HIV, Disability and Rehabilitation

• To discuss aspects of a project in partnership with Cameroonian and Canadian organizations to bridge traditionally separate worlds of HIV, disability and rehabilitation

• To explore opportunities to include nurses within comprehensive rehabilitation
Background
HIV/AIDS and Disability

• With increasing access to antiretroviral treatment, more people living longer with HIV
• Rates of HIV in NW province of Cameroon are highest in the country are officially 9% overall
• Higher rates for women – 12%
• Over 25% for female sex workers
HIV/AIDS and Disability

• At least 10% of world’s population living with a disability (World Bank / Yale University study, 2004)
• Rates may be twice as high in many developing countries
• Sometimes do not know if disabilities are related to HIV or other reasons
HIV/AIDS and Disability

• Many people living with HIV
• Many people living with disabilities
• Little has been done to link people living with HIV and people living with (other) disabilities (i.e. through government programs or international development initiatives)
• Leading Together: “ensuring that all people in Canada have access to high-quality rehabilitation programs and services”
Bridging the Gaps

Collaborative project funded by CIDA through Canadian Society for International Health (CSIH) from 2006-8
Bridging the Gaps

Project Goal:
To build upon existing programs and networks in Canada and Cameroon to:
- promote a comprehensive and inclusive approach to rehabilitation with people living with HIV/AIDS and/or other disabilities
- develop models to integrate services
- Develop model(s) to integrate services
Project Objectives

1. Exchange information on current programs and services related to HIV, disability and rehabilitation in Canada and Cameroon
   – Identify gaps and opportunities for collaboration

2. Establish and strengthen relationships between / among communities including service providers, people living with HIV and / or other disabilities
Objectives, cont’d.

3. Exchange knowledge and develop strategies to improve / promote integration of HIV, disability and rehabilitation services

4. Identify mechanisms to address participation restrictions related to gender, HIV and / or other disabilities – including stigma, lack of access to care, burden of care, other vulnerabilities
Objectives, cont’d

5. Explore opportunities and challenges of community based rehabilitation.

6. Develop and share resources and knowledge through reciprocal educational sessions
Partners

– Canadian Working Group on HIV and Rehabilitation (CWGHR) (HIV and rehabilitation)
– International Centre for Disability and Rehabilitation (ICDR) at University of Toronto (rehabilitation and international initiatives)
– Cameroon Baptist Convention Health Board (disability, rehabilitation and HIV in Cameroon)
Activities to date

• Presentations at AIDS 2006 (August 2006)
• Environmental scan - Meetings in Cameroon with HIV/AIDS and disability groups (ICDR - November, 2006)
• Planning educational sessions / conference bringing together HIV and disability groups – August 2007
International Classification of Function - ICF (WHO 2001)

Health Condition
(disorder/disease)

Body function\&structure
(Impairment)

Activities
(Limitation)

Participation
(Restriction)

Environmental Factors

Personal Factors
Rehabilitation Roles in HIV

- Physiotherapy
- Occupational Therapy
- Speech – language pathology
- Audiology
- Mental health
- Vocational rehabilitation
- Complementary and Alternative Therapies
- Role of physicians
Conceptual HIV/AIDS Rehabilitation Framework

Worthington et al. (2005) AIDS Patient Care and STDs. 19(4): 258-271

Disability: in any life domain, is identified as any body impairment, activity limitation or participation restriction identified as an issue by a person living with HIV/AIDS.

- Body impairment
- Activity limitation
- Participation restriction

Rehabilitation = a dynamic process, including all prevention and/or treatment activities and/or services that address body impairments, activity limitations and participation restrictions for an individual.

Person Living with HIV/AIDS

Life Domains

Physical body systems

Functional daily activities

Psychological personal growth

Social community leisure/recreation

Vocational practical

Episodic, Multisystemic

Stigma & Discrimination

Person living with HIV/AIDS

Family & Friends

ASOs & CBOs

Health Sector

Government

Complementary & Alternative Health

Cultural/Religious Organizations

Private Sector

ICF, WHO 2001
Roles for Nursing in Rehabilitation

• (How) are nurses currently involved in rehabilitation related to HIV?
  – e.g. referrals, hospital care, clinics, bridging HIV and rehabilitation?

• How might nursing be integrated into rehabilitation care in HIV?
Roles for Nursing in Rehabilitation

• How might we promote community based rehabilitation with people living with HIV in Canada? Interprofessional approaches?

• Challenges? Opportunities?
Next steps

• Educational sessions / conference
• Planning model of integrated program
• Presentations at CWGHR and ICDR meetings
• Developing resources
• Global engagement component of Federal Initiative on HIV/AIDS - forum (Sept. 2007) – how can we share this knowledge / integrate into Canadian context /
• Other suggestions / ideas?
Acknowledgements

• CIDA
• Canadian Society for International Health
• Interagency Coalition on AIDS and Development
• Project Coordinating Committee (ICDR, CBC, CWGHR)
• Project Advisory Committee