contribute expertise through regional and field offices to support such capacity building efforts. The Division for Social Policy and Development could develop a plan to further technical cooperation with countries in the sub-region.

28. In sum, and in the light of the policy framework that has been developed and the need that has been identified for national plans of action to advance the framework, the Governments of countries in the sub-region, in partnerships with civil society and international agencies, and with wide stakeholder involvement, should undertake to:

- Review national and local policies and programmes which address issues relating to HIV/AIDS to determine whether they focus on families, adjust the policies and programmes as necessary, and ensure that new policies and programmes include the new perspective;
- Develop a plan of action for their country, and commit to the implementation of the plan through appropriate strategies and programmes;
- Establish or strengthen a national coordinating body or mechanism, which includes a lead agency, to facilitate and monitor the implementation of the plan;
- Adopt and support the key components of the plan, which should include awareness raising, needs assessment and target setting, information gathering, the distillation of local findings into policy-relevant formats, and the adjustment of policies and programmes;
- Request the United Nations regional commissions to support national efforts and

facilitate the processes, by promoting networking and sharing of information and experience; assisting Governments, at their request, in the gathering, distillation and analysis of information, and the presentation of the findings of national reviews and appraisals; developing sub-regional analysis and defining priorities for future policy action; and providing technical assistance for capacity building.

List of Participants

Host Government:

Mr. Samuel IGôagoseb
Permanent Secretary
National Planning Commission Secretariat
Windhoek

Country participants:

Lesotho:

Ms. Mathoriso Monaheng
Lesotho AIDS Programme
Coordinating Authority (LAPCA)
Maseru

Ms. Keiso Matashane Marite
National Coordinator
Women and Law in Southern Africa
Research and Education Trust – Lesotho
Maseru

Mozambique:

Dr. Martinho do Carmo Dgedge
Deputy National Director of Health
Ministry of Health
Maputo

Mr. Virgílio Elias Virgílio Salomão
Ministry of Women and Coordination
of Social Welfare
Maputo

Dr. Terezinha da Silva
Adviser to the Director
Legal and Judiciary Training Centre
Chairperson of Forum Mulher
Maputo

Namibia:

Mr. Vekondja H. Tjikuzu
Acting Deputy Director and Head
Population and Human Resources Planning
Macro-Economics and Sectoral Planning
National Planning Commission Secretariat
Windhoek

Mr. F. Apollus
Population and HIV/AIDS Monitoring
National Planning Commission Secretariat
Windhoek

Ms. Eva Neels
Ministry of Women Affairs and Child
Welfare
Windhoek

Ms. Ingrid Louis
Orphan Care Specialist
Catholic AIDS Action
Windhoek

South Africa:

Ms. Ruth Poee
Assistant Director, HIV/AIDS
Department of Social Development
Pretoria

Ms. Thuli Mahlangu
Director, Subdirector
Care and Services to Older Persons
Welfare Services and Transformation
Department of Social Development
Pretoria

Ms. Phangisile Mtshali
Director
Bristol-Meyers Squibb Foundation
Secure the Future
Johannesburg

Swaziland:

Dr Linda Thembisa Kanya
Deputy Director
Ministry of Health and Social Welfare
Mbabane

Ms. Thandiwe Dlamini
National Emergency and Response Council
on HIV/AIDS (NECHA)
Coordinator
Caritas Parish Nurse Programme
Eveni, Mbabane

Ukraine:

Dr. Olga Balakireva
Deputy Director
State Institute for Family and Youth
Problems
Kiev

Zambia:

Dr. Chipepo Kankasa
Department of Pediatrics
University Teaching Hospital
Lusaka

Ms. Exhilda Siakanomba
Acting Project Manager
Children in Distress Project
Family Health Trust
Lusaka

Zimbabwe:

Ms. Florence Kaseke
Senior Social Welfare Officer
Department of Social Welfare
Ministry of Public Service, Labour
and Social Welfare
Harare

Dr. Nyasha Madzingira
Institute of Development Studies
University of Zimbabwe
Mount Pleasant, Harare

United Nations country team:

Mr. Kemal Mustafa
United Nations Population Fund
Windhoek

Ms. Ana de Mendoza
United Nations Development Programme
Programme Officer
HIV/AIDS Unit
Windhoek

Ms. Celia Kaunatjike
United Nations Childrens Fund
Assistant Project Officer
Special Protection
Windhoek

**United Nations Department of
Economic and Social Affairs**

Mr. Bob Huber
Chief, Generational Issues
and Integration Section
Division for Social Policy
and Development
New York

Mr. Alexandre Sidorenko
Focal Point on Ageing
Division for Social Policy
and Development
New York

Ms. Laura Skolnik
Consultant
Division for Social Policy
and Development
New York

Ms. Monica Ferreira
The Albertina and Walter Sisulu
Institute of Ageing in Africa
University of Cape Town
South Africa

Mr. Tavengwa Nhongo
Regional Representative
HelpAge International
Nairobi, Kenya