



Workshop B11: Disability and HIV/Aids
National STI*HIV*AIDS congress
1 December 2004, RAI – Amsterdam

workshop

Disability and HIV/AIDS: uncovering a problematic relationship

Mark Raijmakers, director DCDD

Christina de Vries, consultant, IC consult

Mathieu Jansen, Aids advisor, National Federation of People with Disabilities in Namibia (VSO)



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disability

Disability is unrecognised as a problem in developing countries

Left out of the mainstream, receives no structural attention in development co-operation policies

WHO: 10 %

WorldBank: 17 % of poorest people

UNESCO/UNICEF: appr. 90 % no basic education

Disability and poverty in a vicious circle



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disability

Disability is often addressed as a medical concern

While disability is a human rights issue

It's about lack of equal opportunities

Social definition of 'disability'

Disability deserves a place on the political policy agenda

Without addressing disability the MDG's can never be reached



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disability and HIV/AIDS; research

Not much research has been done on HIV/AIDS within disabled populations

Only a handful of prevalence studies, all from North America

Bangkok AIDS conference: 10.000 scientific papers → 20 on disability.

AIDS epidemic increases disability rates: disabling effects of AIDS on previously non-disabled are well established

Limited innovative studies on AIDS education and intervention strategies for disabled populations



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global survey Yale/WB

Global survey on HIV/AIDS and Disability (Yale University, World Bank)

Main conclusions:

- individuals with disabilities are at significant risk of becoming HIV infected in all countries surveyed
- all risk factors associated with HIV are increased for individuals with disability: poverty, lack of education, lack of information, elevated risk for violence and rape, substance abuse, disabled orphans, access to and affordability of care, stigma



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disability and HIV/Aids: elevated risk factors

Risk factor: **poverty**

- disabled people are amongst the poorest
- cycle of disability and poverty

Risk factor: **lack of education**

- children with disabilities are shut out because they are considered not in need of education
- schools are physically inaccessible
- global literacy rate for disabled men is 3 % and women 1 %



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disability and HIV/Aids: elevated risk factors

Risk factor: **lack of information and resources to ensure 'safer sex'**

- incorrect assumption that disabled individuals are not sexually active

Risk factor: **elevated risk for violence and rape and lack of legal protection**

- three times more likely to be victims of physical abuse, sexual abuse and rape

- have little or no access to police, legal counsel, and courts for protection



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disability and HIV/Aids: elevated risk factors

Risk factor: **substance abuse**

Risk factor: **Disabled AIDS orphans**

- children with disabilities require extra care
- are more likely to be malnourished, neglected, abandoned

Risk factor: **access to and affordability of care**

- often physically inaccessible
- professional are unaware of needs, place lower priorities

Risk factor: **stigma**

- Double burden



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next speakers

Christina de Vries, IC consult

Disabled persons are more vulnerable to HIV

Mathieu Jansen, National Federation of People with Disabilities in Namibia (VSO)

HIV & AIDS programme National Federation of People with Disabilities

Afterwards:

Discussion on how to make HIV/AIDS programmes more disability friendly and inclusive?



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discussion

How to make HIV/AIDS programmes more disability friendly and inclusive?

There is an immediate need for HIV/AIDS education, intervention and services to reach individuals and groups worldwide.

Is this need felt and shared?

What strategies do we need to undertake?

What kind of practical measures are necessary?

How do we accomplish this?