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National HIV/AIDS Strategy The Global AIDS Strategy and the Power of Community Responses to HIV/AIDS Hiv/aids Women Resisting AIDS Preparing for the Future of HIV/AIDS in Africa Guidelines for Second Generation HIV Surveillance The National AIDS Strategy HIV/AIDS Strategy Paper for Bank Group Operations An Audit of HIV/AIDS Policies in Botswana, Lesotho, Mozambique, South Africa, Swaziland and Zimbabwe Restrictions on AIDS Activists in China "Working to Keep Our Circle Strong" Report by the Care and Management Subcommittee of the National AIDS Strategy Committee on HIV Report of the Consultation with International Women's NGOs on AIDS Prevention and Care Disease and Democracy AIDS and the Family The AIDS Epidemic in South Africa Zanzibar National HIV/AIDS Strategic Plan (2004/05-2008/09) AIDS, Poverty Reduction and Debt Relief Discussion Document Towards a Fourth National HIV/AIDS Strategy National HIV/AIDS strategy evaluation Remaking HIV Prevention in the 21st Century AIDS and the Law AIDS and the Law, 6th Edition American Bar Association Policy and Report on AIDS. AIDS and Mental Health Practice Building Partnerships Family and HIV/AIDS HIV/AIDS Strategy in Latin America and Africa Asian Immigrants in North America with HIV/AIDS Witnessing AIDS AIDS Policy in Uganda Hiv/aids The Economics of the Global Response to HIV/AIDS Structural Interventions for HIV/AIDS Prevention National HIV/AIDS Strategy for the United States HIV and AIDS in Papua New Guinea, 1987-2005 Leading Together Comprehensive Textbook of AIDS Psychiatry Global HIV/AIDS Politics, Policy, and Activism: Persistent Challenges and Emerging Issues [3 volumes] Modernizing Sexuality

HIV/AIDS has a profound impact on family well-being and structures. This publication considers issues and challenges of HIV/AIDS from a family perspective, using information and data from sub-Saharan Africa. Issues discussed include: definitions and methodological aspects; knowledge and disclosure of HIV status, including stigma and risk perceptions; caregiving and family living arrangements, including the implications for older family members and children who are forced to assume adult responsibilities; care of orphaned children; changing structures and functions of families affected by HIV/AIDS; traditional and other family practices affecting vulnerability to HIV; and policy implications of the HIV/AIDS epidemic. Addressing contemporary issues faced by individuals with HIV/AIDS, AIDS and Mental Health Practice: Clinical and Policy Issues provides psychologists, psychiatrists, social workers, and counselors with research and case studies that offers models for effective clinical practice at this stage of the epidemic. Each chapter is written by experts in the field and demonstrates ways to provide better services to different populations, many of whom are ignored in AIDS and mental health literature. As a result, this book will provide professionals in the field and students in training with the most current practice information about mental health practice and HIV/AIDS. AIDS and Mental Health Practice will help you understand the diverse needs of people with HIV/AIDS and organize services to assist these populations. AIDS and Mental Health Practice discusses issues that affect several different groups in order to help you understand the unique situations of your clients. You will learn how to design treatments that will be most beneficial to Latinos, intravenous drug users, orphaned children, African Americans, HIV-negative gay men, HIV nonprogressors, HIV-positive transsexuals, end-stage AIDS clients, couples of mixed HIV status, and individuals suffering from HIV-associated Cognitive Motor Disorder. This book provides you with approaches that will improve services for these populations, including: talking to patients about the positive and negative aspects of taking protease inhibitors and discussing their feelings of hope, skepticism, and fear of being disappointed by the treatment preparing clients to go back to work by exploring the meaning of work and referring them to vocational services if necessary providing support groups for people living with AIDS (PLWAs), their loved ones, their families, and individuals in bereavement as a result of an AIDS-related death organizing a HIV-negative gay men's support group that uses exercises and homework to focus on the members' ambivalent connection to the AIDS community, how they remain HIV negative, and ways to deal with separation and grief issues assessing and/or correcting underlying racism in AIDS service organizations The prevention and intervention strategies in Mental Health and AIDS Practice will help you address and treat mental health issues associated with HIV/AIDS and offer clients more effective and relevant services. Author note: Beth E. Schneider is Professor of Sociology, University of California, Santa Barbara, and the co-editor of The Social Context of AIDS. Nancy E. Stoller is Professor of Sociology and Community Studies and Director of the Women's Health Institute, University of California, Santa Cruz. Case study: The closure of Orchid Orphanage -- Introduction. Methodology. -- Continuing crackdown in Henan Province. Detention and harassment of Henan AIDS activists -- The mistreatment of activists helping AIDS orphans. -- Harassment of activists working with persons at high risk of HIV transmission. Activists working with injection drug users and sex workers -- Restrictions on AIDS information for men who have sex with men -- Internet censorship. -- Institutional barriers to AIDS organizations. NGO registration and management laws -- Registering as a commercial enterprise -- Bureaucratic harassment -- Obligations under international law. - - Conclusion. -- Recommendations. To the government of the People's Republic of China: on civil society, on HIV/AIDS policy -- To the Henan provincial government and other local authorities in China -- To the Global Fund to Fight AIDS, Tuberculosis and Malaria and other international donors to HIV/AIDS programs in China -- To U.N. Office of the High Commissioner for Human Rights -- To the U.N. Theme Group on HIV/AIDS, UNAIDS and other U.N. agencies with AIDS programs in China -- To international partners in bilateral rights dialogues with China -- Acknowledgements. "A historical masterpiece! Just when we thought we knew everything about the politics and policies of the HIV/AIDS pandemic, Peter Baldwin surprises us with innovative insights about the sharp differences in policy among countries as well as complex tradeoffs between civil liberties and public goods. This is a refreshing and readable book in which AIDS is used as a lens to understand the public health enterprise ranging from leprosy and syphilis to tuberculosis and SARS. Baldwin offers a deeply historical and comparative understanding of HIV in the industrialized world."—Lawrence O. Gostin, author of Public Health Law: Power, Duty, Restraint "Although a vast literature has emerged to chronicle and reflect on the history of the AIDS epidemic since it was first reported almost a quarter of a century ago, there is nothing like Peter Baldwin's probing and synthetic analysis of AIDS in the industrialized world. Building on his masterful Contagion and the State in Europe 1830-1930, Baldwin has provided a complex historical tapestry of how an epidemic threat has challenged and exposed democracies that thought infectious threats a thing of the past."—Ronald Bayer author of Private Acts, Social Consequences: Aids and the Politics Of Public Health and coauthor with Gerald Oppenheimer of AIDS Doctors: Voices from the Epidemic Three decades into the HIV pandemic, the goals remain clear: reduce the number of infections, improve the health outcomes of those who are infected, and eliminate disparities in care. And one observation continues to gain credence: families are a powerful resource in preventing, adapting to, and coping with HIV. Recognizing their complex role as educators, mentors, and caregivers, Family and HIV/AIDS assembles a wealth of findings from successful prevention and intervention strategies and provides models for translating evidence into effective real-world practice. Chapters spotlight the differing roles of mothers and fathers in prevention efforts, clarify the need for family/community collaborations, and examine core issues of culture, ethnicity, gender, and diagnosis (e.g., minority families, adolescents with psychological disorders). Throughout, risk reduction and health promotion are shown as a viable public health strategy A reference with considerable utility across the health, mental health, and related disciplines, Family and HIV/AIDS will be a go-to resource for practitioners working with families, researchers studying at-risk populations, administrators seeking to create new (or evaluate existing) prevention and care programs, and policymakers involved in funding such programs. Hiv/aids :

DFIDs new strategy, twelfth report of session 2007-08, Vol. 2: Oral and written Evidence NPIN 31456: This report shows how the International HIV/AIDS Alliance works to support community action on human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) in developing countries. The International HIV/AIDS Alliance is a non-governmental organization (NGO), which was established in 1993. It channels technical, financial, and managerial support to partners, which are NGO support programs in thirteen different countries in Africa, Latin America, and Asia. In turn these organizations support local NGOs and community responses to HIV/AIDS. The report explains how the Alliance developed training methodologies and tools as well as program models for training around partnership building, and how these have been applied and adapted to NGO groups in different countries. The report provides recommendations for donors and policy makers as well as for NGO support programs. Moving beyond the boundaries of HIV scholarship, *Modernizing Sexuality* shows how Western idealizations of normative sexuality and the power of modernity intersect in U.S. HIV prevention policy. In this book, Anne Esacove gathers interview, archival, and ethnographic data from the United States and Malawi to reveal failing U.S. prevention efforts. As seen in the promotion of "love matches" and women's right to "say no" to sex, modernization embedded within U.S. policy actually limits action against this widespread epidemic, and even exacerbates HIV risk among women. Instead, by illuminating the collective solutions and multiple paths of prevention used by Malawians, Esacove's analysis expertly exposes these fundamental flaws and provides direction for potentially more effective strategies. Through this analysis, *Modernizing Sexuality* not only reveals major U.S. health policy flaws, but asks important questions about prevention narratives, medicalizing social justice advocacy, and feminist and sexuality theories as a guide for HIV prevention policy. Closing with an alternative narrative, Esacove reimagines risk and offers readers innovative prevention strategies to guide future policy endeavors. Based upon national reviews of current policies, strategic plans, and actual programs, as well as key informant interviews conducted with staff of governmental departments, this study is a detailed analysis of in-country drug policies in relation to the prevention and treatment of HIV/AIDS. One of the first scientific reviews of disease policy, legislation, and financing, this comprehensive research study not only reviews HIV/AIDS policy but also provides recommendations for strengthening programs that deal with this disease. As HIV/AIDS has become recognized as a threat to development in many developing countries, so have these countries attempted to "mainstream" HIV/AIDS into instruments of development. For poor countries, where PRSPs serve as the country's agenda for poverty reduction, it has become crucial for country-level managers and analysts to make credible proposals for the inclusion of HIV/AIDS in the poverty reduction effort. This Toolkit will enable country officials and their partners to prepare and negotiate effectively the inclusion of scaled-up HIV/AIDS programmes in their PRSPs and instruments of debt relief under the enhanced HIPC initiative. *AIDS and the Law* provides comprehensive coverage of the complex legal issues, as well as the underlying medical and scientific issues, surrounding the HIV epidemic. Covering a broad range of legal fields from employment to health care to housing and privacy rights, this essential resource provides thorough up-to-date coverage of a rapidly changing area of law. The Fifth Edition of *AIDS and the Law* has been updated to include: Updates regarding medical advancements in treating and preventing HIV, including pre-exposure prophylaxis (PrEP) Analysis of the FDA's revised recommendations for blood donations from men who have sex with men Synthesized and streamlined analysis of the Americans with Disabilities Act and the ADA Amendments Act of 2008 Comprehensive discussion of housing protections for people living with HIV Updates regarding the National HIV/AIDS Strategy, including the revised Strategy released in 2015 Important developments regarding the U.S. government's treatment of HIV-positive immigrants Discussion of the Affordable Care Act's anti-discrimination provisions for people living with HIV Overview of new international and foreign protections for people living with HIV Information on navigating the many public benefit regimes potentially available to people living with HIV Detailed discussion regarding protections for prisoners living with HIV, including new case law forbidding segregation In a clear and accessible style, *Witnessing AIDS* illustrates how memoirs and diaries are used as self-theorizing documents that approach personal testimony as an intervention in cultural memory. The Department for International Development (DFID) launched its new HIV/AIDS Strategy "Achieving Universal Access: the UK's strategy for halting and reversing the spread of HIV in the developing world" in June 2008. DFID is widely acknowledged as a global leader in tackling HIV/AIDS, particularly amongst vulnerable and marginalised groups, including women and children. Its Strategy provides an excellent analysis of the challenges faced in tackling HIV/AIDS effectively. It makes substantial financial commitments, most notably £6 billion over seven years to strengthen health systems in partner countries, and £1 billion over the same period for the Global Fund to Fight AIDS, Tuberculosis and Malaria. Direct and specific HIV/AIDS funding of this kind continues to be necessary to fill the gaps in prevention and treatment services in high-prevalence countries. But the Strategy is strong on rhetoric but weak in communicating how DFID will implement it. There are few measurable targets or indicators of how the Strategy's effectiveness will be assessed. DFID fails to explain how the high-level funding commitments will be broken down by country or sector, making it difficult to understand how implementation will occur on the ground. The Committee has concerns that social protection programmes, which are now DFID's main instrument for assisting children orphaned and made vulnerable by HIV/AIDS, will not be specifically targeted at this vulnerable. The overall aim of the Strategy is universal access to HIV prevention, treatment and care, but the target date for achieving this is only two years away in 2010. HIV/AIDS is a catastrophe globally but nowhere more so than in sub-Saharan Africa, which in 2008 accounted for 67 percent of cases worldwide and 91 percent of new infections. The Institute of Medicine recommends that the United States and African nations move toward a strategy of shared responsibility such that these nations are empowered to take ownership of their HIV/AIDS problem and work to solve it. A COMPREHENSIVE NEW REFERENCE WORK ON STRUCTURAL APPROACHES TO PREVENTING HIV Structural interventions -- changes to environment aimed at influencing health behaviors -- are the most universal and cost-effective tool in preventing new incidences of HIV. They are not easy to get right, however. *Structural Interventions for HIV Prevention* offers an authoritative reference for both understanding these programs and instituting them to greatest effect. Whether through changes to policy, environment, social/community norms, or a combination of each, this volume offers actionable and attainable blueprints to creating and evaluating programs in any setting or country. It is an essential resource for researchers and practitioners in the continuing fights against HIV. President Obama committed to developing a National HIV/AIDS Strategy with three primary goals: reducing the number of people who become infected with HIV, increasing access to care and optimizing health outcomes for people living with HIV, and reducing HIV-related health disparities. The Strategy is intended to be a concise plan that will identify a set of priorities and strategic action steps tied to measurable outcomes The 'Comprehensive Textbook of AIDS Psychiatry' provides insight into the interface between the psychiatric, medical, and social dimensions of HIV and AIDS and the need for a compassionate, integrated, and approach to the HIV pandemic with an emphasis on humanizing destigmatizing HIV The global response to HIV/AIDS has been a major aspect of global health and development policy over the last three decades. The book illustrates the devastating health impacts of the epidemic, with life expectancy in some countries falling to the lowest levels observed anywhere, and the remarkable success of the global HIV/AIDS response in reversing such extreme outcomes. Concerns about the implications of HIV/AIDS for economic development have played a role in motivating the global HIV/AIDS response. However, evidence on the impacts of HIV/AIDS on economic growth or poverty is weak, and the magnitude and relevance of such economic effects appears trivial compared to the consequences for life and health. Because of the success in extending access to treatment globally, HIV/AIDS has effectively transitioned into a chronic disease. This means that HIV/AIDS absorbs not only a substantial chunk of current global and national financial resources, but that these spending needs are projected to persist over decades. The costs of the HIV/AIDS response thus resemble a long-term financial liability, shaped by past and current policies. Relatedly, the calculus of cost-effectiveness of HIV/AIDS interventions has changed. People who become infected with HIV can now expect to not die because of AIDS; at the same time, each HIV infection results in medical needs and expenditures extending over decades. The book presents a framework for integrating these financial consequences and the transmission dynamics of HIV in the analysis of cost-effectiveness of HIV/AIDS interventions and in the design of HIV/AIDS programs. *AIDS and the Law*, Sixth Edition *AIDS and the Law* provides comprehensive coverage of the complex legal issues, as well as the underlying medical and scientific issues, surrounding the HIV epidemic. Covering a broad range of legal fields from employment to health care to housing and privacy rights, this essential resource provides thorough up-to-date coverage of a rapidly changing area of law. *AIDS and the Law* brings you up-to-date on the latest developments, including: Updates regarding additional consensus that Undetectable = Untransmittable (Chapter 2) Overview of continuing efforts to chip away at the Affordable Care Act (Chapter 2) Discussion

regarding states now imposing work requirements for Medicaid (Chapter 9) Analysis of the Trump Administration's many changes to immigration policy, including policing of immigrants seeking public benefits (Chapter 11) Overview of the Department of Justice's decision regarding whether domestic violence can serve as the basis for asylum (Chapter 11) Updates on new Supreme Court precedent regarding exhaustion of administrative remedies under the Prison Litigation Reform Act (Chapter 14) New case law pertaining to the impact of HIV in the family law context (Chapter 13) An international team of specialists in politics, policy, and activism provide an indispensable guide to the persistent challenges and emerging issues posed by the global HIV/AIDS epidemic, now in its fourth decade. BACKGROUND: Global surveillance of human immunodeficiency virus (HIV) and sexually transmitted infections (STI) is a joint effort of the World Health Organization (WHO) and the Joint United Nations Programme on HIV/ AIDS (UNAIDS). The UNAIDS/WHO Working Group on Global HIV/AIDS and STI Surveillance, initiated in November 1996, is the main coordination and implementation mechanism for UNAIDS and WHO to compile the best information available and to improve the quality of data needed for informed decision-making and planning at the national, regional and global levels. INTRODUCTION: What is second generation surveillance? First generation surveillance relied solely on data on AIDS cases and some sentinel studies on HIV prevalence. In 2000, a new strategy named second generation surveillance (SGS) was promoted to tailor surveillance systems to the epidemic state of a country. More specifically, the strategy proposed the following: 1. to concentrate strategic information resources where they would yield information that is useful in reducing the spread of HIV and in providing care for those affected; 2. to concentrate data collection in key populations at higher risk of HIV exposure, such as populations with high levels of risk behaviour that places them at increased risk or young people at the start of their sexual lives; 3. to compare information on HIV prevalence and on the behaviours that spread the infection to build up an informative picture of changes in the epidemic over time; 4. to make the best use of other sources of information, such as communicable disease surveillance and reproductive health surveys, to increase understanding of the HIV epidemic and the behaviours that spread it. This edited collection brings together the social dimensions of three key aspects of recent biomedical advance in HIV research: Treatment as Prevention (TasP), new technologies such as Pre-Exposure Prophylaxis (PrEP), and the Undetectable equals Untransmittable (U=U) movement. The growth of new forms of biomedical HIV prevention has created hope for the future, signalling the possibility of a world without AIDS. In this context, the volume discusses the profound social, political and ethical dilemmas raised by such advances, which are to do with readiness, access, equity and availability. It examines how HIV prevention has been, and is, re-framed in policy, practice and research, and asks: How best can new biomedical technologies be made available in a profoundly unequal world? What new understandings of responsibility and risk will emerge as HIV becomes a more manageable condition? What new forms of blame will emerge in a context where the technologies to prevent HIV exist, but are not always used? How best can we balance public health's concern for adherence and compliance with the rights of individuals to decide on what is best for themselves and others? Few of these questions have thus far received serious consideration in the academic literature. The editors, all leaders in the social aspects of HIV, have brought together an innovative and international collection of essays by top thinkers and practitioners in the field of HIV. This book is an important resource for academics and professionals interested in HIV research. Chapters "Anticipating Policy, Orienting Services, Celebrating Provision: Reflecting on Scotland's PrEP Journey", "How the science of HIV treatment-as-prevention restructured PEPFAR's strategy: The case for scaling up ART in 'epidemic control' countries", "Stigma and confidentiality indiscretions: Intersecting obstacles to the delivery of Pre-Exposure Prophylaxis to adolescent girls and young women in east Zimbabwe" and "The drive to take an HIV test in rural Uganda: a risk to prevention for young people?" are available open access under a Creative Commons Attribution 4.0 International License via link.springer.com. This book explores a number of issues related to the stigma arising from HIV/AIDS infection, perceived or actual discrimination from the community and society and the extent of vulnerabilities for infected Asian refugees and immigrants. It assesses the health care and treatment regimen for HIV/AIDS accessed by immigrants and refugee claimants in North America, including treatments offered by the health-care system and ethnic communities and their perceptions and biases relating to HIV/AIDS issues. On another level, the book identifies the ways in which HIV-sufferer immigrants and refugees/refugee claimants from Asia are vulnerable to discrimination due to 1) lack of information about HIV/AIDS incidence in the community; 2) inability of the health system to respond appropriately; and 3) the community's need for introspection on their own health issues. This book reveals the dynamics that influence choice, behavior and lifestyle of HIV sufferer immigrants, adds to the existing knowledge about refugees and migrants and proposes a unified theory of discrimination and stigmatization within the context of human rights. In addition, the book presents a number of policy recommendations based on empirical findings with a view to helping reshape policies regarding refugee HIV sufferers and their social ramifications. This book will be of interest to researchers and students in any field from social sciences, health and psychology, as well as practitioners in the field of development and public policy. The book will be beneficial to policy formulators and implementers engaged in addressing the serious threat emanating from the HIV/AIDS pandemic. This book presents a history of AIDS control in Uganda, from the start of the epidemic in the early 1980s up until 2005. Uganda is well known internationally as an AIDS 'success story', both for its bringing down HIV incidence and prevalence over the 1990s, and for its innovative approach to scaling up the provision of antiretroviral therapy.

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