



Zimbabwe Parliamentarians Against HIV and AIDS (ZIPAH)

Statement on HIV, Human Rights and the Law

Meeting at Elephant Hills Hotel, Victoria Falls,
Zimbabwe

20-21 May 2011



UNAIDS
JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

UNHCR
UNICEF
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BACKGROUND

1. We, Zimbabwe Parliamentarians Against HIV and AIDS, representing more than 45 constituencies met in Victoria Falls on the 20th and 21st of May 2011, for a workshop on HIV and AIDS, Human Rights and the Law.
2. We note the progress made towards ensuring universal access to HIV prevention, treatment, care and support in Zimbabwe in the past five years.
3. We are concerned that Zimbabwe remains one of the countries experiencing huge challenges in treatment, care and support of its people and is among the countries worst hit by HIV in the world.
4. We note that the human rights issues are underlying responses to HIV and recognize the importance of the legislative mandate as a key component of the responses.
5. We acknowledge the need for political will, commitment and leadership in halting the advance of the epidemic in Zimbabwean communities.
6. We reaffirm our commitment to WALK the TALK.
7. We undertake to cultivate best practices for the role of parliamentarians in addressing the spread and impact of HIV.
8. We advance our commitment under the umbrella body of Zimbabwe Parliamentarians Against HIV and AIDS (ZIPAH) through practical involvement.

HUMAN RIGHTS AND HIV

9. We affirm that access to HIV prevention, treatment, care and support is a human right.
10. We note the importance of promoting and protecting human rights when formulating responses to HIV around law, policy and practice.
11. We note the need for a human rights based legislative agenda on issues related to health and HIV in particular.
12. We stress the importance of universal access to health care and other social services as an important aspect of the rights based approach to HIV.
13. We note that human rights violations anywhere and in whatever form exacerbate the spread and impact of HIV.

CRIMINALISATION OF HIV TRANSMISSION IN ZIMBABWE

14. We acknowledge the existence of legislation that criminalises HIV transmission in Zimbabwe.

15. We further acknowledge our monumental role in facilitating an enabling legal framework to promote human rights in the context of HIV.
16. We reiterate that deliberate transmission of HIV is a criminal offence that should be punished under our criminal laws without HIV specific law.
17. We admit that our present laws on criminalization of HIV transmission are wide in scope and seek to punish and control. This hampers efforts to deal with HIV openly without fear and secrecy – thereby discouraging disclosure, testing and uptake of health care services.
18. We acknowledge that Section 79 of the Criminal Law Codification Act needs revisiting to align our responses at the national level with global standards of enabling legal frameworks.

ESSENTIAL MEDICINES AND DIAGNOSTIC SERVICES FOR HIV

19. We note the continued challenges facing people living with HIV in accessing basic diagnostic and treatment services.
20. We acknowledge the importance of facilitating the inclusion of the right to health in the new Constitution for Zimbabwe.
21. We recognize that access to life saving antiretroviral treatment is critical in the enjoyment of the right to life and well-being of a person. We are also cognizant of the fact that HIV infection is a chronic but manageable condition.
22. We acknowledge that access to life saving antiretroviral therapy is important for economic growth and development of our nation.
23. We underscore the need for the central Government to do more in facilitating accessible and affordable health care services.
24. We underscore the need to fight corruption in the provision of HIV drugs at the facility level through strengthening of systems and procedures in the distribution and dispensing of HIV drugs and services.

MOST VULNERABLE, MOST AT RISK POPULATIONS AND HIV

25. We acknowledge the peculiar challenges faced by most vulnerable and most at risk populations that exacerbate the spread and impact of HIV, and note the need to expand and strengthen the responses.
26. We recognize that gender inequalities fuel the epidemic in Zimbabwe.
27. We understand that legislation should protect women's and children's rights around national issues of inheritance, food security, empowerment and social security.
28. We note the urgent need to increase the reach of prevention of mother to child transmission services and programmes across the country to benefit women in resource poor settings.

29. We note the increase in the number of orphans and child headed families owing to HIV in Zimbabwe and call for legislative efforts to facilitate central Government obligations to care for their well-being.
30. We note the challenges faced by HIV positive prisoners and persons in places of detention as regards opening and closing times of cells that impair timelines and schedules for taking ARVs.
31. We acknowledge the need for prison authorities to provide nutrition, prevention, treatment, care and support services in prisons.

HEALTH CARE FUNDING

32. We recommit to the Abuja Declaration of a 15% allocation of the national budget to health care.
33. We stress the importance of wealth redistribution as a means to health care financing in the developing countries which emphasizes the role of multi-nationals and companies benefiting from resources in low income countries like Zimbabwe.
34. We lend our voice to the call for a Global Convention on the Right to Health before 2013 that facilitates health care financing anchored in wealth redistribution that places obligations on the wealthy to fund health for poor countries.
35. We acknowledge the need to expand sources of health care financing at the local level to include innovative ways of tapping into special taxation or other avenues of local revenue collection.

THE WAY FORWARD:

1) IN THE IMMEDIATE

- We commit ourselves to providing national leadership on HIV responses by shaping a conducive legislative and policy framework that place human rights at the centre of HIV prevention, treatment, care and support in Zimbabwe.
- We call upon the Executive arm of Government to provide similar political commitment in upholding basic health rights in national policy and budgeting
- We commit ourselves to amplifying the voices of people living with and affected by HIV vigorously now and onwards.
- We will launch ZIPAH within the next three months.
- We will organize and encourage all MPs to place HIV and AIDS and related issues as part of their daily agenda at constituency and national levels.
- We will organize in two months group or collective public voluntary counseling and testing (VCT) for ZIPAH members as a way to encourage citizens by leading from the front (walking the talk).

- We will intensify our collaboration with other key stakeholders in our endeavor
- We will link and work with traditional and other leaders on HIV agenda.
- We will advocate for involvement of MPs in the finalization and implementation of ZNASP II and Global Fund – related matters (Country Coordinating Mechanism and other relevant processes)

2) IN THE MEDIUM TERM

- We will intensify our ZIPAH membership drive to 75% of the total MPs of Parliament.
- We will involve elected local Government Officials, Mayors, Councilors in the response to HIV and AIDS
- We will engage in the crucial fight against stigma through campaigns for people to know their individual HIV status
- We will initiate integration of HIV related issues into the existing legal framework and the crafting of a stand-alone HIV law.
- We will engage in advocacy for the universal access to prevention, treatment, care and support using our highly esteemed officers and we will place the issue of adequate funding for HIV and work towards fulfillment of International Funding Agreement.

3) IN THE LONG TERM

- We will work to establish downstream structures to work with the NAC coordination structures (PAAC, DAAC, WAAC and VAAC).
- We will support and reinforce the work of Parliamentary Portfolio and Thematic Committees.
- We will work towards coming up with clear legislative advocacy agenda: reviewing and updating the existing HIV related laws and initiating the new ones as needed;
- We will advocate for ratification, domestication and full implementation of relevant international conventions and treaties.
- We will also advocate at all levels for greater meaningful involvement of people living with HIV.
- We will work to establish sustainable ZIPAH programmes with focal administration as stand alone or housed under key stakeholders administration roof.
- We will continue to WALK the TALK.