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### **Best Practice in Prevention of HIV**

Participants from Australia to Zambia attended the HIV Prevention Works, an official satellite symposium of the XI International Conference on AIDS, held on July 6, 1996 in Vancouver, British Columbia. The Symposium highlighted what works in HIV prevention, why sound HIV prevention programs and policies are public investments, and where attention should be directed in the future. This brief encapsulates the lessons learned and recommendations, which, a year later, have not lost their validity or relevance.

The Symposium was designed to profile international best practices, including models of successful HIV/AIDS prevention programs and policies, and to share and deepen knowledge about those programs and policies.

Presentations were made on preventing HIV infection, consequences and conditions of risk, working with individuals and families, working with communities, working with organizational and societal change, and research for prevention evaluation.

#### **Lessons Learned From Previous Prevention Strategies**

Prevention is a vital part of a global strategy to address HIV/AIDS yet it is neglected.

- Prevention can never be totally effective.
- Well targeted prevention does have an impact.
- Prevention deserves more funding.
- Particular techniques of prevention need to be studied :
  - educating couples about prevention
  - targeting HIV prevention to women
  - promoting condom use through simple messages
  - ensuring that AIDS is not treated in isolation from other Sexually Transmitted Diseases (STDs)

- ensuring the safety of blood supply throughout the world
- involving persons with AIDS in designing prevention strategies so that strategies can be more effective
- introducing sex education/HIV prevention in schools
- tackling cultural and religious impediments to education and action
- tapping into existing mechanisms of social support to support HIV/AIDS prevention messages
- implementing a multisectoral approach to HIV prevention; and
- treating Intravenous Drug Users through methadone programs.

Prevention at the micro-level adds up to global gain.

Prevention is especially important in developing countries.

Prevention requires targeting of particularly vulnerable groups.

Prevention needs to be based on sound empirical data.

Prevention advocates need to convince political decision-makers..

### **Policy Recommendations**

Prevention works and is a cost-effective investment. Prevention initiatives should incorporate the evaluation of impact and cost effectiveness.

Effective HIV prevention depends on a comprehensive combination of successful behavioral, bio-medical, social and economic approaches.

Well-designed HIV prevention interventions have demonstrated that risky sexual and drug use behaviors can be changed to reduce the spread of HIV.

Multisectoral and community partnerships are necessary to reduce the spread of HIV.

The participation of individuals infected with HIV and communities affected by the epidemic is critical to an effective, humane and ethical response. Prevention strategies must take fully into account that the epidemic is focused disproportionately on individuals who are marginalized in society and are under-served by formal institutions and programs.

The populations hardest hit by the epidemic are already facing other health, social and economic challenges. This means that HIV prevention strategies need to address issues in the areas of poverty, work to end violence against and the exploitation of women and children, emphasize the human rights of ethnic minorities, refugees, migrants, drug users, sex workers and the poor.

A key aspect of successful HIV prevention is a non-judgmental approach that promotes equality within couples, families and communities.

Safety of blood supply and blood products must be ensured by the government.

Effective prevention is assisted by laws and policies at all levels that ensure equal protection for persons living with AIDS with regard to access to health care, employment, education, travel, housing, and social welfare, without discrimination on the basis of sexual orientation.

*Adapted from HIV Prevention Works Report, IX International Conference on AIDS, Vancouver, July 7-12, 1996. Health Canada, US Centers for Disease Control and Prevention, US National Institutes of Health, The Joint United Nations Program on HIV/AIDS and the Canadian Public Health Association.*