Communique on the MPs-CSOs workshop

April 2011
Naivasha, Kenya

We Members of Parliament from the East Africa Legislative Assembly (EALA); Kenya Women parliamentarians Association (KEWOPA); representatives of civil society organizations working in the Health and HIV and AIDS sector, at the Consultative Forum in Naivasha from 17th-19th April 2011 to discuss burden of HIV and AIDS on women, girls and older people, children carers in relation to Care and Support;

Deliberating on the challenges, opportunities and strategies for strengthening collaborative efforts between MPs and CSOs towards addressing the aforementioned;

Noting with great concern that Care and Support has not been adequately addressed in HIV and AIDS policy and programming; taking into account the vulnerability and burden of care on women, girls, older people and children carers;

Recognizing that Parliamentarians and Civil Society collaboration presents great opportunities to highlight the otherwise neglected area of Care and Support in HIV with special focus on Women, girls and older people and recognizing further the need for evidence-based advocacy to inform policy on carers;

Further recognizing the need to form a regional network of Caregivers in Eastern and Southern Africa;

Appreciating that Quality Care significantly contributes to prevention and treatment;

Further appreciating that older people who are carers will need extra and specific support;

ACKNOWLEDGE
The need to promote, protect and fulfill the Rights of Caregivers and the people they are caring for.

Now call for:
Access to a comprehensive care and support system that includes but not limited to:

1. Logistic and Material Support
   Home Based Care (HBC) Kits are crucial for service delivery. Caregivers require to be provided with HBC kits whose contents are replenished regularly. The kits contain disinfectant and gloves among other things thus protecting them from infection.Any other thing to make their life and that of their clients easier should be provided. This might include uniforms; bicycles etc.

2. Training and Professional Recognition
   There is need to standardize and regulate the training provided to Care Providers so as to improve and maintain the standards. Gaps in quality control and
supervision put both patient and client at risk. Protocols of training and accreditation should be developed to regulate and standardize the training.

3. **Psychosocial Support**
Care work results in a lot of stress that can easily result in burnout. Care Providers should have access to counseling services as well as other psychosocial support mechanisms. This will have a direct impact on the quality of care they will be able to provide.

4. **Minimum Package**
Providing Care to PLWHA should be Governments’ responsibility. Care Providers are providing services that should have been provided by governments. Therefore, caregivers have a Right to be financially rewarded or reimbursed. They should be supported so that they are more committee. Their commitment directly impacts on the quality of care they provide to their clients. If there were to be remuneration, more men would join and this would ease the burden on women and girls.

5. **Gender Equity** – Society expects women to be caregivers. This sometimes happens at the expense of women’s livelihood and progress. Governments should empower women and encourage greater participation of men in care work.

6. **Public Private Partnerships**
There is need to advocate for stronger Public Private Partnerships since HIV and AIDS affects both sectors and thus requires concerted effort by all stakeholders. Home based care and carework in general should be linked with Social Protection Programmes for sustainability.

7. **Legal and related services** that collectively comprise a comprehensive support system for care-providers.

8. **Income Generating Activities** – These should be set up to assist Carers to supplement their income.

**AND IN FURTHERANCE OF THE ABOVE OBJECTIVES**

WE THE PARLIAMENTARIANS HEREFIN COMMIT TO

1. Raise the profile of caregivers at both national and regional level
2. Provide leadership towards prioritizing the needs of vulnerable groups and their care givers
3. Advocate for the inclusion of provisions specific for older persons/carers within the EAC HIV and AIDS prevention and management bill 2010
4. Strategize on influencing increased Budgetary allocation for health with a special window for care givers to be supported
5. Strategize around prioritizing health and honouring the commitment to allocate 15% of national budgets to health
6. Continuously and effectively engage civil society and the media in legislation and policy around health and HIV related issues
AND WE CIVIL SOCIETY ORGANIZATIONS WORKING ON ISSUES RELATING TO
HEALTH AND HIV & AIDS HEREIN COMMIT TO

1. Conduct research and document findings to inform an evidence based approach
   in policy formation and programming including a Rapid assessment on the
   situation of care giving
2. Encourage continuous consultations on the needs relating the development of
   comprehensive support provisions for carers
3. Provide a link between PPP private sector and government
4. Keep the government in check – Implementation and Accountability
5. Increasing male involvement in care giving to complement effort towards
   lessening the burden of care on women and girls.
6. Develop innovative programmes with a focus on addressing issues of care givers
7. Sharing relevant information with MPs with the aim of strengthening debate on
   HIV issues
8. Promote media engagement to highlight key issues relating to care givers
9. Guide development of a policy framework

10. Working with existing structures of both government and the EAC.

**Participating institutions and organizations**
Ministry of Gender, Children and Social Development

**Kenya Women Parliamentary Association – KEWOPA**
Hon. Lina Chebib Kilimo

**East African Legislative Assembly (EALA) Committee on HIV & AIDS**
Hon. Sebtuu Nassor

**Help Age International**
Nesta Hatendi

**VSO Team**
Makena Mwobobia

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James Kiplimo
Renaldah Mjomba
National AIDS Control Councils/Commissions

SADC PF
Hon. Ephraim Kayembe

CSOs:
WOFAK
Dorothy Onyango

Other participating Organisations/Institutions

UNAIDS – Kenya Country Office

National Empowerment Network of People Living with HIV and AIDS in Kenya (NEPHAK)

GROOTS – Kenya

Kenya AIDS NGO Consortium (KANCO)

Kenya Legal & Ethical Issues Network on HIV/AIDS (KELIN)

Eastern Africa National Networks of AIDS Service Organizations – EANNASO

National AIDS Control Councils

1. Kenya – National AIDS Control Council (NACC)
2. Tanzania – Tanzania Commission for AIDS (TACAIDS)
3. Uganda - Uganda AIDS Commission (UAC)