Better sexual and reproductive health and rights for young people most affected by HIV

The issue
Young people aged 15-24 account for 40% of new HIV infections globally. However, often young people most affected by HIV are unable to access sexual and reproductive health (SRH) services including family planning, sexually transmitted infection (STI) screening and treatment. Young women living with HIV, young people who sell sex, young men who have sex with men, young transgender people, and young people who use drugs face stigma and discrimination based on age, gender, HIV status, and sexual orientation when accessing services. Attitudes and norms around, “appropriate” behaviour further marginalise young people most affected by HIV, and remain critical roadblocks to addressing the needs and protecting the rights of young people.

Existing services rarely meet the unique sexual and reproductive health and rights (SRHR) needs of young people most affected by HIV in a comprehensive way. Often they fail to take into account

A youth group in Bangladesh participates in activities to raise awareness of sexual and reproductive health and rights and prevention of early marriage. HASAB supports RWDO, the community-based organisation facilitating these activities. © International HIV/AIDS Alliance

The BEZA youth group (aged 15-20) use their music and dance talents to get messages about HIV prevention across to the wider public, and in particular to their peers. © Sheikh Rajibul Islam\duckrabbit\International HIV/AIDS Alliance
structural factors that compound vulnerability to HIV such as gender-based inequalities and violence, poverty, harmful cultural practices, and policies and laws which criminalise same-sex practices, sex work, drug use, and HIV transmission. Programmes also typically fail to affirm that all young people have sexual rights, including the right to sexual health and the right to a satisfying, safe and pleasurable sexual life.

About Link Up
Link Up is an ambitious three-year project (2013-2015), funded by the Ministry of Foreign Affairs of the government of the Netherlands, to improve the sexual and reproductive health and rights of over one million young people most affected by HIV, aged 10-24, in Bangladesh, Burundi, Ethiopia, Myanmar and Uganda. The goal of the project is to reduce unintended pregnancies, HIV transmission and HIV-related maternal mortality amongst young people affected by HIV.

Link Up leverages the strengths of each of its consortium members to increase demand and uptake of integrated HIV and SRHR programmes and quality services, increase the capacity of service providers and ensure that young people are at the centre of programme planning, implementation and influencing policy change for an enabling environment.

The project is:
- **Linking up** SRHR and HIV information in information, education and communications materials and trainings for peer educators and service providers
- **Linking up** services within health facilities and between health facilities
- **Linking up** services between community-based organisations and clinical health facilities
- **Linking up policy** and decision-makers working on SRHR and HIV.

By ‘linking up’ we are making a significant contribution to the integration of vital SRHR interventions and generating important evidence to aid the broader SRHR/HIV integration movement. Link Up will bring SRHR interventions to existing community based HIV programmes and create linkages with public and private SRH and HIV providers. A series of entry points to the continuum of HIV and SRHR interventions will enable greater reach and young people’s access to services. Below are some examples of activities to date from across the project.

Peer education and referrals
Link Up is reaching young key populations through existing community networks and peer to peer mobilization. Peer educators, who themselves represent young key population groups, are trained to provide SRHR and HIV education and counselling within their communities and refer their peers to public or private integrated SRHR and HIV services.

In Bangladesh, HIV/AIDS and STD Alliance Bangladesh (HASAB) is mobilising young key populations to reach out to their peers with integrated SRHR and HIV information, education and communications materials, including the use of hotlines and social media.

Street dwellers in Bangladesh are often children particularly vulnerable to HIV. Peer education sessions are held within the railway grounds at Dhaka’s largest railway station. The sessions focus on human rights, SRHR, gender, safer sex, HIV and STI prevention and drug use. If participants require a service or would like to find out more about any health issue, they are referred to Marie Stopes Bangladesh mobile clinical services.
Integrating SRH & HIV services

Link Up implementing partners are working together with Marie Stopes International (MSI) and other public and private service providers to offer integrated SRHR/HIV services to young people. MSI will serve as a key referral point for family planning in Bangladesh, Myanmar and Uganda. Community Health Alliance Uganda (CHAU) and Marie Stopes Uganda (MSU) are working together to provide a network of Link Up private and public clinics with integrated SRHR and HIV services for young key populations in 11 districts throughout the country. Young people are linked to these services through vouchers and referrals distributed by CBOs and peer educators. Those who receive vouchers are entitled to free services at MSU clinics and MSU are also using tuk-tuks to amplify their reach in slum areas. Both CHAU and MSU refer young key populations to the Most at Risk Population Initiative (MARPI) clinic. MARPI is a key partner because it provides specialised services for key populations and is located in a ministry of health regional referral hospital. This type of partnership boosts access to services and ensures that young people have multiple options for services.

Training and technical support

Link Up is providing trainings on a continuous basis to support and strengthen the technical capacity of public and private health providers as well as health extension workers in some countries. A series of technical support packages on HIV and SRHR integration, peer outreach, monitoring and evaluation and policy and advocacy for young key populations has been provided to implementing partners and tailored technical support is ongoing.

In Ethiopia, the Organisation for Social Support for AIDS (OSSA) trained Link Up nurse counsellors to build their capacity on STI management, gender-based violence and cervical cancer screening. They particularly valued sharing experiences of providing services for young key populations and the opportunity to problem solve together. They also participated in role plays and reflected on the importance of communication skills in their work with young people, to ensure youth– and key population– friendly services.
Youth leadership & influencing
Link Up involves young key populations throughout the project, continuously adjusting programme and service delivery to most effectively respond to their needs. Link Up amplifies the voices of young people most affected by HIV in national and global advocacy forums to ensure that policy processes address their needs, rights and aspirations. The project is building young people's advocacy capacity and empowering them to build coalitions and participate in national and global policy processes.

Alliance Myanmar provides Myanmar Youth Stars (MYS) with core support and mentorship through Link Up. MYS was formed in 2013 by a group of young people from key populations to respond to inequality, stigma and discrimination towards young people who are marginalised and at higher risk of HIV infection. In 2014, MYS is aiming to address legal reforms in Myanmar particularly pertaining to Section 377 of its Penal Code, increasing accessibility of testing centres in the community, and further raising awareness amongst young key populations of current laws.

In Burundi, Alliance Burundaise contre le SIDA (ABS) supported the Reseau National de Jeunes Vivant avec le VIH (RNJ+), a network of young people living with HIV, to open a youth centre, led by young people for young people. It offers voluntary HIV testing and counselling, short-term contraceptive options, and referrals for ART, STI diagnosis and treatment and other clinical services for young key populations. It is a safe space for education talks, support groups, internet access, and social activities for young key populations.

Operational research
Link Up is an opportunity to address key research gaps within the global integration portfolio. Population Council will assess the impact of the Link Up model and interventions for young key populations and increase the understanding of young key populations’ SRHR and HIV needs, through qualitative and quantitative evaluative and exploratory research.

Global policy on SRHR and HIV integration
Strengthening the capacity of young people most affected by HIV from Link Up countries to meaningfully participate in global policy dialogues ensures global policy is informed by young people’s experience and relevant to national health programming and policies. During the start-up of the project ATHENA and GYCA held a virtual consultation and partner community dialogues which have brought forward a strong and powerful voice from young people living with and most affected by HIV.

Link Up global policy partners STOP AIDS NOW! and GYCA organised a side event on ‘Getting young people’s sexual and reproductive health and rights and HIV at the heart of the post-2015 framework’ at the 47th Commission on Population and Development. The event was held to strengthen the capacity of youth advocates to influence the positions of their respective governments in the upcoming inter-governmental post-2015 negotiations.

SRHR/HIV integration is a priority in the Alliance’s current strategy HIV, Health and Rights, and many of our Linking Organisations have a long history in SRHR/HIV integration programming. The Alliance approach to integration in both our programme and policy work is defined by our Good Practice Guide on Integrating HIV and Sexual and Reproductive Health and Rights. These programming standards are a core component of our formal accreditation process, which all organisations must pass before becoming an Alliance Linking Organisation.