



SLUMS AND HIV MEETING BRIEF

Issues and Suggestions



MEETING BRIEF APRIL 2011

Research has shown that HIV prevalence is higher in urban areas than in rural areas in southern and eastern Africa (Colvin and Ibbetson, 2010). Furthermore, as urbanisation and the treatment of HIV increases, so does the proportion of people living with HIV and AIDS in cities. As a result a number of organisations have conducted research to investigate the relationship between HIV and urban areas to create improved responses (Colvin and Ibbetson, 2010).

SEARCH (Southern and East African Research into HIV in the City) was set up in August 2009. There were approximately 15 participants in the network. It was through SEARCH that the 15 Cities Project and the Slums and HIV strategy paper came about, and this served as a basis of discussion for a Slums and HIV meeting, organised by HEARD.

The meeting was held during February 2011 to gather different stakeholders. The meeting served as:

- An opportunity for HEARD to review the results of the research
- A chance to learn from experts
- A means for SEARCH members to set agendas
- A way to make an impact on policy
- A brainstorming forum to facilitate research

Issues Raised

Biomedical focus on HIV and AIDS: There is a lack of understanding of the drivers of HIV and instead a focus has been placed on behavioural prevention. The vulnerabilities of populations have not been studied and understood, thus there is little to guide the response particularly targeting groups such as sex workers. The physical, social and economic contexts of slums require greater investigation as well as the overlapping vulnerabilities that lead to HIV and the interface between these variables.

Government and Governance: National government lacks prioritisation; provincial government has a lack of capacity and locally there is a lack of focus. Activities are isolated and governance structures for the response are not well coordinated, especially at the city level. Furthermore, city-level data is not being considered and utilised, and in some instances no direct evidence is available. These problems persist because politicians lack the political will and expertise to deal with HIV and AIDS. Despite the large size of civil society as a population group, its inadequate coordination and advocacy hinders its potential to make an impact and promote change.

Other Points Raised:

- The limited capacity of health and planning staff.
- Mainstreaming has not been implemented, and whilst it has been

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considered in theory, not much has been achieved in terms of action.

- The possibility of a larger number of men having sex with men in urban settings.
- Unmanaged urban growth which leads to inequity and thus impacts on health.

Suggestions and Potential Action Plans

Thorough guidelines are needed to guide cities to promote better health. There is an under-utilisation of the opportunities available to promote change. Local government must enable itself to play a greater role in HIV and AIDS efforts, since it is more knowledgeable about city contexts than national government. Most importantly, gender dynamics and the differentials need to be kept in mind during analyses as a gendered analysis of poor people is lacking. In addition, particular attention must be paid to:

- Policy issues addressed with a city-level response plan in line with National Strategic Plans. Stakeholders have called for national guidelines to support local AIDS councils, and the integration of HIV into long term development, for instance, HIV integration into Integrated Development Plans.
- Cities must be guided through the procedures that need to be followed. These efforts can be enhanced by establishing strong coordination of city wide responses in partnership with strategically positioned civil society groups. It is important to capitalise on the power of civil society as national government cannot be expected to bear the brunt of delivery.
- In-depth studies on slum areas are needed.

- The District Health Information Service must be improved and Geophysical Statistics Project (GSP) statistics are needed to understand the spatial and physical processes of people in urban areas.
- The allocation of financial resources for HIV responses.
- Training for senior managers and politicians.
- Municipalities, particularly in South Africa, need to conduct more HIV prevalence studies, and an HIV focal person is needed to drive key issues.

Conclusion

Systematic discussion is needed, with tight recommendations to address the issues of HIV and slum areas. The logic behind urban slums and HIV is: when slum areas are attended to, HIV prevalence will decrease. This must be kept in mind by governments that are responsible for creating development policy which integrates HIV elements. Particular focus must be placed on addressing the social and economic factors that perpetuate the growth of urban slum areas, so that HIV prevalence is reduced.

References

Colvin, M and Ibbetson, H. (2010). *HIV in the City: Assessing the HIV Epidemic and the Response in Durban*. Final Report Version 2. Maromi Health Research. December 2010.