

International Coalition of Older People with HIV (iCOPE HIV)

STEERING COMMITTEE - TERMS OF REFERENCE

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About iCOPE HIV

The International Coalition of Older People with HIV (iCOPE HIV) is a newly established network of people and organizations committed to improving care, optimizing quality of life, and fostering empowerment among ageing and older (age 65+) people living with HIV around the world. Its founding member organizations include the European AIDS Treatment Group (EATG), the National AIDS Treatment Advocacy Project (NATAP), *Realize*, and UTOPIA_BXL. Five representatives of these organizations comprise the iCOPE HIV *Executive Committee*. At present, iCOPE HIV is a network, not a legal entity or a corporation.

The founding members of iCOPE HIV believe that equitable health outcomes for ageing and older people living with HIV will only be possible if we work in collaboration. Those with lived experience and living expertise must be at the centre of any decision or action taken in response to their self-identified needs. Healthcare providers, researchers, community-based HIV organizations, frontline providers of ageing-related services, and policy- and decision-makers should work in partnership with ageing and older people living with HIV to fund and implement a comprehensive response to HIV and ageing worldwide.

Vision: Improved care, optimal quality of life, and empowerment for ageing and elderly people living with HIV around the world.

Strategic Objectives: 1) Care; 2) Quality of Life; and 3) Empowerment.

The iCOPE HIV Steering Committee

Role

The *Steering Committee* provides guidance to the iCOPE HIV *Executive Committee* about the network's strategic priorities, workplan, activities, and plans for sustainability.

Composition

The *Steering Committee* comprises 10-12 members identified as leaders in their regions and communities, and advocates for the well-being and rights of ageing and older people living with HIV. The *Steering Committee* will include at least one member from each of the following global regions: 1) Asia and the Pacific; 2) Eastern Europe and Central Asia; 3) Eastern and Southern Africa; 4) Latin America and the Caribbean; 5) Middle East and North Africa; 6) Western and Central Africa; and 7) Western and Central Europe and North America. Diversity with respect to gender, race/ethnicity, and sexual orientation will be prioritized.

Members

Members are volunteers who share an interest in fostering well-being and equitable access to high-quality care, treatment and support for aging and older people living with HIV. Each will contribute to the success of iCOPE HIV based on their: knowledge of the regional needs of ageing and older people with HIV; established relationships with organizations, associations, communities and individuals in their region; experience with advocacy, education, community development or community-based research; and/or demonstrated leadership skills. Members will serve for a two-year term.

Code of Conduct

1) iCOPE HIV *Steering Committee* members agree to act based on the following shared understandings and values:

- **Respect for Rights:** Aging and older people living with or vulnerable to HIV have the right to independence, participation, care, self-fulfilment and dignity, as described in the [United Nations Principles for Older Persons](#).
- **Intersectionality:** People experience aging with HIV differently depending on their real or perceived identities. It is critical to understand the way a person's race, national or ethnic origin, religion, sex, sexual orientation, gender identity or expression, marital status, family status, disability and/or involvement in the justice system impact their well-being and quality of life.
- **Equitable Access:** Equitable access to culturally safe health and support services and resources for all aging and older people living with or vulnerable to HIV globally is the goal.
- **GIPA/MEPA:** The Greater Involvement and Meaningful Engagement of aging and older people living with HIV in all matters and decisions affecting their lives is fundamental.

2) *Steering Committee* members agree to the following responsibilities:

- Acting with integrity and upholding iCOPE HIV's reputation.
- Attendance and active participation in bi-monthly (every two months) virtual meetings.
- Maintaining regular communication and providing input/feedback on network projects between meetings (an estimated 6 hours of work per month).
- Making good decisions based on: all of the information available; an understanding of the financial, strategic and other implications of each alternative; and a commitment to upholding iCOPE HIV's mandate.
- Maintaining confidentiality regarding iCOPE HIV documents and decisions not in the public domain, as well as information learned about network members and partners in the course of their duties as members.
- Facilitating bi-directional communication between iCOPE HIV and stakeholders in their region and network(s).

Executive Committee Responsibilities

To facilitate the work of the *Steering Committee*, the *Executive Committee* will:

- Implement iCOPE HIV initiatives, based on the guidance of the *Steering Committee* and the resources available
- Periodically update the Terms of Reference, as requested by the members of the *Steering Committee*
- Schedule *Steering Committee* meetings, prepare meeting agendas and circulate minutes
- Provide timely updates on iCOPE HIV activities and respond to questions
- Keep confidential any concerns brought forward with respect to the *Executive Committee* or other *Steering Committee* members; and act to resolve these concerns as quickly as possible
- Conduct monitoring, evaluation and reporting activities for iCOPE HIV

Governance

The iCOPE HIV *Executive Committee* holds the ultimate decision-making authority.

Dissolution

Steering Committee members may withdraw at any time with written notice to the *Executive Committee*.