

A photograph of an elderly man and a woman in a rural setting. The man, on the left, is wearing a light-colored sweater and is seated on a bicycle. The woman, on the right, is wearing a white polo shirt and is smiling while holding a mobile phone. The background shows a simple building and some foliage.

Addressing the HIV and AIDS Crisis

**TRÓCAIRE'S POLICY
AND STRATEGY
2007-2012**

TRÓCAIRE
Working for a Just World

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List of Acronyms

AIDS	Acquired Immune Deficiency Syndrome
CCM	Country Co-ordinating Mechanism
GBV	Gender Based Violence
HIV	Human Immunodeficiency Virus
IMF	International Monetary Fund
TB	Tuberculosis
TRIPS	Trade Related Aspects of Intellectual Property Rights
UNAIDS	The Joint United Nations Programme on HIV/AIDS
UNGASS	UN General Assembly Special Session
WHO	World Health Organisation

Foreword

Mobilising for Justice, Trócaire's Strategic Framework 2006-2016, charts our development agenda for the next ten years. In it, Trócaire identifies core areas that we will work on over the next decade to ensure that we continue to respond to important and urgent challenges to development.

The AIDS epidemic is undoubtedly one such challenge; the economic and societal toll of the epidemic is enormous and will span generations, causing untold suffering for millions of women, men and children living in extremely difficult circumstances. In that context, HIV remains firmly on Trócaire's agenda as one of six organisational priorities in the new Strategic Framework.

The commitments and values in *Mobilising for Justice* are reflected in the Trócaire HIV and AIDS Policy and Strategy. As an organisation founded on the principles of Catholic Social Teaching, we are absolutely committed to respond to the injustices and inequalities that underpin the AIDS epidemic and address the consequences of the epidemic on poor people's lives.

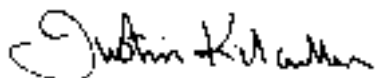
The need to be courageous, to ensure that justice is at the forefront of our response, and to instil the values of solidarity, participation and persistence are inherent to Trócaire's HIV and AIDS Policy and Strategy. We also recognise the huge toll that HIV places on women and girls, particularly in sub-Saharan Africa and we commit to deepen our response to gender inequality throughout our HIV programme.

I am personally committed to ensure that we reflect on the effects of HIV across the organisation and that we respond to the implications of HIV and AIDS in all our programme themes: Livelihood Security, Environmental Justice, Governance and Human Rights, Emergency Preparedness and Response, Gender Equality, and the HIV response. We will also work alongside partners and other stakeholders to effectively reduce the vulnerability, marginalisation and suffering of those who

are living with and most affected by HIV in a way that best supports national and global efforts to address the crisis.

Our approach mirrors the words of John Paul II during a visit to Tanzania in 1990: *'Only a response that takes into account both the medical aspect of the illness as well as the human, cultural, ethical and religious dimensions of life can offer complete solidarity to its victims and raise the hope that the epidemic can be controlled and turned back.'*

We believe that we must respond to the complex nature of the epidemic and address considerable injustices that fuel the epidemic if we are to truly tackle this human development challenge. If we fail to do so, we will ultimately fail to address the rights of the most vulnerable and marginalised in society.

A handwritten signature in black ink that reads "Justin Kilcullen". The signature is written in a cursive, flowing style.

Justin Kilcullen
Director

Executive Summary

Trócaire has identified HIV and AIDS as one of six organisational priorities in its 2006-2016 Strategic Framework *Mobilising for Justice*. This policy and strategy details the focus of the response to HIV and AIDS, drawing on experience in programme countries and international best practice. It serves as a guide for Trócaire's Council, staff and partners and will shape our organisational and programme response over the next five years. The document was developed over a twelve-month period in consultation with staff and partners.

The Policy and Strategy is informed by the social teaching of the Catholic Church and builds on organisational values of Solidarity, Participation, Persistence, Courage and Accountability. It recognises that HIV strikes at the core of human development and that it demands a sustained and comprehensive response to address the complex nature of the epidemic.

Trócaire's approach will be to place HIV at the core of the development and rights agenda. Organisationally the response to HIV and AIDS will be strengthened through cross-organisational programme teams and through alliances with others. There is an expressed commitment to link policy and programming, to promote good practice and innovation, to support evidence-based interventions and to base our responses on solid research. Partnership remains core to our approach and is the principal methodology for delivering all development aid. We commit to working in partnership and to building the capacity of civil society to mobilise for justice on issues related to HIV and AIDS.

Specifically we will adopt a two-pronged approach to HIV and AIDS; mainstreaming and focused HIV and AIDS programming. While mainstreaming will be given priority focus, dedicated HIV programmes will also be delivered in a number of countries and regions where we have the capacity to engage on a significant scale.

At a strategy level, Trócaire will provide leadership in our response to HIV. We will promote personal and collective responsibility to ensure that we protect staff and remain effective and relevant in a changing global environment. We will analyse and respond to HIV and AIDS in all six organisational programmes –Governance and Human Rights, Building Sustainable Livelihoods, Preparing for and Responding to Emergencies, Addressing the HIV and AIDS Crisis, Promoting Gender Equality and Demanding Environmental Justice. This will be done in a systematic and phased manner with an initial focus on humanitarian responses and livelihood security. Trócaire will also respond to HIV as a dedicated area of interest. We will support HIV programmes that are integrated into the broader response and learn from and contribute to good practice. In partnership with civil society we will support integrated approaches to prevention, care and support, and programmes that address the rights of people living with and affected by HIV and AIDS. The interconnectedness of gender and HIV will be a key focus of our analysis and response. Finally, Trócaire will address HIV in development education, campaigns and communications work and will engage with stakeholders through the Catholic Church to promote education, understanding and action on these issues.

The HIV Policy and Strategy will be accompanied by an action plan. It will be monitored by a cross-organisational team and by the Senior Leadership Team in Trócaire. A review will be conducted, at least every three years, to ensure compliance with the policy and strategies outlined in this document and to ensure flexibility and responsiveness to a rapidly changing global environment.

Section 1: Policy

1 The Context for Responding to HIV and AIDS

1.1 Overview

2006 marked a quarter century since the first cases of AIDS were reported. In the intervening years, HIV has infected 65 million people and 25 million have died of AIDS-related illnesses. Countless millions more have been affected by parallel epidemics of poverty, stigma and discrimination. We are, according to UNAIDS, at a defining moment in the response, having the will, means and knowledge to make real headway in reversing the epidemic¹. Global funding has increased exponentially from less than US\$300 million in 1996 to an estimated \$10 billion for 2007², and access to treatment has rapidly expanded in low and middle-income countries to 2 million by the end of December 2006³. Many evidence-based interventions and tools are available to stem the flow of the epidemic and treat those in need. Yet these advances represent little progress in an epidemic that claims 5,700 lives every day⁴.

The clear message from UNAIDS is that we need a long-term sustained response to address the impact of the disease and the fundamental drivers of the pandemic. The response to AIDS must be exceptional at a political level but at the core of the development agenda⁵.

¹ UNAIDS. Report of the Global AIDS Epidemic, 2006

² UNAIDS, Financial Resources required to Achieve Universal Access to Prevention, Treatment, Care and Support, 2007

³ WHO, Towards Universal Access, Progress Report, April 2007

⁴ UNAIDS, Epidemic Update, 2007

⁵ Peter Piot, International AIDS Conference, Toronto, July 2006

The AIDS pandemic in 2007 is diverse, characterised by growing epidemics in central Asia and the former Soviet Union, by ongoing spread of the generalised epidemic of Southern Africa and by stabilising or declining trends in a number of countries in sub-Saharan Africa, Asia and Latin America. Sub-Saharan Africa still accounts for over two-thirds of the global toll and nearly 90% of children and 60% of women living with HIV⁶.

1.2 Key Global Issues

Nine Global Issues are highlighted in the contextual discussion paper accompanying the strategy⁷. These inform Trócaire's response and are considered alongside Trócaire's current expertise, principles, approach and comparative advantage in order to determine the strategic focus over the coming five years.

1.2.1 Political Commitment and Financial Resources

While there have been great strides in the political engagement and financial resources for AIDS, there is growing concern that rhetoric and resources are not always matched and that political sensitivities and ideologies are getting in the way of evidence-based interventions. Despite a significant increase in funding, there is limited measurable impact at beneficiary level. Only 28% of the estimated 7.1 million people in need of antiretroviral treatment received it in 2007⁸ and to achieve universal access by 2010, the annual resource requirement will need to rise to between US\$32-51 billion⁹. There is the need for leadership, accountability and sustained political commitment to meet the promises made at UN General Assembly Special Session (UNGASS) on HIV and AIDS and at the G8 in Gleneagles and to deliver measurable change at beneficiary level.

1.2.2 Prevention

It is accepted that there is limited cause for celebration in over two decades of prevention programmes. In 2007, it is estimated that only 11% of women received treatment to prevent mother to child transmission of HIV and that HIV prevention services only reach one in ten of people most at risk¹⁰.

⁶ UNAIDS, Epidemic Update, 2007

⁷ Contextual Analysis, HIV Policy Background Paper (statistics updated for Chapter 1 as necessary), 2006

⁸ WHO, Towards Universal Access, Progress Report, April 2007

⁹ Ibid

¹⁰ UNAIDS website

In spite of a few pockets of success and much evidence on what works, global figures continue to rise. Experience indicates that prevention must be evidence-based, comprehensive, rooted in human rights, locally appropriate and integrated with care, support and treatment to have measurable impact.

1.2.3 Stigma and Discrimination

The fear of violence, stigma and discrimination is undermining efforts to reach universal access and is considered to be one of the most difficult obstacles to effective HIV prevention and treatment. Stigmatisation, discrimination and denial of rights are enormous barriers to efforts to reverse and curtail the pandemic. Twenty-five years into the pandemic, activists are still calling for the application of a human rights framework for HIV and appropriate legislation to prevent discrimination and to promote and protect the rights of vulnerable populations.

1.2.4 The Feminisation of the Epidemic

Women and girls continue to suffer disproportionately from HIV on a physiological, social, cultural and economic basis. In 2007, women account for half of all cases of HIV globally and 61% of people living with HIV in sub-Saharan Africa. The feminisation of the epidemic is also expanding in Asia, Eastern Europe and Latin America¹¹. The trend is symptomatic of the failure to firmly embed gender responses in women's social, economic and reproductive health rights and to address the cultural and social barriers to effective prevention programmes for women.

1.2.5 Orphans and Vulnerable Children

The third decade of the epidemic is that of the orphaned child. In 2007, 2.5 million children live with HIV worldwide, more than 15 million are orphaned; 11.4 million in sub-Saharan Africa alone. Children under fifteen account for over one in six AIDS-related deaths worldwide and one in six new HIV infections. The vast majority of infections in children are preventable through affordable treatment for the prevention of mother to child transmission of HIV and safe infant feeding practices. The neglect of children infected, orphaned and vulnerable as a result of HIV and AIDS will have serious long-term impacts on the social and economic well being of countries highly affected by HIV.

¹¹ UNAIDS, Epidemic Update, 2007

1.2.6 Treatment

Treatment access is one of the few areas where there has been significant progress in the last five years. Despite failing to reach the WHO 3 by 5 target (3 million on therapy by the end of 2005), 2 million people in developing countries are now accessing treatment. Yet this still constitutes just 28% of the treatment needs in developing countries¹². Many barriers remain at political, economic, cultural and practical levels to the achievement of universal access including health infrastructure, logistics, nutritional levels, human resources and cost of second line drugs. The latter is related to the limited capacity to exploit the flexibilities in the TRIPS agreement and to resist pressure to engage in stringent bilateral trade agreements that go beyond TRIPS.

1.2.7 AIDS and Poverty

The Human Development Report, 2005 concluded that the HIV pandemic had inflicted the single greatest reversal in human development. At the same time, global economic structures and practices have facilitated and in some cases directly contributed to the dominance of the AIDS epidemic. World Bank and IMF structural adjustment policies, the imposition of user fees and the positioning of economic stability ahead of social need and human rights have had detrimental effects on the health and wellbeing of the poor¹³. The brain drain from countries highly affected by the pandemic is crippling efforts further and has been identified as a serious debilitating factor in the rolling-out of treatment and care.

Internationally, there is a call for a move from crisis management to sustained strategic responses to HIV, putting the issue firmly at the core of the development agenda; mainstreaming HIV and jointly addressing the structural and operational issues that hinder the response in a sustained manner.

1.2.8 Civil Society Participation

The UNGASS declaration acknowledges that the role of civil society *'has been critical in catalysing global, regional and national action and their full involvement and participation in the design, planning implementation and evaluation of programmes is crucial to the development of effective responses to the HIV/AIDS epidemic.'*¹⁴ Initiatives such as the country co-ordinating mechanism (CCM) for the Global Fund for AIDS, TB and Malaria, co-ordinated district AIDS plans and

¹² WHO Towards Universal Access, Progress Report, April 2007

¹³ MJ Kelly SJ. HIV and AIDS: A Justice Perspective, 2006

¹⁴ UNGASS Declaration of Commitment, para. 33, 2001

national preparatory meetings to review the UNGASS commitments have gone some way to ensure, in theory at least, greater and more co-ordinated participation of civil society in the response.

At a national level, improved integration and collaboration of public, private and civil society actors has been promoted through the principles of the 'Three Ones' – One agreed HIV and AIDS Framework that provides the basis for co-ordinating the work of all parties; One National AIDS Co-ordinating Authority with a broad multisectoral authority; and One agreed country-level Monitoring and Evaluation System. However, significant capacity and structural gaps need to be overcome to facilitate full, accountable and active participation of civil society in national mechanisms.

1.2.9 The Catholic Church

The contribution of faith-based organisations to HIV and AIDS service provision is significant. It is estimated that Catholic organisations provide over a quarter of health services related to HIV in resource-poor settings. Faith-based responses, inspired by Catholic Social Teaching, are rooted in dignity and respect for human life and human rights. The strength of the Church is in its response to HIV from a social and economic perspective, recognising deep-rooted causes of poverty and inequality.

There is significant diversity of opinion and response to the HIV epidemic within the Catholic Church. The promotion of a '*just sexuality*' that upholds a do-no-harm principle in sexual encounters and an equality principle that attaches as much value to the other person as oneself is promoted as a just response by some within the Church¹⁵. This is rooted in a belief that social and economic injustices fundamentally affect an individual's sexual health. Others believe that adherence to Church teaching of abstinence outside of marriage and fidelity within marriage is the only appropriate strategy.

The Catholic Church has a key role to play in dismantling unjust structures in which poverty, gender inequality, stigma and discrimination and exploitive global practices are overcome. In the third decade of AIDS, there are opportunities for the Church to take a strong leadership role internationally and locally; to speak out on HIV and AIDS from a rights and justice perspective, to challenge stigma and discrimination, to promote gender equality and to address HIV within its own congregations.

¹⁵ Roger Burggraevae cited in MJ Kelly SJ. HIV and AIDS: a Justice Perspective, 2006

2 Rationale, Principles and Added Value

2.1 Rationale for Trócaire's Engagement on HIV and AIDS

‘Trócaire envisages a just and peaceful world where people’s dignity is ensured and rights are respected; where basic needs are met and resources are shared equitably and in a sustainable manner; where people have control over their own lives and those in power act in the common good’

Trócaire’s vision is centred on justice, dignity and rights and is informed by the social teaching of the Catholic Church. We give expression to this vision through long-term development and emergency work overseas and by mobilising people for justice in Ireland and abroad.

Trócaire works in solidarity with the most vulnerable and marginalised members of society to bring about social, economic, cultural and political justice. We will show courage and persistence in our struggle for justice, speaking out fearlessly and encouraging innovation in our approaches to development.

HIV and AIDS strike at the core of human development, eroding dignity and undermining basic human rights. The scale and scope of the epidemic demands a sustained and comprehensive response that recognises the complex nature of vulnerability, risk and impact associated with HIV and AIDS. It also situates that response within our core values outlined in the 2006-2016 Strategic Plan¹⁶.

We believe that the responses to HIV must address structural inequalities that place those already on the margins at increased risk of poverty and illness. We also believe that given the scale of the epidemic and the impact on the most

vulnerable members of society, we have an obligation to support civil society groups responding directly to HIV and AIDS, particularly in areas highly affected by the pandemic.

2.2 Key Principles

We believe in respect for human rights and in the dignity of the individual regardless of age, sex, ethnicity or sexual orientation. We will work with those of all creeds and none.

We recognise the complex personal and societal factors that influence the behaviours of individuals and communities¹⁷ and are committed to effective and inclusive HIV and AIDS responses that take cognisance of this reality.

We respect each person's right to participate, recognising that the right to participate is the entry point for the realisation of all other forms of rights. Central to this is the right of people living with and affected by HIV to participate meaningfully in decision-making processes.

We believe in the importance of addressing gender inequality as an important driver of the epidemic and believe that we must strive to transform gender roles that increase vulnerability and the impact of HIV and AIDS on women, men and children.

2.3 Comparative Advantage

2.3.1 Being an agency of the Catholic Church

Trócaire's connection with the Catholic Church in Ireland and abroad, its partnership with local churches and its links with Catholic networks afford it considerable outreach. This access extends to people in areas highly affected by the pandemic and to Church structures, leaders and communities in Ireland and abroad. The influence of the Catholic Church in Ireland is still considerable and is strengthened by the increasing emphasis on the participation of the lay faithful in social action¹⁸.

¹⁷ Christian Perspectives on Development Issues, The Reality of HIV/AIDS, Trocaire/Veritas/Cafod, 2003

¹⁸ Trócaire Strategic Plan 2006-2016, p.11

2.3.2 Making Local/Global Linkages in Advocacy and Policy

Trócaire is well placed to highlight and address the root causes of HIV using our expertise in programming, advocacy, policy and campaigns to bring the local to the national and the international. Our linkages with networks, partners and supporters at multiple levels enhance our ability to influence policy and effect change.

2.3.3 Development Education and Campaigns

Trócaire has a unique strength in development education in Ireland, including strong links with the Curriculum Development Unit and dynamic and participatory programmes within schools around the country. There is a growing commitment to our campaigning work, which will see an increase in our ability to mobilise citizens through popular public campaigning and more targeted subtle campaigning.

2.3.4 Partnership Model

The long-term commitment to partnership is a key principle of Trócaire's strategy and defines the organisation's engagement with civil society. The partnership approach gives legitimacy to our work at all levels. Giving voice to civil society and building the capacity of civil society to participate as active citizens is central to this principle.

2.4 Niche

We understand our niche as our unique contribution to the larger response to HIV and AIDS. It does not define the sum total of our response but identifies where we are likely to have a distinctive and significant influence.

Trócaire's particular niche is defined as: Working as a Church agency to address Rights and Justice Issues Related to HIV and AIDS.

Within the Church we recognise the diversity of opinion and action on HIV. While recognising the challenges that this poses, Trócaire will seek to promote positive, responsible and just responses to HIV in alliance with Church networks¹⁹, through partners and in interfaith work. The response to our niche will be guided by analysis and research and will aim to strengthen the overall effectiveness of our programme response.

¹⁹ Including networks such as the CI-chaired Catholic HIV and AIDS Network (CHAN), the Ecumenical Advocacy Alliance and Church and inter-faith networks in programme countries

3 Trócaire's Policy Commitments on HIV and AIDS

Policy Goal

To position HIV and AIDS at the core of the development and rights agenda and to support effective responses to HIV and AIDS that address the causes and consequences of HIV for poor and marginalised communities

3.1 Our Commitment and Approach

Trócaire will position HIV and AIDS at the core of the development and rights agenda. Our approach will also be informed by the broader organisational approach articulated in Mobilising for Justice, Trócaire's Strategic Framework, 2006-2016.

3.1.1 Organisational Approach

Trócaire will **build internal capacity** on HIV and AIDS to ensure that HIV is reflected in all aspects of our policy and programme work, at home and overseas. We will respond at multiple levels by adopting strategies at local, national and global levels. Alliances with others, individually and through networks, will improve the effectiveness and outreach of our response.

For Trócaire, **partnership** is a core value and the principal methodology for delivering development aid²⁰. Trócaire is committed to initiatives that allow individuals and communities to be authors of their own development and will build the capacity of civil society to mobilise for justice and engage as active citizens in the response.

²⁰ Trócaire, Civil Society Policy, July 2006

Trócaire has a responsibility to our beneficiaries and our donors to respond in a way that achieves maximum impact. We commit to learning from the considerable lessons to date by promoting **good practice and innovation**; supporting evidence-based interventions; and basing our responses on solid research.

3.1.2 Specific Approach to HIV and AIDS work

The approach to HIV and AIDS will be **two-pronged**, encompassing a mainstreaming and a specific response to the epidemic. While a commitment is given to mainstream HIV as a priority, we will also support partners that are directly responding to HIV in a number of countries²¹.

Trócaire believes that the response to HIV and AIDS must be **comprehensive** to decrease vulnerability, reduce risk and mitigate impact. We support the principles of the 'Three Ones'²² and believe that programmes are most effective when they are **integrated** into co-ordinated responses at local, regional and national levels and are supporting National Policies and Strategies.

3.2 Priority Areas for HIV and AIDS

3.2.1 Mainstreaming

As an organisation, Trócaire will provide leadership on HIV and AIDS and will promote **personal and collective responsibility** in the response to HIV. This is motivated by a responsibility to provide a supportive working environment for staff and their families living with and affected by HIV and AIDS and to ensure that we remain relevant and responsive to development challenges in a global environment affected by the AIDS epidemic.

Trócaire will specifically address the **poverty and rights dimension** of the epidemic and from a development perspective analysing and responding to HIV in all six organisational programmes – Building Sustainable Livelihoods; Human Rights and Governance; Preparing for and Responding to Emergencies; Addressing the HIV and AIDS Crisis; Promoting Gender Equality and Demanding Environmental Justice.

²¹ Based on agreed criteria

²² One HIV action framework, One national AIDS co-ordinating authority and One agreed country-level monitoring and evaluation framework

3.2.2 Specific HIV and AIDS Interventions

In delivering a specific response to the epidemic, Trócaire will prioritise **integrated approaches** to prevention, care and support and rights-based issues related to HIV and AIDS. Trócaire will aim to support HIV projects and programmes that are integrated into broader responses and support national plans.

3.2.3 HIV in Irish-based Justice Work

Trócaire will use its position as an agency of the Catholic Church with broad outreach and networks in Ireland and abroad to ensure that the **justice dimension of HIV** is communicated through our programme work and in development education, campaigns and policy initiative. As an agency of the Catholic Church, Trócaire's work on HIV is in line with the moral teaching of the Church²³.

3.2.4 Gender Equality and HIV and AIDS

Trócaire explicitly recognises the interconnectedness of **Gender Equality and HIV** and is committed to delivering a coherent response to gender and HIV at an organisational level and in our programmes.

Definitions

Mainstreaming a Response: Analysing and responding to HIV and AIDS throughout the organisation including in policy, programming and the workplace.

Integrated Response: Linking essential components of the response (prevention, care and support) to ensure good practice, and working in a co-ordinated manner with local, national and global structures.

²³ Trócaire's policy on condoms prohibits the direct supply or promotion of condoms but supports the provision of full, unbiased and accurate information on all means for the prevention of HIV infection

Section 2: Strategy

4 Strategies for responding to HIV and AIDS

Overall Strategic Objective:

To reduce vulnerability to HIV and to mitigate the impact of HIV and AIDS on poor and marginalized communities

4.1 Mainstreaming

Specific Objective 1: To improve the responsiveness to HIV and to mitigate the impact of HIV on organisations and programmes

Outcome 1: HIV is mainstreamed in all organisational responses, programmes and policies

Strategies

4.1.1 At an organisational level:

Trócaire will continue to drive HIV **mainstreaming as an organisational priority** with trustees, management and staff by raising staff consciousness, promoting personal and collective responsibility in the response to HIV and providing a supportive working environment for staff and their families living with and affected by HIV and AIDS.

Trócaire will invest **adequate resources**, human and financial, to mainstream HIV in the workplace, in programmes and policies and in education, campaigns and fundraising initiatives.

Trócaire will ensure there are adequate **linkages and learning** of HIV and gender mainstreaming approaches and will deliver strategies that acknowledge the synergy between HIV and Gender Equality.

4.1.2 At a programme level:

Trócaire will mainstream HIV **in all six organisational programmes** – Building Sustainable Livelihoods; Governance and Human Rights; Preparing and Responding to Emergencies; Addressing the HIV and AIDS Crisis; Promoting Gender Equality and Demanding Environmental Justice. Given the breadth of our work, this will be conducted on a phased basis with an initial focus on **sustainable livelihoods and emergency preparedness and response** in the initial phase of the plan.

4.1.3 At partner level:

Trócaire commits to a **sustained and systematic approach** to HIV mainstreaming that builds on experiences to date²⁴ and includes dedicated support, accompaniment and a deep level of engagement with partners. We recognise that responses must be context-specific and will respond appropriately in high and low prevalence environments.

4.1.4 Globally:

Trócaire commits to **mainstreaming in all priority geographical areas** and at all levels (organisational, programme and partner levels), but recognises that this must be done on a phased and controlled basis to ensure quality and to demonstrate impact.

Trócaire will raise **gender consciousness** and build **gender expertise** in the organisation as a key strategic area of interest. This will be extended to HIV programme areas, working alongside partners to conduct a **gender analysis and response** at all stages of policy and programming. Such an analysis may result in targeting women, men or both and will look at the key role of men in prevention and care services. It will also explicitly address the links between HIV and gender-based violence in long-term development and humanitarian responses.

As part of the mainstreaming process, Trócaire will **review, document and learn** from experiences over the course of the strategic plan and will publish and share lessons internally and externally.

²⁴ Stepping Stones in Central Africa, Mainstreaming Lessons Learned in Mozambique, Gender and Rights as an entry point in Central America

4.2 Specific HIV and AIDS Interventions

Specific Objective 2: To increase local communities' access and utilisation of effective programmes that are nationally appropriate and protect and promote their rights

Outcome 2: Vulnerable communities have access to integrated quality services and challenge HIV and AIDS-related injustices and inequalities

Strategies

4.2.1 Trócaire will concentrate our HIV-focused interventions in **a number of priority countries and regions** where there is capacity to engage on a significant scale at different levels and where there are opportunities for networking, learning and advocacy at an organisational programme level. Isolated small-scale country interventions will be phased out.

4.2.2 Trócaire's outreach extends from countries highly affected by HIV to low prevalence countries where the epidemic is contained within highly vulnerable groups. The focus of our response will vary from region to region but will be **context specific** and targeted at the most vulnerable members of society.

4.2.3 Trócaire will focus work on two strategic areas – **integrated approaches and rights-based issues** related to HIV and AIDS. We will strive to ensure that HIV partners and programmes support National AIDS plans and structures²⁵, are learning from or contributing to good practice approaches and are co-ordinating their work with other stakeholders.

4.2.4 Trócaire is committed to building the capacity of partners to participate meaningfully in district or national level responses in line with national AIDS policies and plans. We will incorporate **civil society strengthening** in all programmes, and advocate for greater civil society engagement in national and global responses. We will support partners in highlighting progress and barriers to effective engagement in national responses.

4.2.5 We will, wherever possible, **work at multiple levels** linking service delivery with research, advocacy and policy initiatives that address the rights of

²⁵ Such as the Three Ones - one HIV action framework, one national AIDS co-ordinating authority and one agreed country-level monitoring and evaluation framework

people living with and affected by HIV and to ensure maximum effectiveness in addressing the cause and consequences of HIV and AIDS.

Priority Area 1: Integrated Approaches to Prevention, Care and Treatment

4.2.6 In high-prevalence countries Trócaire will seek and support partnerships that provide integrated prevention, care and treatment or assist partners to develop linkages between the components to ensure that the holistic needs of beneficiaries are met.

4.2.7 Trócaire will work in partnership to ensure that the **prevention component** of an integrated response is comprehensive, works on multiple levels, addresses gender inequality and cultural and social barriers to the response. Trócaire is committed to supporting known effective prevention strategies and will respond to immediate and underlying causes of HIV and AIDS²⁶.

4.2.8 Similarly, Trócaire will strive to ensure that the **care component** of an integrated response is holistic, follows good practice and where appropriate is linked to treatment services.

4.2.9 In low-prevalence countries, Trócaire recognises that targeted prevention-only programmes may be the most appropriate intervention but will strive to build partnerships with civil society actors to promote prevention services that are comprehensive, work on multiple levels, address cultural barriers and gender inequality and are integrated into district or national responses.

4.2.10 Trócaire will ensure that **women and girls' empowerment** is a key aspect of our HIV work and is reflected adequately in our responses to HIV across the organisation. We will acknowledge the important role that men and women play in women's empowerment. We recognise that groups are not homogenous and will determine responses that are appropriate to local contexts and cultures.

4.2.11 Trócaire recognises **the explicit links between AIDS and poverty** and will support poverty alleviation as a strategy for effective prevention and care.

²⁶ Within the confines of the policy on condom use

Priority Area 2: Rights of People Whose Lives are Affected by HIV and AIDS

4.2.12 Recognising the multiplicity of factors that contribute to injustices related to HIV, Trócaire will work on **rights-based issues at multiple levels** linking the local with the national and the global. Trócaire will build expertise in global advocacy issues related to HIV and base global initiatives on sound research at local, national and global levels. Trócaire will explore opportunities for such initiatives within and beyond faith-based partnerships.

4.2.13 Rights-based work at a partner level will inform the **global advocacy** agenda. At a local level, Trócaire is committed to supporting initiatives that defend people's rights, build capacity of organisations of people living with HIV, lobby for legislative change and improve service delivery. Current local advocacy initiatives on the Global Fund and on access to treatment will continue to be supported and developed.

4.2.14 Stigma and discrimination and gender equality will be addressed in all programmes including with Church partners as pre-requisites for realising the full range of rights for individuals to live free of HIV or positively with HIV. Trócaire acknowledges that stigma affects men and women in different ways and will strive to ensure that anti-stigma initiatives are gender-sensitive.

4.2.15 Trócaire is fully committed to the principle of **empowering people living with HIV to participate** meaningfully in decision-making processes, to become principal actors in the response and to articulate and demand their rights.

4.2.16 Trócaire will **build the capacity of civil society organisations** to hold national governments and international institutions to account for the promises made at national and international forums and to ensure that aid policies of bilateral and multilateral organisations facilitate effective national HIV responses.

4.3 Addressing HIV through Irish-based Justice Work

Specific Objective 3: To develop understanding and action on HIV as a development issue

Outcome 3: HIV is understood and responded to as a global justice issue

Strategies

4.3.1 Trócaire will use its unique position as a contributor to **development education and campaigns** in Ireland to highlight HIV as a development issue and will develop a specific development education resource on HIV. Trócaire will develop a long-term campaign action on HIV that builds on the development education resource and is supported by **research, policy and advocacy**.

4.3.2 Trócaire will initially use the lens of **orphans and vulnerable children** in development education and campaigns work to highlight a range of justice issues that resonate with school-going children but illustrate broader inequalities associated with the AIDS epidemic²⁷. This will be a cross-organisational response and the initial entry point into rights-based justice work on HIV.

4.3.3 The Catholic Church has the potential to make a huge contribution to the global understanding of HIV as a justice issue. Trócaire **will engage with church leaders, clergy, theologians and parishioners** to tap that potential from worldwide Catholic connections. We will integrate a church approach to the issue that includes education, action and understanding and will build our capacity to engage effectively in faith-based dialogue on HIV.

4.3.4 Trócaire recognises the huge potential to develop understanding and action on HIV and AIDS through alliances with others and **will engage in networks** in and beyond Ireland to link local policy issues with a broader global outreach.

4.3.5 Information Technology, web, publications, fundraising and communications in Trócaire will reflect the strategic importance of HIV as a development and rights issue. Trócaire will use its dual mandate and will mobilise citizens to respond to HIV as a justice issue through these channels.

²⁷ Such as stigma, treatment and TRIPS, gender etc.

5 Learning and Review

5.1 Trócaire will provide adequate support and resources to deliver on the objectives of the Strategic Plan. A joint HIV and Gender team will provide technical and policy support to regional offices and will work in alliance with programme officers in the field to deliver high quality programmes in partnership with civil society.

5.2 Trócaire will invest adequate time and resources to ensure ongoing research, monitoring, learning, documentation and sharing of experiences and lessons within and beyond the programme to improve the effectiveness of our HIV and AIDS responses.

5.3 The policy and accompanying strategy will be monitored by the cross-organisational team and the Strategic Leadership Team on an ongoing basis and specifically, on an annual basis jointly by the Strategic Leadership Team and the Regional Managers. Annual action plans will be developed and signed off by cross-organisational teams to ensure implementation of the policies and strategies and will be accompanied by milestones to ensure that the programme is on track and delivering on strategic objectives.

5.4 A review will be conducted at least every three years to assess adherence to the policies and strategies outlined in this document and to ensure flexibility and responsiveness to a rapidly changing external environment.



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