The Role of Parliamentarians in Combating the HIV/AIDS Pandemic

A Study Group Report
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The scale of the Human Immunodeficiency Virus (HIV) pandemic has exceeded all expectations since the identification of the virus 24 years ago. Globally, an estimated 40 million people are currently living with HIV and some 25 million have already died.

HIV/AIDS, more than any other health issue, is critical in setting back a country’s development because it attacks its people in their most productive years and places an undue strain on the economy. According to the United Nations Development Programme (UNDP) Human Development Report 2004, AIDS explains why 20 countries have suffered development reversals since 1990 – and exactly half of these are Commonwealth countries (Bahamas, Belize, Botswana, Cameroon, Kenya, Lesotho, South Africa, Swaziland, Tanzania and Zambia). It was in this context that the Commonwealth Parliamentary Association convened a Study Group of experienced Commonwealth Parliamentarians in New Delhi, India.

Across the Commonwealth, particular attention needs to be paid to the pandemic: the population of the Commonwealth equates to just under one-third of the global population and yet of all those living with HIV/AIDS almost two-thirds live within the Commonwealth.

The impact of HIV witnessed so far is only a fraction of the impact to come, given the rapid spread of HIV over the past 20 years together with the long lag time between infection and the onset of severe HIV-related complications.

Responding to AIDS on a scale commensurate with the epidemic is a global imperative and the tools for an effective response are known. Yet it is clear that methods aimed at controlling the spread of the virus are failing to do so.
However, there is hope. In Uganda, a government committed to combating HIV/AIDS has delivered an impressive reduction in prevalence rates and Zambia is on course to become the second African country to reverse the spread of the disease.

Good governance has been recognized by the UNDP as a critical element in the reduction of HIV vulnerability. Right from its start, the UNDP South East Asia HIV and Development Programme has emphasized the importance of introducing dimensions of good governance into development strategies aimed at combating HIV/AIDS epidemics.

Parliamentarians are leaders in society and have both the mandate and public trust to act in the interests of the entire community. They command the influence and resources needed to secure progress in combating HIV/AIDS, and Parliamentarians bear a special responsibility to set the examples that spur others into action.

SUMMARY

The Commonwealth Parliamentary Association has recognized the proliferation of HIV/AIDS and its impact on communities worldwide, not only in health terms but also on the economic, social and political levels. The 46th Commonwealth Parliamentary Conference in Edinburgh, United Kingdom, in 2000 gave much attention to HIV/AIDS and proposed a CPA Study Group. Since that time, a number of activities related to HIV/AIDS have been undertaken, culminating in a four-day Study Group on “The Role of Parliamentarians in Combating the HIV/AIDS Pandemic”, which met in New Delhi, India, in January and February 2005.

The Study Group meeting was officially opened by the Deputy Speaker of the Lok Sabha of India, Hon. Sardar Charnjit Singh Atwal, MP, and was attended by 12 Parliamentarians from Queensland, Ontario, Fiji Islands, India, Jamaica, Malaysia, South Africa and the United Kingdom. An Ugandan MP also represented the Parliamentary Network on the World Bank. In his opening speech, Shri Atwal emphasized that HIV/AIDS is a grave global problem that demands an effective and well-co-ordinated response.
The objectives of the Study Group were to:

- Encourage Parliamentarians to develop their understanding of HIV/AIDS and its impact on society as a whole,
- Identify key factors that facilitate the spread of HIV/AIDS,
- Define the role and capacity of members of Parliament, Legislature and CPA in addressing the HIV pandemic in Commonwealth nations and the world, and
- Develop a Commonwealth-wide plan of action on the role of Members of Parliament, Legislature and CPA in combating HIV/AIDS

The four-day Study Group included presentations by invited guest speakers and discussions on that topic. Participants often reflected on issues in their home settings and on specific ways to address them, taking into account the differences in cultures and traditions of their countries and regions.

Specific sessions encompassed:

1) The role and responsibility of Parliamentarians
Presented by India’s Minister of State for Statistics and Programme Implementation, Shri Oscar Fernandes, MP, who briefly outlined the extent of the HIV epidemic in India. He emphasized the need for Parliamentarians to talk openly to reduce the stigma and discrimination and to promote the interchange of resources amongst Commonwealth nations. He also mentioned the possibility of Ayurvedic medicine as having a curative effect on HIV and trials were currently underway. Its success will be revealed in mid-2005.

Following his presentation, each representative described the situation in their own country, which included the socio-economic and demographic impact, specific responses by their past and present governments and the outcome. The primary health infrastructure and social services that address HIV/AIDS issues were also outlined briefly. Most of the resource-poor nations lacked most of the essential services required in the public health setting.

2) Global response to HIV/AIDS
This presentation by Mr Anand Tiwari, Advocacy Advisor and Officer-in-charge, UNAIDS, outlined India’s response to HIV with particular attention to the current HIV infection rates
and trends of spread noticed in India. He gave figures on sexual health indicators and examples of best practices, public health legislation and the need for related reform of criminal law with particular emphasis on the UNAIDS commitment to support the efforts of its Parliamentary Forum.

3) The impact of HIV/AIDS on women and children
In a presentation by Ms Vandana Mahajan of UNIFEM, issues of poverty, reproductive rights and violence against women especially in the Indian subcontinent were discussed. Giving gender equality priority was also discussed, with particular emphasis on including more women in Parliaments. Ways to address the cultural and traditional barriers affecting a woman’s right to reproductive health and methods to increase the literacy rate in women also got much attention.

4) International obligations and human rights in addressing HIV/AIDS
Mr Venkatesh Nayak gave a comprehensive overview on Guidelines on the International Conventions and Obligations on Human Rights with particular emphasis on the Millennium Development Goals, the United Nations Special Session on HIV/AIDS, the Abuja Declaration and Framework for Action for the fight against HIV/AIDS, the Nassau Declaration and the Universal Declaration on Human Rights, together with changing discriminatory attitudes and privacy and freedom of association.

5) The economic impact of HIV/AIDS
This was discussed in a video-conference with Mr Shantayanan Devarajan, Chief Economist, South Asia Region, for the World Bank. Myths and realities were highlighted. He emphasized the effect HIV has on the economy, GDP growth, other implications especially the economic costs and the need for early and strong action to reduce these costs.

6) A multi-sectoral approach to the pandemic
Led by a joint presentation by the representatives from the UNDP and National AIDS Control Organization (NACO), this session highlighted the need for networking with key partners and community consultation for effective and unified response to the pandemic.

Each representative briefly outlined the work of national HIV/AIDS bodies in their own setting and the role Parlia-
mentarians and the government played in their work. Many countries have well established national bodies that are usually under the jurisdiction of the Health Ministries, with a few exceptions such as South Africa, Uganda and India where each body is under that of the President’s Office.

The role of Parliamentarians in these organizations in the past was discussed with particular attention to future involvement and commitment from MPs.

7) The need for political and parliamentary leadership
The final session presented by Hon. Dorothy Hyuha, MP, (Uganda) and Mr Nigel Evans, MP, (United Kingdom) covered Uganda’s success story, all-party parliamentary groups, parliamentary committees, public statements and the role of Parliamentarians as political leaders, legislators, advocates and resource mobilizers.

Some of the key points that came out of the above presentations and discussions were:

- Education on HIV/AIDS for the general public, target groups, educators and decision-makers;
- Impact of HIV on women and children, including the international exploitation of women;
- Provision of safe blood and blood products for transfusion;
- Availability of easy-to-reach centres for reproductive health and voluntary counselling and testing (VCT);
- Screening of antenatal mothers and prevention of mother-to-child transmission of HIV;
- Extent of the impact on marginalized groups and the specific responses to address this;
- Discrimination against people living with HIV/AIDS (PLWHA) and those who are affected by someone with HIV/AIDS;
- Legal rights of PLWHA and also those of the general community against the malicious spreading of the disease;
- Availability of and continued access to affordable anti-retroviral drugs (ARVs) in resource-poor countries;
- Specific roles of Parliamentarians in addressing the issue of HIV in their constituencies and with other MPs to reduce stigmatization and discrimination;
- Demonstrating a leadership role in their specific countries to effectively address the HIV/AIDS pandemic, and
• Adopting a multisectoral approach and including key figures in the community in national and regional HIV/AIDS bodies.

Issues related to marginalized groups, especially commercial sex workers and men who have sex with other men (MSM), stimulated much debate. Some participating countries denied their existence or thought them immoral and illegal, thus precluding health promotion work with them.

Poverty, education, discrimination, stigmatization and issues related to women and their exploitation received major attention.

After a healthy debate over the proposed action plans that were picked during presentations and discussions over the four-day Study Group, and those specifically forwarded by the participants, the following list of recommendations was agreed upon unanimously.

**RECOMMENDATIONS**

HIV/AIDS, more than any other health issue, is critical in setting back a country’s development because it attacks its people in their most productive years and places an undue strain on the economy. According to the United Nations Development Programme (UNDP) Human Development Report for 2004, AIDS explains why 20 countries have suffered development reversals since 1990 – exactly half of them Commonwealth countries. Across the Commonwealth, particular attention needs to be paid to the pandemic: the population of the Commonwealth equates to just under one-third of the global population but of all those living with HIV/AIDS almost two-thirds live within the Commonwealth.

Yet there is hope. In Uganda, a government committed to combating HIV/AIDS has delivered an impressive reduction in prevalence rates and Zambia is on course to become the second African country to reverse the spread of the disease. Parliamentarians are leaders in society and have both the mandate and public trust to act in the interests of the entire community. They command the influence and resources needed to secure progress in combating HIV/AIDS, and Parliamentarians bear a special responsibility to set the examples.
that spur others into action.

With all this in mind, and taking into account the International Guidelines on HIV/AIDS and Human Rights published by the Office of the United Nations High Commissioner for Human Rights (UNHCHR) and the Joint United Nations Programme on HIV/AIDS (UNAIDS), and the Commonwealth’s Arusha Commitments on Gender and HIV and AIDS, the CPA Study Group on The Role of Parliamentarians in Combating the HIV/AIDS Pandemic makes the recommendations listed below to individual Parliamentarians, CPA Branches and the CPA Executive Committee on behalf of the Association as a whole.

**WHAT SHOULD PARLIAMENTARIANS DO?**

(1) Ensure that they are informed about HIV/AIDS, act as advocates for those infected and affected and demonstrate an openness of approach in dealing with HIV/AIDS.

(2) Vocalize to reduce stigmatization, social taboos and discrimination by helping to make HIV/AIDS a visible issue and addressing the myths and facts of HIV/AIDS.

(3) Address poverty issues that are intrinsically linked with HIV/AIDS.

(4) Visibly demonstrate their political will and commitment to ending HIV/AIDS.

(5) Encourage Parliamentarians and others to join national HIV/AIDS bodies and provide support.

(6) Involve faith-based organizations, non-governmental organizations and community-based organizations in addressing the issue of HIV/AIDS.

(7) Involve people in decision-making, especially vulnerable and marginalized groups.

(8) Encourage the use of peer counsellors to facilitate access to information.

(9) Effectively utilize parliamentary processes to provide for
increased accountability.

(10) Establish all-party groups or caucuses on HIV/AIDS.

(11) Sign up to a creed of best practice for combating HIV/AIDS and countering stigmatization and discrimination; and

(12) Support the Commonwealth Youth Programme’s Positive Living Ambassadors Initiative.

WHAT SHOULD LEGISLATURES DO?

(1) Promote HIV/AIDS education for:
   • Parliamentarians,
   • Constituents and communities, and especially young people and those most vulnerable and
   • School children, especially by ensuring that HIV education is included in the national curriculum.

(2) Establish a select/standing committee on HIV/AIDS and receive a report from the committee on at least an annual basis.

(3) Ensure that governments implement a multisectoral approach to combat the negative effect on the sustainability of economic and social development.

(4) Act as resource mobilizers.

(5) Address gender issues including:
   • Gender-based violence,
   • Empowerment of women,
   • Human trafficking and exploitation and
   • The role of men and boys.

(6) Monitor and evaluate the government’s role in capacity building, especially:
   • Improving the public health service and, particularly, the primary healthcare sector,
   • Providing safe blood transfusion, voluntary counselling and testing, lifelong antiretroviral therapies and the management of opportunistic infections and
   • Investing in human capital and encouraging the retention
of trained professionals, especially in healthcare.

(7) Ensure adequate social security, social services and education for AIDS orphans and people living with AIDS.

(8) Ensure that a legal framework is in place to protect human rights, especially those infected and affected by HIV, and that international conventions are both ratified and complied with.

(9) Encourage the integration of HIV-related services into existing infrastructures.

(10) Encourage research work on HIV/AIDS and especially its human capital, social and economic impacts.

(11) Work with international agencies, including the World Bank and the Parliamentary Network on the World Bank, to ensure greater transparency and effectiveness of operation.

(12) Legislate for rights-based and gender-sensitive non-discrimination and equality policies and review existing legislation, particularly with regard to AIDS orphans, employment, family property rights, gender-based violence, sexuality and HIV in the workplace.

(13) Put in place audit and oversight mechanisms to ensure that governments spend efficiently all the money they commit.

(14) Audit and debate the government's support for the Millennium Development Goals.

(15) Encourage parliamentary committees to liaise effectively with local government, charities, non-governmental organizations, community-based organizations, faith groups and other bodies.

(16) Ensure that care for both parents is provided as part of the response to mother-to-child transmission.

(17) Ensure that the rights of HIV-positive people undergoing clinical trials are protected.

(18) Legislate against the malicious transmission of HIV.
(19) Promote the provision of medicines that are either free at the point of delivery or affordable; and

(20) Encourage the establishment of formal training programmes in infectious diseases, especially HIV medicine, particularly for those working in public healthcare.

**WHAT SHOULD THE CPA DO?**

(1) Establish a Working Group, from Members of this Study Group, to address the progress of Parliamentarians in the fight against HIV/AIDS and to report in 12 months and, in particular:

- To look at action taken by Parliaments and governments on the above recommendations,
- To update the report of the Study Group and
- To elicit responses from governments.

(2) Devote a workshop at the 51st Commonwealth Parliamentary Conference in Fiji Islands in 2005 to “The Role of Parliamentarians in Combating the HIV/AIDS Pandemic”.

(3) Request that Branches send the Members of this Study Group as part of their delegations to the Commonwealth Parliamentary Conference in Fiji to ensure continuity of action.

(4) Request CPA representation at the International HIV Conference in Canada in 2006.

(5) Exchange resources amongst Members of Parliament and parliamentary staff interested in HIV/AIDS to improve skills and knowledge.

(6) Make HIV/AIDS a visible issue.

(7) Survey Branches on what is being done to combat HIV/AIDS within Commonwealth Parliaments.

(8) Provide examples of draft questions and motions on HIV/AIDS.

(9) Facilitate the creation of a creed of best practice for com-
bating HIV/AIDS and countering stigmatization and discrimi-
nation.

(10) Ensure that the specific challenges and needs of small
and vulnerable states are addressed.

(11) Work with existing and potential partners, such as the
World Bank and the Parliamentary Network on the World
Bank, to build the capacity of the Association to support the
work of Parliamentarians in combating HIV/AIDS and fighting
the associated stigmatization and discrimination; and

(12) Develop a programme of work that draws connections
between HIV/AIDS and the Association’s support for pover-
ty-reduction projects.

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ACRONYMS
AIDS  Acquired Immune Deficiency Syndrome
ART   Antiretroviral therapy
ARV   Antiretroviral
CPA   Commonwealth Parliamentary Association
HIV   Human Immunodeficiency Virus
MSM   Men having sex with men
MTCT  Mother-to-child transmission
NACO  National AIDS Control Organization (India)
PLWHA People Living With HIV/AIDS
UNAIDS Joint United Nations Programme on HIV/AIDS
UNDP  United Nations Development Programme
UNIFEM United Nations Development Fund for Women
VCT   Voluntary Counselling and Testing
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