



ADVOCACY FOR THE CONSIDERATION OF ADOLESCENT GIRLS AND YOUNG WOMEN WITH DISABILITIES FOR FREE HIV/AIDS TESTING AND TREATMENT BY THE MINISTRY OF SOCIAL AFFAIRS THROUGH OUT THE NATIONAL TERRITORY

HIV and AIDS pose serious social, cultural and economic hardship to its victims including orphans and vulnerable children (OVC). Many factors that contribute to the spread of HIV in Cameroon include multiple sexual partners, low condom use, low status of women (with few economic opportunities and great power differential with men). Women do not have the power to demand safer sex. The present on going conflict in the Far North, North West and South West regions of Cameroon has contributed to the rise in sexual assaults, harassment among adolescent girls and young women (AGYW) in the conflict regions and also an increase in the rate of sexual exploitation amongst the jobless internally displaced adolescent girls and young women (AGYW) who use sex as a source of income for survival in the various places in which they find themselves.

This current situation will only maintain the alarming disproportionate rate of HIV/AIDS which we are trying so very hard to reduce, with the adolescent girls and young women (AGYW) bearing the highest burden of the disease. Even before the crisis, statistics from the Global Fund indicated that 24 adolescent girls and young women (AGYW) aged 13 to 25 are infected everyday as opposed to 9 of their male counter parts. I wonder how terrible the statistics will read as of now. The attention of the ministry of social affairs has to be drawn to the impending health danger geared towards the orphans, internally displaced, street and disabled adolescent girls and young women whose health is at risk as a result of the ongoing crises.

The National Strategic Response Plan for HIV/AIDS which has been set up to reduce the infection rate and achieve the 90-90-90 objectives has established flagship sectors in this eradication process among which the Ministry of Social Affairs in article 4.2.4 (page 127); is tasked to “promote gender equity in the fight against HIV/AIDS in favor of vulnerable populations” The Ministry of social affairs which is in charge of developing and implementing government policies on prevention assistance and protection of socially vulnerable people social work, health and social security should create support programs for these vulnerable AGYW especially those from the poorest neighborhood and children led families. Experiences gathered on the field by AGYW (HIV/AIDS ambassadors) of HOVUCA exposed the major challenges faced by the disabled AGYW in communities.

Challenges faced by adolescent girls and young women (AGYW) Living with Disabilities in accessing HIV/AIDS Services

People with disabilities experience all of the risk factors associated with acquiring HIV. They are often at an increased risk because of poverty, limited access to education, lack of access to healthcare, limited information and resources needed to facilitate safer sex thereby increasing their level of exposure for exploitation. Some major challenges faced by people living with disabilities (PLD) include;

Lack of information patterning to AGYW living with disabilities in the community

The absence of data relating to people with disabilities is a major challenge as limited



knowledge is known about the victims, the population size and the type of disability specific to individuals. This acts as a huge limitation preventing specific needed assistance from reaching them should the need arise.

Exclusion from Programming

Most often, people with disabilities are often unaware and left out on HIV sexual and reproductive health and rights programming. They also experience great limitations in accessing these services due to difficulties in accessing and interpreting information which are rarely adapted to the diverse communication and physical needs of people living with disabilities thereby limiting the knowledge on HIV among them. Due to physical and communication barriers, people with disabilities are often isolated from their community and excluded from community based awareness raising activities about HIV prevention and sexual health.

Risk of Sexual Exploitation and Abuse

Disabled AGYW with intellectual disabilities are more vulnerable to sexual violence and abuse leading to unwanted pregnancies, HIV and other sexually transmitted infections. Due to physical/emotional inadequacy and communication barriers, their ability to protect themselves or report abuse or violence is limited thereby leaving them in positions of vulnerability. There is also a high incidence of intimate partner violence among couple who one of them has a disability.

Stigma and Discrimination

Severe discrimination are faced by AGYW with disabilities. When it comes to poverty, education and vocational success, evidence suggest that women with disabilities face worse forms of discrimination than women without disabilities. People with disabilities are open to violence and many forms of abuse due to the low self-esteem and social isolation which they experience as a result of the stigma and discrimination relating to their disability which they face. These challenges and more act as a major barrier preventing the accessibility of HIV and SRHR services which they are entitled to. The absence of legal protection against the stigmatization and discrimination of AGYW with disabilities exacerbates the situation.

Barriers when accessing healthcare.

Multiple barriers are faced by AGYW with disabilities to access healthcare. This is partly because people with disabilities are rarely included in the design and development of these services hence the infrastructure and other social amenities are not articulated to their needs. People with different type of disability may face experience different challenges when accessing health care e.g. reliance on someone else for mobility or communication to access health services and limited financial power. For those who are able to access health centers, barriers such as limitations in sign language for people with hearing, or intellectual impairment may restrain proper HIV testing and counselling services. People with disabilities also face lack of confidentiality as a third party needs to be involved for interpretation. Due to the fact that many health workers lack the necessary knowledge and skills to provide appropriate health services they don't know how to attend to people with disabilities and happen to treat them badly thereby causing them not to return to seek health care.

Overcoming the barriers faced by adolescent girls and young women (AGYW) living with Disabilities in accessing HIV/AIDS Services

Tackling HIV among AGYW with disabilities needs a rights-based approach which tackles



barriers holistically that wider issues such as gender-inequality and violence are addressed. Understanding the specific needs of people with disabilities will better remove barriers and improve the provision of HIV and other SRHR services. Initiatives targeting AGYW with disabilities through specific messages, interventions and policies should be established and implemented to the fullest. Some of these interventions include;

Getting concrete data and information regarding AGYW living with disabilities.

A census should be carried out where comprehensive data on the number of people and information on their disability type is noted. This will enable stakeholders to easily attend to their challenges based on the specific need of each individual. This can be done by a door to door census or grouping them in a people living with disability cluster or union in their various neighborhoods.

Establishing and including AGYW with disabilities in HIV/AIDS disability responsive programs.

AGYW with disabilities should be represented where decisions concerning them are made. Their voices should be heard when it comes to expressing their plight with respect to their health and sexuality. They should be taken into consideration when HIV/AIDS related programs and information are disseminated e.g. by providing health related information for the visually impaired in larger font or brail, sign language for those who can see but are unable to read and ensure that they are accessible and better explanations for those who are intellectually impaired.

Social security and Law enforcement measures

The Ministry of Social Affairs should work in collaboration with agents of law enforcement and the Ministry of Justice in the promotion and defense of disability rights by implementing heavy punitive measures on individuals who abuse, exploit, and rape or exercise any form of gender based violence on any AGYW with disability irrespective of whoever is the defaulter. This will instill some degree of fear and respect for the AGYW living with disability while upholding their human right.

Overcoming stigma and discrimination

Raising awareness of people living with disability in the communities and in HIV programs locally and nationally will instill in the general public the normality of people living with disabilities and their human rights, allowing them to have access to and enjoy existing pleasures like every whole human being. This will go a long way to prevent stigma and discrimination from the community; for instance it may increase the use of condoms which couldn't have been the case may be due to lack of accessible places to buy condoms, embarrassment while buying condoms or being unable to afford them. Also it will increase their ability to negotiate safer sex practices thereby giving them right and power over their sexuality.

Including AGYW with disabilities in the design and development of HIV/AIDS services

Training counsellors with disabilities or disability approach skills to work in testing centers to counsel both disabled and non-disabled clients and offer free HIV testing is encouraged at HIV/AIDS service centers and/or disability groups. In order to improve access to information and services for deaf people, sign language interpreters should be trained on issues relating to HIV and assigned to HIV centers in many areas. The HIV/AIDS service centers should be



created with equity for easy access to person of all type. Health care service providers should be cautioned to approach disability clients with concern and empathy as this will make them feel loved and accepted eventually making them to return to the health centers for services. Counsellors and health service providers should also be cautioned to try as much as possible to maintain a high level of confidentiality when dealing with people living with disabilities.

Disability allowance and Empowerment for disabled AGYW living with HIV

Allocating allowances for disabled AGYW living with HIV/AIDS will go a long way to offer financial support for mobility to health care centers, basic daily needs and proper feeding this is according to Effect 3.2 of the National strategic plan which states that: By 2022, 60% of HIV infected and affected people in care receive the psychological and social support package. Implementing inclusive education for those willing to study and economic empowerment through vocational training for school drop outs will better their lives.

Research shows that in the year 1985, a decree; Decree No 85/256 of 26/02/1985 was instituted for the creation of home workshops for disabled young girls in Douala which was a very good initiative in favor of the vulnerable AGYW but did not continue subsequently for unexplained reasons. Interventions and policies such as this which are centered on building the capacities of AGYW will empower them by creating income generating activities which will increase their financial strength and make them take proper and positive decisions concerning their sexuality.

Creation of a transition center and a one stop health unit

The creation of a transition center by the government most especially during this era of crisis will offer support by providing safety, justice, psychosocial aid and health services to these exposed orphans, internally displaced, street and disabled adolescent girls and young women in the conflict zones. This will prevent them from loitering around thereby exposing themselves to rape, violence and other social mishaps. This center will also offer the opportunity for them to carry out their free HIV/AIDS testing and follow up on their treatment. Offering them basic amenities like free sanitary pads will be an additional support to their social and health safety. Creating permanent centers even in major towns where these girls are aware that they can always go to for social assistance and can report cases of violation will be a plus to their well-being. According to the African union protocol on the rights of persons with disabilities; every person with a disability has the inherent right to life, integrity and health.

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