



Abu Dhabi Health Authority (HAAD)

United Nations Development Programme (UNDP)

Action Abu Dhabi: Transforming the HIV response in a rapidly developing society.

Brief Description

The main objective of this project is to support the Abu Dhabi Health Authority in its efforts towards creating an enabling environment for the implementation of a sustainable AIDS Strategic Plan for the Emirate of Abu Dhabi, which aims at preventing the increase of HIV/AIDS prevalence, which is currently at a low level. Towards achieving this objective, the project will build the capacities and raise awareness among major stakeholders including health, legislators, religious and private sector leaders, as well as, people living with HIV along with government leaders. Furthermore, the project will aim to mobilize wide sectors of society to abolish stigma and discrimination against People Living with HIV (PLWH).

Part 1. Situation Analysis

The HIV epidemic in the UAE is currently at a low level. As per UNAIDS statistics, the HIV prevalence rate in the UAE in adults aged 15 and 49 is less than 0.2%. However, UAE is witnessing an impressive economic and development boom, opening the country to a large influx of labor force creating a cultural mix and some rapid demographic changes. This rapid socio-demographic transition the country is going through has driven attention to the risk of HIV epidemic. The main factors of vulnerability resulting from such a transitional social and demographic context include:

- The presence of a large population of young, expatriate men, single, or married away from wife and family, in their prime sexual life;
- The general low level of education among a significant proportion of the laborers and contractors, often resulting in language barriers hampering awareness and education activities;
- The increased mobility of the UAE population (tourism and business) could allow for an easier exposure to casual sex
- High stigma and social isolation around the disease and the affected people, respectively, and the association of STDs in general and HIV in particular with the idea of "sin and punishment".
- Insufficient access to protection means
- Increase of illicit drug use and its relation to HIV spread; Percent of IDU HIV transmission was estimated to be anywhere between 10% and 45% of reported cases. A concern repeatedly voiced about the rise in using Nisswar (a Khat like chewable plant, thought to be promoted by the Pakistani community), particularly among young age groups;
- Homosexual activities amongst young people are feared to have increased in an alarming level. The phenomenon is well recognized but evidence based studies are needed to determine its extent;
- The organization of sex trade (female and male sex workers) seems to be highly recognized although it seems that most people who sell sex are foreigners on visit visas (renewable upon short leaves from the country).

Part II. Strategy

The national response to HIV has been so far scattered, poorly sustained, and essentially focused on the medical aspect of the disease, and much less attention given to the social and preventative measures at community levels. However, there is an expressed political commitment for a prompt and expanded response, and an interest to raise awareness and sensitize community, media and religious leaders.

In this context, UNDP UAE will provide HAAD with technical assistance for the implementation of six workshops addressing different targeted groups (see annex 1) in order to meet the following objectives and outcomes:

Objectives

1. Creating an enabling environment: tackling stigma and mobilizing all stakeholders
2. Initiating Outreach Programmes to Most At Risk Populations (MARPs)
3. Preparing the public for a generalized and established VCT policy
4. Laying the foundation for Second Generation Surveillance studies
5. Mobilize wide sectors of society to abolish stigma and discrimination against PLWH
6. Initiate evidence based prevention programmes particularly among MARPs and young people.

Expected Outcome

1. Creating a body of (200-300) leaders from different stakeholder background to own the response and champion long term action.
2. Initiating 10 or 20 on the ground prevention and outreach projects to start breakthrough initiatives reaching out with a varying amount of intensity to thousands, tens of thousands and millions:

RLs deliver 30- 100 messages to 10- 50 000 audience

Rls delivering media messages reaching to 1-2 Millions

RLs training 100 – 200 other RLs

2-5 Outreach projects

Media leaders delivering anti-stigma messages to millions of audience

Health professionals able to better motivate, care for and facilitate self-help support groups and networks for PLWH.

3. Preparing the way for an Abu Dhabi/UAE committed and Implementable NSP.

Part III. Management Arrangements

The Project will be mutually executed and implemented by HAAD with management support provided by UNDP Abu Dhabi. UNDP will provide support to the project in accordance with UNDP procedures and in full cooperation with the HIV/AIDS Regional Programme.

These services include identifying and delivering technical expertise by international and local consultants with relevant experience. The UNDP and HAAD will be responsible for monitoring the programme, ensuring the proper use of funds, implementation of activities and programme evaluation.

Part IV. Monitoring and Evaluation

The project will be subject to the standard of UNDP review, monitoring and evaluations guidelines. Monitoring will focus on outputs and their contribution toward the intended outcome. Information from monitoring will provide the basis for making decisions and taking action. A combination of monitoring tools will be used, including feedback forms from participants in the seminars and projects reports.

Part V. Legal Context

The project document shall be the instrument referred to as such in Article I of the Standard Basic assistance Agreement between the Government of UAE and the United Nations Development Programme (UNDP), signed by parties on 19 January 1977. The host country-implementing agent shall, for the purpose of the standard Basic Agreement, refer to the Government Cooperating Agent described in the Agreement.

SIGNATURE PAGE

Country: United Arab Emirates

Expected Output(s)/Indicator(s):

(CP outcomes linked to the SRF/MYFF goal and service line)

Outcome 33 – Outreach Programmes for HIV/AIDS
Support on Hiv/AIDS to Abu Dhabi

Implementing partner:

(designated institution/Executing agency)

Abu Dhabi Health Authority (HAAD)

Project Title: Support to HIV/AIDS
Project ID: 00060649
Project Duration: 6 months
Management Arrangement: NEX

Budget _____
General Management Support Fee _____
Total budget: \$ 120,584
Allocated resources: _____
• Government \$ 120,584
• UNDP \$ 40,000
• Other: _____
 ○ Donor _____
 ○ Donor _____
 ○ Donor _____
• In kind contributions _____
Unfunded budget: _____

Agreed by **(Government/Implementing Partner):**

Mr. Zaid El SikSek, CEO Health Authority Abu Dhabi (HAAD)

Agreed by **(UNDP):**

Dr. Khaled Alloush, UNDP Resident Representative