

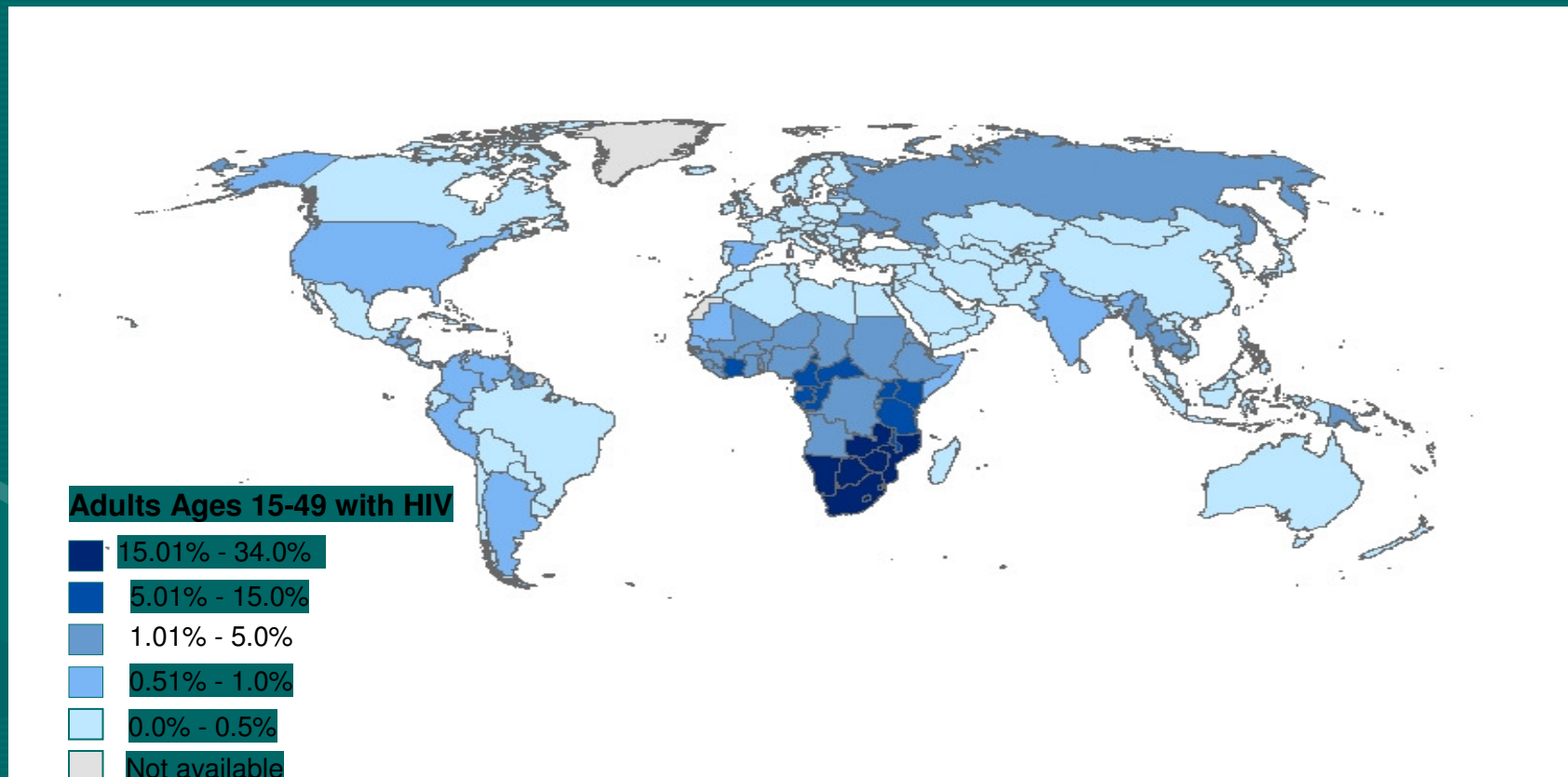
Youth and the Global HIV/AIDS Epidemic: Considerations for Goals and Targets

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Map of HIV Prevalence Worldwide

2005



Source: UNAIDS, *2006 Report on the Global AIDS Epidemic*, 2006.

Worldwide

- 11.8 million youth, 15-24, are infected
- 7 million are young women
 - Biological and social vulnerabilities
- Young men
 - Hurt as well by standards promoting sexual risk
- Youth are
 - A constantly emerging new risk group
 - Exposed to a “dynamic” epidemic
 - prevalence, knowledge, treatments, social forms change, e.g., new data on transmissibility during acute infection, new drug use patterns, etc.
 - Exposed to co-prevalent threats to health and well-being, many operating along “*common pathways*,” e.g., sexual and reproductive health risks
 - Socialized into a world of gender, ethnic and economic inequity

Prevention and treatment for youth are undercut by

- “Adultification”
 - For example, presumption of resources and knowledge to effect change, and find or navigate health systems
 - Failure to routinely keep separate statistics on youth
- Medicalization
 - Shift from primary to secondary prevention
 - Lack of mixed, responsive strategies and packages incorporating developmental challenges, pre-care and after-care
- Routinization
 - HIV complacency or static intervention as opposed to interventions that respond to developmental changes throughout the lifespan or changes in the epidemic or to adaptation to current messages
- Single issue/single condition focus
 - Newer interventions respect “lives as lived,” with multiple social and health challenges
- Stigma
 - Dampens discourse about disease, prevention, testing, treatment or care

Repairing the social fabric

- Support for caregiving roles
 - For caregivers to orphans
 - For youth as caregivers
- For youth development
 - Rights to the knowledge, understanding, skills and resources necessary for health, prior to risk
 - Rights to treatment and care
 - Support for transitions to adulthood

Turning it around: Some examples

- Beyond stigma
 - Our goal is to increase comfort in dealing with persons living with HIV, and with HIV and co-prevalent conditions rather than reduce “stigma”
- Beyond prevention
 - Prepare youth for HIV and other health challenges across the lifespan
 - Relationships, pregnancy, caregiving, sexual responsibility, mutual respect, economic circumstances
- Beyond service
 - Youth as co-designers of developmentally, locally, and temporally appropriate interventions, supports and services

Preliminary suggestions for goals and targets

- Youth receive skills and resources to practice relevant, home-care style “universal precautions”
- Youth co-design HIV primary, secondary and tertiary interventions that recognize youth as caregivers, youth as persons with HIV, and youth as HIV-affected
- Youth receive comprehensive sexual and family life skills training addressing respect for economic, ethnic and gender diversity
- Youth’s special circumstances are recognized in the way statistics are collected and presented in order to maintain a focus on youth