



HIV-related Needs in Internally Displaced Persons and Other Conflict-affected Populations: A Rapid Situation Assessment Tool



UNHCR
The UN Refugee Agency



UNAIDS
JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

UNHCR
UNICEF
WFP
UNDP
UNFPA
UNODC
ILO
UNESCO
WHO
WORLD BANK

HIV-related Needs in Internally Displaced Persons and Other Conflict-affected Populations: A Rapid Situation Assessment Tool

Contents

1. Introduction.....	4
2. HIV-related needs of IDPs and other conflict-affected populations.....	5
3. Study designs for situation assessment.....	7
4. The methods package.....	11
5. Field assessment.....	15
6. Analysis.....	21
7. Reporting and disseminating.....	23
8. References.....	25
9. Working definitions.....	26

Annexes

A. Ethical standards.....	27
B. District program assessment tool for internally displaced persons and conflict-affected populations.....	28
C. Interview guide: key representatives (official, community leaders).....	38
D. Interview guide: internally displaced persons and conflict-affected people.....	46
E. Focus group discussion: internally displaced persons and mobile persons (male and female); Young people (male and female).....	56

List of acronyms and abbreviations

AIDS	ACQUIRED IMMUNE DEFICIENCY SYNDROME
ART	ANTIRETROVIRAL THERAPY
HIV	HUMAN IMMUNODEFICIENCY VIRUS
CBO	COMMUNITY-BASED ORGANIZATION
IASC	INTERAGENCY STANDING COMMITTEE
IDPs	INTERNALLY DISPLACED PERSONS
M&E	MONITORING AND EVALUATION
MOH	MINISTRY OF HEALTH
NAC	NATIONAL AIDS COUNCIL
NAP	NATIONAL AIDS PROGRAM
NGO	NONGOVERNMENTAL ORGANIZATION
PLHIV	PEOPLE LIVING WITH HIV
PMTCT	PREVENTION OF MOTHER-TO-CHILD TRANSMISSION
STI	SEXUALLY TRANSMITTED INFECTION
UNAIDS	JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS
UNHCR	UNITED NATIONS HIGH COMMISSIONER FOR REFUGEES
VCT	VOLUNTARY COUNSELING AND TESTING
UN	UNITED NATIONS
UNICEF	UNITED NATIONS CHILDREN'S FUND
UNFPA	UNITED NATIONS POPULATION FUND
WHO	WORLD HEALTH ORGANIZATION
WFP	WORLD FOOD PROGRAM

Acknowledgements

This assessment tool for HIV and internally displaced persons (IDPs) is an outcome of multisectoral, multi-agency assessment missions in Côte d'Ivoire, the Democratic Republic of Congo, Nepal and the United Nations High Commissioner for Refugees (UNHCR) first global consultation on HIV and internally displaced persons held in April 2007 in Geneva.

UNHCR and the Joint United Nations programme on HIV/AIDS (UNAIDS) would like to thank all those who contributed their knowledge, experience and time to the development of this assessment tool. Special thanks go to all of those who participated in the HIV and IDP assessment tool in Nepal, the Democratic Republic of Congo and Côte d'Ivoire.

Thanks are also due to Michel Carael, consultant to the HIV unit in UNHCR, for his invaluable input into the drafting of the assessment tool, his expertise during the consultation meeting and his work on this present document.

UNHCR and UNAIDS would also like to thank the working group that provided extensive inputs into the finalization of the assessment tool: Ann Burton (UNHCR), Karl Dehne (UNAIDS), Hsu Lee Nah (IOM), Nabina Rajbhanari (UNAIDS), Susan Purdin (IRC), Marian Schilperoord (UNHCR), Paul Spiegel (UNHCR), Isabel Tavitian-Exley (UNAIDS) and the UNAIDS cosponsors.

■ 1 Introduction

Conflict-induced displacement makes affected populations more vulnerable to HIV transmission. However, this vulnerability does not always necessarily translate into more HIV infections (1, 2).

The extent to which conflict and displacement affect HIV transmission depends upon numerous competing and interacting factors such as loss of livelihoods; availability of education; the type and the length of conflict; the living arrangements and conditions of internally displaced persons (IDPs), whether formal or informal settlement; the context of their new location; and access to health services, including HIV and sexual and reproductive health programs. These factors also have direct implications for HIV vulnerability. Vulnerability results from individual and societal factors that affect adversely one's ability to exert control over one's own health. The factors pertaining to the quality of coverage of services and programs also influence HIV vulnerability. The characteristics of the HIV epidemic, the prevalence in the local populations, the interactions with armed forces, the occurrence of sexual violence and the risk behaviours associated with the new situations conditions of IDPs directly affect the risk of HIV transmission. HIV risk is defined as the probability that a person may acquire HIV infection by, for example, unprotected sex with partners or injecting drug use with shared needles and syringes.

IDPs are defined as "persons or groups of persons who have been forced or obliged to flee or to leave their homes or places of habitual residence, in particular as a result of, or in order to avoid, the effects of armed conflict, situations of generalized violence, violations of human rights or natural or human-made disasters, and who have not crossed an internationally recognized state border" (3).

Following immediate responses in emergencies and conflict, including minimal initial HIV and reproductive health interventions (4-6), more comprehensive HIV programming needs to be developed for IDPs. A broader framework is needed because the focus of intervention shifts from individuals to the general social situations, processes, and displacement phases in which IDPs and their families are living, and which may continue for a long period of time. In addition, because of the common interactions between IDPs and local communities, **both** populations (IDPs and conflict-affected populations) may increase their risk behaviours for HIV and therefore the needs of the local population must also be considered (1, 2).

A recent review of HIV and AIDS strategic plans for eight priority countries with large numbers of IDPs showed that few of the plans identified IDPs as a target population and in most cases, no specific HIV programs addressed IDPs' needs (7). Many governments have difficulties or have abdicated their responsibilities in providing basic services for IDPs and host populations,

sometimes because of difficulties in accessing them. Only those who are displaced in large groups usually receive limited basic emergency assistance, but sexual and reproductive health services are often not provided in the long term (8, 4).

For these reasons, UNHCR and its partners felt a pressing need to conduct rapid HIV situation assessment among IDPs and host populations at the national and local levels. Experience has demonstrated the advantages of engaging intergovernmental agencies, governmental and nongovernmental organizations (NGOs) in multi-agency joint assessments among IDPs. Adopting standardized approaches when conducting multi-agency assessments would ensure that all important information on HIV-related needs of IDPs are included and allow for quicker and comparable analysis. It should also foster agreement on common objectives for HIV intervention programs as well as operational synergy.

■ 2 HIV-related needs of IDPs and other conflict-affected populations

2.1 Rapid HIV situation assessment

UNHCR, the UNAIDS secretariat and collaborating organizations compiled this practical situation assessment tool to assist National AIDS Programmes and UN agencies in organizing joint assessments of conflict-induced vulnerabilities and risks of HIV among IDPs. This document provides guidance on how to conduct such a situation analysis. Rapid HIV situation assessment refers to gathering basic information in a short period of time to guide advocacy and the planning of specific HIV and AIDS program activities. The objectives of the rapid HIV situation assessment are provided in BOX 1.

BOX
1

Objectives of the rapid situation assessment of HIV-related needs among IDPs

1. To assess the effects of conflict on HIV vulnerabilities and risk behaviours among IDPs and other conflict-affected populations, with special attention to vulnerable population subgroups or particularly vulnerable persons such as women and youth.
2. To map existing HIV programs and identify specific gaps and needs (short-term and longterm) for new or revised programming.
3. To develop advocacy strategies for prevention, care, support and treatment of HIV and AIDS among IDPs and conflict-affected populations.

This rapid HIV situation assessment tool is intended for program planners and implementers, primarily at central and sub-national levels. Governments, UN agencies and NGOs are all likely users of this guide.

2.2 Supporting tools and other resources

This tool is focused on specific steps to conduct a rapid situation assessment. It can be used before initiating HIV and sexual and reproductive health programs or to guide further development or refinement of existing programs. Other documents give specific instructions about the planning and implementation of HIV interventions (9, 4). The tool is not a stand-alone document. It was partly adapted from and complements existing tools on related issues, such as the Guidelines for HIV/AIDS Interventions in Emergency Settings; Rapid Assessment of Substance Use in Conflict-affected and Displaced Populations; Reproductive Health in Refugee Situations; The Manual of Reproductive Health Kits for Crisis Situations; and Situational Assessment on Migration and HIV/AIDS in South Asia (4-13). Several other manuals and guidelines are also available from UNHCR (14).

The initial assessment tool was developed and then field tested during a rapid assessment amongst IDPs and other conflict-affected populations in Nepal in 2006 (15). This was followed in 2007 by extensive testing of the tool in two other HIV and IDP situational assessments in conflict-affected areas of Côte d'Ivoire and the Democratic Republic of Congo (16). The tool was also discussed in working groups at the First Global Consultation on HIV and Internally Displaced Persons in Geneva in 2007 (16). These examples should be used as references and need to be adapted.

2.3 Purpose of the assessment tool

The tool has been designed and field tested for use in conflict and post-conflict situations, not during the acute phase of a crisis or a natural disaster, which does not mean that it cannot be adapted. Immediately upon occurrence of a disaster or large population movement, the Guidelines for HIV/AIDS Interventions in Emergency Settings (4) should be applied. This rapid HIV situation assessment tool should enable assessment teams to use an array of appropriate

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_29601

