Reducing the stigma and discrimination of PLHIV through the empowerment of HIVpositive women

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Context: As part of the national response to HIV infection, the Government of Guinea has launched a five-year national strategic planning process since 2002, namely the 2003-2007 plan, the 2008-2012 plan and the 2013-2017 plan the basis of a $1.5 \%$ national HIV prevalence (Demographic Health Survey, DHS 2005), at 1.7\% in 2012 (Demographic Health Survey, DHS 2012), with a feminization of the epidemic. HIV seroprevalence among women increased from $0.9 \%$ in 2005 to $2.1 \%$ in 2012; It is within this framework that the strategic HIV plans have placed particular emphasis on the fight against the stigmatization of PLHIV through axis three in the form of Protection and support to PLHIV and people affected by HIV and other groups. This axis supports the technical and institutional capacity of the network of people living with HIV set up in 2005 by the SE-CNLS in partnership with the TFPs.

It is within this framework that the NGO Guinean Association of HIV-affected Widows and their Orphans received technical and financial support from UNFPA, PNPCSP, CNLS, UNDP, UNAIDS and others TFPs for the empowerment of women to reduce stigma and provide psychosocial support to PLHIV and orphans and vulnerable children. The aim of this intervention is to give a human face to the HIV infection for the acceptance of the knowledge of the status serology.

## Objectives To contribute to reducing the stigma and discrimination of PLHIV

Methodology: It focused on the medical care and psychosocial support of people living with HIV, the constitution of associations of people living with HIV, capacity building associations, sharing of South-South experiences associations of people living with HIV, support for people living with HIV for open-ended testimony, support for the development of the network of people living with HIV, and capacity building for project management, networking, results-based management and the participation of network members in the design, implementation, monitoring and evaluation of the national strategic framework for the fight against AIDS

Results: After strengthening the capacities of the REGAP PLUS Network, UNFPA, in partnership with UNAIDS, has supported the Guinean association of HIV-infected widows and their orphans by strengthening the technical capacity in saponification of a group of 37 PLHIV women, psycho-social support from 121 OVC.

Mobilization of other partners for scaling up of IGAs

- Reintegration of 9 people living with HIV including 2 men, 4 widows and 3 girls at the community level and the celebration of several marriages between infected persons
- Improving the decision-making power of women in the network through the post of President of REGAP PLUS, second vice-president of the national coordinating body for the
three diseases (Tuberculosis Malaria and HIV) financing of the Global Fund and member of the HIV Theme Group
- Development of partnership with the Ministry of Health through the health district for reference and counter referral of PHAs and pregnant women
- Reducing the stigma of people living with HIV through the recognition of community-based association, open-ended stories and sensitization in radio


## Lessons learned

The synergy of capacity building of members of the PLHIV network by the CNLS SE in collaboration with the technical and financial partners has made it possible to improve the visibility of REGAP plus and to decentralize the activities of the network at national level. REGAP PLUS is now recognized as the defensive structure of the rights of people living with HIV. The member associations of the network work and the results are capitalized at the Network level. This transparency reinforced the good governance of the network and the strengthening of the partnership with the TFPs.
Thus, REGAP plus has been identified as sub-recipients of the HIV component under funding from the Global Fund.

The synergy of the partners' interventions allowed the sustainability of the activities of the IGAs to support the psychosocial care of PLHIV and OVC. The empowerment of PLHIV through IGAs allows for better integration of PLHIV at the community level and reduces their discrimination.

Challenges: The weak monitoring of the saponification intervention by a specialized structure to document the financial benefits and the improvement of the economic level of the beneficiary women.

Conclusions and recommendations: Networking of associations of people living with HIV has strengthened the technical and institutional capacities of associations. Women's empowerment through the development of IGAs for women's organizations has contributed to improving the well-being of HIV-positive women and girls, reducing stigma and improving psychosocial care for OVC and promoting certain women to community and national decision-making positions.

Recommendations and Advocacy: Associations of people living with HIV are operational structures on which to build a partnership for the prevention of STI / HIV and the promotion of family planning. School girls, abandon excision and early marriage of the girl who continues to ravage girls and women the birth of childbirth Continue to take care of orphaned children and other vulnerable children to allow them to study or insert them in craft learning centers so that they can take over from their adoptive parents as they have lost their biological parents through hiv, tuberculosis and malaria.
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