

### Sexual and reproductive health and rights of PLHIV

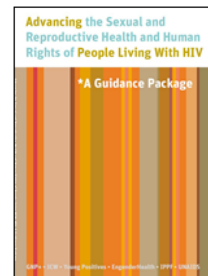
People living with HIV have the right to healthy, satisfying sex lives, and need laws to protect this right and appropriate services to ensure their sexual and reproductive health. Decision-makers and service providers must recognise that people living with HIV enter into relationships, have sex and have children. Ensuring that they can do these things safely is key to maintaining their own health, and that of their partners and families.

### About the 'Guidance Package'

Based on input from networks of people with HIV worldwide, *Advancing the Sexual and Reproductive Health and Human Rights of People Living with HIV* (the 'Guidance Package') was developed by GNP+ with its global partners. The Guidance Package explains what needs to be done by global stakeholders in the areas of advocacy, health systems, policy making, and law to support and advance the issues of sexual and reproductive health and rights (SRHR) - and why they matter.

The Guidance Package has been further elaborated into five policy briefings on key populations living with HIV and advancing SRHR for PLHIV: people who use drugs, sex workers, men who have sex with men, prisoners and migrants. These set of policy briefings take the Guidance Package to a more in-depth level, taking the 'lens' of a population of people living with HIV and articulating specific and concrete advocacy and programme recommendations that meet the needs of those key populations of PLHIV.

These 5 policy briefings were elaborated with the support of WHO and are available at: <http://www.gnpplus.net/en/programmes/sexual-and-reproductive-health-and-human-rights/policy-guidance/1532-policy-briefings-key-populations-living-with-hiv>



Networks of people living with HIV work with the Guidance Package and the five Policy Briefings to further deconstruct the sexual and reproductive health and rights of people living with HIV within their countries in order to inform the development of SRHR and HIV programmes and policies.

### Defining 'key populations'

GNP+ uses the term key populations to refer to groups of individuals particularly affected by HIV whose vulnerability and risk to HIV converge and are higher than the general population. While often in HIV-related policy and programmatic documents these groups are referred to as 'key populations' without specifying who these populations are, GNP+ explicitly refers to at least the following groups: people living with HIV, sex workers, men who have sex with men, transgender people, people who use drugs, women, children and young people. The term key populations is used instead of other terms often used (e.g., vulnerable groups, most at risk populations) to emphasize the key role that these populations play in the development and implementation of HIV-related responses, and that they are not mere recipients of responses targeted at them. The set of key populations may vary per country based on the local context and may include other populations such as prisoners, migrants and displaced people.

### What are the Objectives of the Guidance Package?

The specific objectives of the studies are to:

- Develop an evidence-gathering tool (e.g. questionnaire, survey, etc.) informed by people living with HIV

and in particular key populations living with HIV;

- Build the capacity of networks of people living with HIV and their partners to conduct operations research on SRHR;
- Document the lived SRHR experiences of key populations of people living with HIV to inform the development and implementation of policies and programmes.

## Who implements the Guidance Package?

Networks of people living with HIV build partnerships with organizations working with specific key populations to undertake the studies with technical support from GNP+.

## The Guidance Package Methodology

National networks of people living with HIV develop social science research instruments and use them to gather data on the sexual and reproductive health (SRH) needs and experiences of key populations living with HIV in their countries, as determined key to the national context. They produce country-level reports, which document the barriers and deficits that keep particular groups from being able to access essential information and services to meet their SRHR needs and provide recommendations for the development and implementation of rights-based programmes and policies.

## Evidence-based advocacy

In many countries, the unique and neglected needs of various sub-groups are becoming increasingly apparent as their quality of life is compromised by lack of the services they need.

The process of supporting national networks of people living with HIV in capturing, recording and publishing these data serves two purposes. It builds a solid evidence base about *why* removal of these barriers is critical and *how* national health care systems can be strengthened in specific ways to achieve this. This evidence base is needed to inform national-level priority setting and to mobilise advocacy to press governments and policy-makers to meet their commitments in this area.

This particular process also serves to highlight the unique value of using a bottom-up approach to analysing the costs incurred by the weakness of these health care systems. It also demonstrates the essential role that civil society, and specifically networks of people living with HIV, can play in helping governments to plan, monitor and evaluate the effectiveness of such services as they are improved.

## Further Support

It is recommended to allow at least 6 months for implementation. For more information about the Guidance Package visit: <http://gnpplus.net/en/programmes/sexual-and-reproductive-health-and-human-rights>.

For information on the HIV Leadership through Accountability programme visit [www.hivleadership.org](http://www.hivleadership.org).

