

## About the GIPA principle

The Greater Involvement of People Living with HIV (GIPA) is a principle that aims to realise the rights and responsibilities of people living with HIV to self-determination and meaningful participation in decision-making processes that affect their lives. By promoting and strengthening the involvement of people living with HIV (PLHIV), the application of the GIPA principle enhances the quality and effectiveness of HIV responses.

## About the GIPA Report Card

The GIPA Report Card is a means of generating evidence about the application of the GIPA principle in-country based on the views and experiences of people living with HIV. The evidence will contribute to monitoring and evaluating governments' and organisations' application of the GIPA principle, particularly in light of the 2001 United Nations General Assembly's Special Session on HIV and the Declaration of Commitment.

The GIPA Report Card is an advocacy tool, which aims to increase and improve the programmatic, policy and funding actions taken to realise the greater involvement of people living with HIV in a country's HIV response.

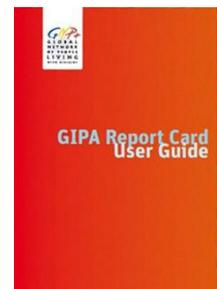
The need for developing a GIPA Report Card was identified at a PLHIV Think Tank Meeting in 2005. The process for developing this GIPA Report Card (2006-2007) involved a literature review; and telephone interviews with male and female PLHIV from all regions, who are either working in organizations and networks of PLHIV, or for nongovernmental organizations, donor agencies or United Nations agencies, or who have previously worked extensively on the application of the GIPA principle. Subsequently, the draft GIPA Report Card was developed and has been piloted in 2008 in four countries: Kenya, India, Lesotho, and Trinidad and Tobago. Recommendations from the implementation of the GIPA Report Card in the four countries have informed an updated version of the GIPA Report Card and its accompanying tools. The GIPA Report Card will continue to be adapted and improved over time based on experiences of implementing of the tool in-country.

## GIPA Report Card Objectives

The objectives of the GIPA Report Card are to

- Provide information on the current level of application of the GIPA principle, which will serve as a baseline against which future application of the GIPA principle can be measured;
- Hold governments, NGOs, United Nations agencies, donors, organizations of PLHIV and other stakeholders accountable to their commitments relating to the application of the GIPA principle;
- Increase and improve the meaningful participation of PLHIV in different sectors within the broader national response to the HIV epidemic in a country;
- Assist in developing indicators to monitor and evaluate the quality and impact of PLHIV engagement; and
- Provide follow-up recommendations to enhance stakeholders' (governments, NGOs, United Nations agencies, donors, organizations of PLHIV) identification of opportunities and entry points for the application of the GIPA principle within their organization or institutions and in their policies and programmes, including cost estimates.

The GIPA Report Card is to be owned, developed and implemented by PLHIV through a bottom-up process, including broad and diverse consultation.



## Who implements the GIPA Report Card?

The GIPA Report Card is a prime example of the application of the GIPA principle. The tool was developed by consultants living with HIV and is managed by the Global Network of People Living with HIV (GNP+) with support from UNAIDS. The tool is being implemented by people living with HIV networks in-country.

## GIPA Report Card Scope of Evidence

It is envisaged that ultimately the GIPA Report Card questionnaire will cover a broad range of the issues relating to the various stakeholders: governments, NGOs, multilaterals, United Nations agencies, organizations of PLHIV and other stakeholders. It is proposed that the GIPA Report Card addresses the following three levels:

1. **Macro/Institutional level** (government policy level such as UNGASS follow-up processes and programmes, and institutions such as CCMs): There must be laws and policies for protecting PLHIV who become involved, including access to affordable health care such as life prolonging medication should the need arise, and capacity building as required.
2. **Meso/Organizational level** (organizational level, focusing on government ministries, NGOs and organizations of people living with HIV): Pre-conditions for safe involvement include: sensitivity training for colleagues; information about the opportunities for the application of the GIPA principle; appropriate training for the tasks to be undertaken and optimal use of existing skills.
3. **Micro/Individual level** (barriers and/or facilitators to involvement): It has to be a personal initiative to be involved, and should be accompanied by a safe space for disclosure, counselling and support, clarification on why one is getting involved and strategies to deal with stigma, discrimination and burnout.

## Further Support

The GIPA Report Card takes up to 6 months to implement. For more information on the GIPA Report Card visit <http://gnpplus.net/en/programmes/empowerment/gipa-report-card>.

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