

Checklist for *All the 13 Perspectives of AIDS*

The concept *All the 13 perspectives of AIDS* should help you to better understand the complexity of AIDS, since it involves many different areas and factors of the pandemic. The checklist should be used in conjunction with an understanding of the 13 different perspectives, which should provide you with a good overview on the ongoing pandemic and the complexity of AIDS and what comes with it. Once you have got a good understanding of *All the 13 Perspectives of AIDS*, you can use these when planning for prevention activities. These activities can be anything from national programmes and policies to projects and other interventions on local levels. In some cases, this checklist can also be used when planning for AIDS prevention. Here is a distinction:

- * HIV prevention is used when the intention is to prevent the spread of HIV.
- * AIDS prevention is used to describe efforts to prevent people living with HIV to develop AIDS because of HIV infection.

The checklist consists of a series of questions within each of the 13 perspectives. It is to be used when you are familiar with the perspectives. All perspectives and the applicable questions should be used when planning for activities. It will help you to remind about the key parts, and should be seen as a compliment to the planning you would do for any of your usual activities. When you know what you want to achieve or what your activities are supposed to look like, you should use this document.

Apart from the planning of your actions, this checklist can also be used to reflect on the ongoing work on HIV prevention.

It is a set of questions that should be discussed and answered in connection to any activity that will be implemented on HIV prevention. As you probably will realise when getting acquainted to this, there could be more or other questions added, and some questions might not be applicable for every purpose. Regard it as a support every time you are planning to take action e.g. when making a brochure, designing a project, writing a policy, conducting a training, evaluating a work process etc.

Processes for change, and sustainable and effective interventions take time to develop. In general, there is insufficient time spent on preparing interventions. This can depend on various reasons, such as eager to start the activities, time pressure and / or limited funding. However, it is crucial to plan interventions carefully to reassure quality and a comprehensive approach to our HIV prevention activities sustainable effects. If you spend time using this checklist, you would have a better outcome and a greater impact of your activities.

If you have any questions concerning the use of this checklist, please do not hesitate to contact me. Remember that I have special training courses for project planning and many areas connected to HIV prevention.

Once you have started to use this checklist, you will experience that you slowly start changing your way of thinking and you should be even more skilled in your profession. The positive side effects will be your own personal development.

1. Political

- How can the political support increase or be maintained for the HIV prevention work?
- Are the politicians aware of the issues regarding HIV and AIDS, and its perspectives?
- Can our work be supported by political involvements, for example by quoting politicians that support HIV prevention?
- Is there a risk that some politicians might be obstacle in our work?
- Can we predict the political reactions if more people are being infected with HIV, and how would that change our activities?
- Do we follow the National AIDS Programme and the HIV coordination plan with our activities?
- Which national, regional and local policies and strategies are there referring to HIV/AIDS or SRHR?

2. Financial

- What budget exists for the work on HIV prevention, and specifically on our activities?
- Is there a sound balance of resources used for HIV prevention in comparison to AIDS prevention?
- Is there a sound balance of the resources used among the activities needed, targeting different groups of beneficiaries?
- Which sources exist to apply for resources to improve and develop the work on HIV prevention?
- Which costs increase if more people are being infected with HIV?
- Do we have enough resources to, if we need to consult other people or groups for our activities?
- What resources are available for free, within existing networks?

3. Medical

- Do we have a sufficient organisation to handle testing, counselling, care and treatment? Is the staff trained enough to deal with ART?
- Do we have functioning routines for dealing with patients and relatives?
- Are doctors trained enough to make accurate diagnosis?
- Are the medical equipment sufficient for testing, diagnosis and monitoring?
- Do we have enough storage of medicines needed for AIDS prevention now, and for the future?
- Do we have all the statistics, figures and estimations needed for the overview of the epidemic in our country, region, district...?
- Is there a secure routine for handling of patients' files?
- Is the cooperation and communication with other disciplines functioning properly, e.g. between medical/AIDS prevention and social/HIV prevention?
- Do we have enough knowledge to "translate" medical terms in order to handle information activities towards the general public?

4. Religious

- Do we have religious support for our activities on HIV prevention?
- How can religion be used as enforcement for the good-practice and comprehensive work we need to perform?
- Which religions are present in the areas of our activities?
- What obstacles do religions bring against the activities, and how would it be possible to overcome those?
- Does the key religious societies have enough knowledge about *All the 13 Perspectives of AIDS*, in order for us to carry out our activities for a comprehensive prevention?

5. Social

- Do we have enough knowledge about the development of stigma and its consequences?
- Have we tested the messages we are going to provide on other people, to prevent misunderstandings?
- Have we analysed the information we are sending to people, and assured that we are not going to be the cause of contradictory messages or errors in our activities?
- Can we suspect that some people will react negatively on our activities, and what can we do to be prepared for meeting those reactions?
- Are adequate organisations and groups involved in the planning and implementation of our activities?

6. Psychological

- Have we included representatives from PLWHA or support groups of affected people when planning for the activities?
- Are we sure that the messages in our activities do no harm, or increases the risk of stigma? How can we be surer on that?
- Do we need to link or back-up our activities with other types of activities or cooperation with alternative groups or organisations?
- What support is available for our own staff to deal with unexpected incidences and experiences?

7. Ethical

- Do our activities meet the standards of sexual and reproductive health and rights information and policies?
- Who will have correct information about the disease and is there a risk of errors in this?
- What support will be provided for those who want to know more, as a result of our activities?
- Can we guarantee anonymity in contact with people that we come in contact with during our activities?
- Do we have reliable sources for the information in our activities?
- Are we going to refer people to other services or organisations, and in that case, can we guarantee the quality of the services they provide?
- Can we assure the Human Rights aspects within our activities, and peoples' rights and needs for privacy?
- If the people we meet in our service require more support or help, what would be our procedures?

8. Gender

- Are men and women equally involved in the work on planning for our HIV prevention activities? If not, what can be done to balance this gap?
- Do any of our activities need to be managed by one gender?
- Are women and men being equally targeted in our activities?
- Do we lack any activities targeted specifically towards one of the genders?
- Do we have all the necessary knowledge about gender to be able to reach the expected outcome of our activities?

9. Cultural

- Have we considered cultural specific methods and other alternatives thoroughly enough?
- Do we have enough knowledge about different sub-groups within our society?
- How can we involve people or organisations representing any of the sub-groups that we want to reach?
- Have we put our plans for activities in a cultural context, and are we sure that the activities then can reach the people we intent to reach?
- Could the activities be regarded as offensive towards people with other cultural backgrounds?
- Have we got enough knowledge about people from other cultural background than our own?
- Could there be alternative ways of implementing the activities, e.g. using other type of cultural expressions or involving people, groups or organisations linked to culture?

10. Juridical

- Is our organisation working under relevant policy and legal regulations?
- Is there a risk that we break any laws when implementing our activities?
- Are there any legal obstacles that will prevent us from implementing the activities, and can these be removed somehow?
- Is there any chance that legislation can be changed, and who could we contact to make that happen?
- Do our activities abide to the international agreement on civil rights?

11. Security

- Where will we meet people in HIV prevention activities?
- Is there any possibility that we put colleagues or ourselves at risk when implementing the activities?
- Do we have enough knowledge about what we are going to do, and have a reasonable knowledge about the facts behind our messages and methods?
- Do we need any back up from the police or other security staff for the activities that we are going to implement?
- Is there a risk that we will put PLWHA or other sub-group populations at risk with our activities?

12. Environmental

- What environmental effects do our activities have?
- Is there anything we can do to minimise a negative impact on the environment when planning, implementing and evaluating our activities?
- In which areas are we going to implement the activities, and can we be sure that we will not cause any damage with our information materials, and vehicles and equipment?
- Do we have a sufficient plan to clean up after us?

13. Geographical

- Are there any deviations in the work and prevalence in the perspective of geographical areas?
- Do we have people coming from other areas that we need to take into account when planning for the HIV prevention work, migration, tourism, business...?
- Is the geography an obstacle or facilitator for the HIV prevention work, and how can we adjust the work due to that?
- What methods and channels do we use to distribute our information?
- What do we know of different areas where we are planning to implement the activities?
- Are there any certain areas where we easier will reach those we aim to reach?
