

# Driving change through consultation: PLHIV recommendations during the WHO ART Guidelines revision process

Authors:  
C. Mallouris<sup>1</sup>, G. Caswell<sup>1</sup>, A. Doupe<sup>2</sup>,  
R. Fransen<sup>3</sup>, G. Ndlovu<sup>4</sup>, S. Zaidi<sup>5</sup>

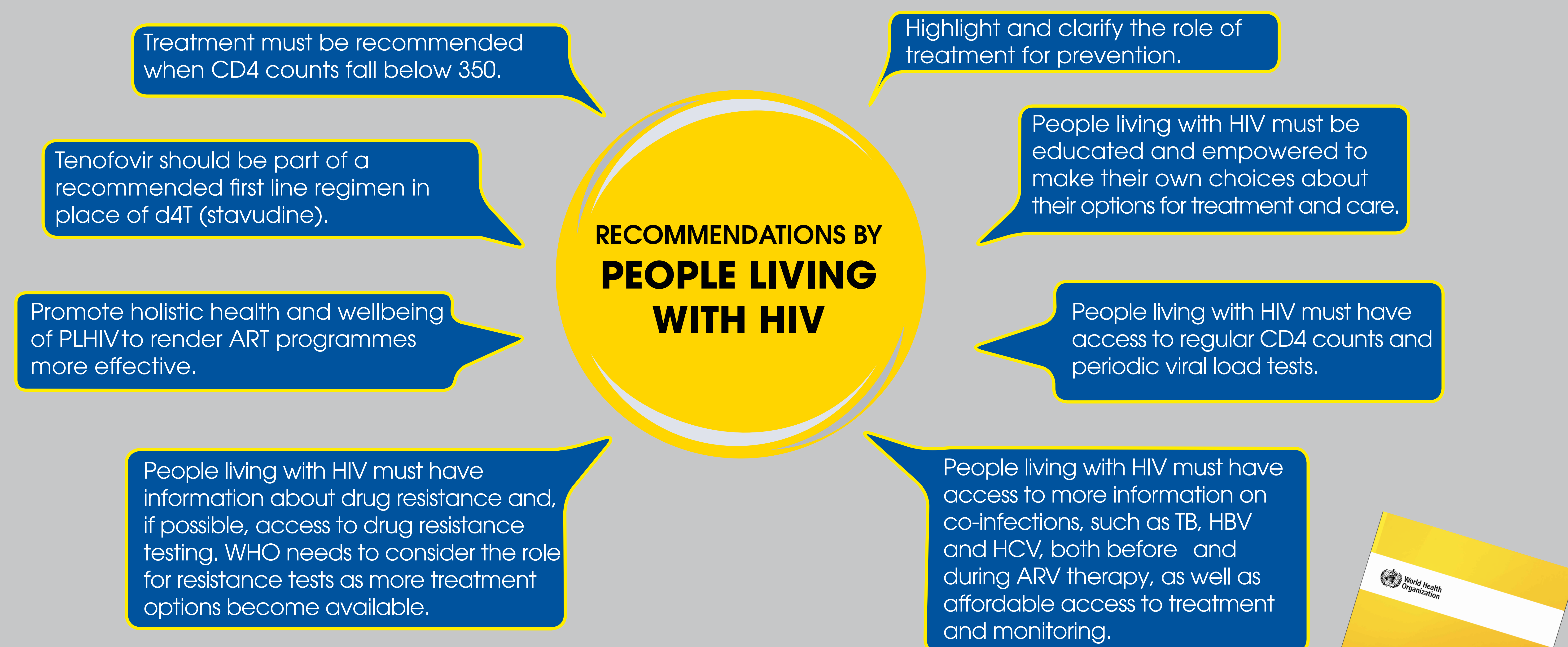
The 2009 World Health Organization's (WHO) Recommendations for Antiretroviral Therapy for HIV Infection in Adults and Adolescents (ART Guidelines) marked the start of a new consultation process between WHO and people living with HIV. The aim was to understand what people living with HIV want and need from treatment programmes, including what was acceptable, beyond biomedical needs, to include in the ART Guidelines.

Four international networks led on consultations with people living with HIV. Each network undertook different approaches to the consultative process:

- Global Network of People Living with HIV (GNP+)**  
GNP+ organised two regional meetings alongside IAS 2009 in Cape Town, South Africa (30 people from 13 countries) and ICAAP 2009 in Bali, Indonesia (23 people from 6 countries). GNP+ also hosted an e-consultation (66 people from 36 countries);
- International Treatment Preparedness Coalition (ITPC)**  
ITPC developed a 30 question survey through its Treatment Monitoring and Advocacy Project, completed by 417 people from 42 countries;
- Young Positives**  
Young Positives promoted the regional meetings organised by GNP+ and partners and participated in the e-consultation.
- International Community of Women Living with HIV (ICW)**  
ICW conducted three focus group discussions among women in Botswana (15), Namibia (15) and Swaziland (13);

The consultative process highlighted:

- the different strategies which networks are using to engage with their constituents for global processes;
- the possibility to identify regional, population-based and general recommendations.

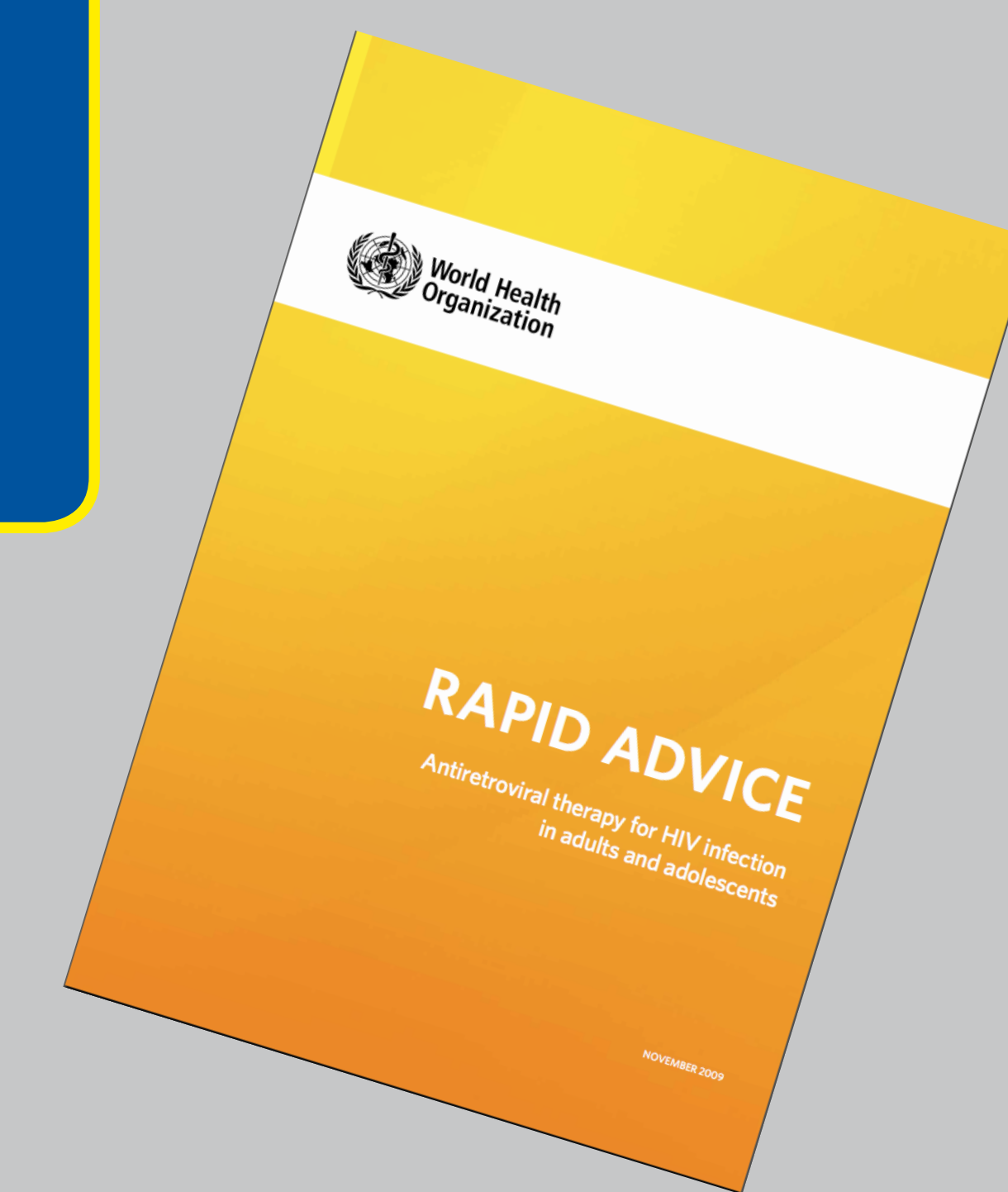


## OUTCOMES

Improved ART Guidelines, informed by the lived experience of people living with HIV. The new WHO guidelines recommend earlier treatment at a CD4 count of 350 with more choice of better-tolerated drugs, including stopping use of d4T (stavudine).

## NEXT STEPS

Networks are continuously improving their ability to reach and engage people living with HIV in processes that directly impact their lives. This consultative approach will be further refined and replicated for future WHO guideline development and other opportunities. Networks will be continuing their advocacy for these recommendations.



This project is supported by the World Health Organisation (WHO) HIV/AIDS Department

<sup>1</sup>Global Network of People living with HIV, Amsterdam, Netherlands.

<sup>3</sup>Young Positives, Amsterdam, Netherlands.

<sup>5</sup>International Treatment Preparedness Coalition, Bangkok, Thailand

<sup>2</sup>World Health Organization, Geneva, Switzerland.

<sup>4</sup>International Community of Women living with HIV, Mbabane, Swaziland.



Strengthening Community Responses  
to HIV Treatment & Prevention

