

**“PROGRAMMING FOR CHILDREN AFFECTED BY HIV/AIDS AND CHILDREN AFFECTED BY ARMED-CONFLICT: COORDINATION, BEST PRACTICES, AND LESSONS LEARNED.”**

*Meeting Notes, April 21, 2006*

**Please note: The opinions expressed in WNCAC meetings and reflected in these notes are those of the individual participants and are not endorsed by the WNCAC, which provides an open forum for exchange among those concerned with children affected by armed conflict.**

The Washington Network held its Bi-monthly meeting on April 21, 2006 to discuss coordination, best practices and lessons learned between programming targeted at Children affected by Armed Conflict and Children affected by HIV/AIDS. Participants discussed the overlapping issues, identifiable mutual themes, and current pitfalls concerning these two programming approaches. It was further concluded that the benefits of addressing these two issues through a coordinated and collaborative effort far out-weighs the current benefits/achievements that these programs experience individually.

The conversation was framed by *Massimo Lowicki-Zucca*, Project Officer for HIV/AIDS in Emergency Settings at UNICEF NY and *John Williamson*, Co-chair WNCAC and Senior Technical Advisor of the Displaced Children and Orphans Fund/USAID.

The network also welcomed its new co-Chair L. Randolph Carter, who replaced Michael Shieler. Randolph comes to the network with extensive experience in programming for children affected by armed conflict. His wealth of experience, which stems from the years of war in his country Liberia, encompasses effective and constructive youth participation, peer mediation, education and conflict resolution, youth mobilization and reintegration, as well youth program/project facilitation and monitoring. Randolph now serves as Children and Youth Specialist for the Search For Common Ground and has worked alongside many of the network’s members.

**Discussion Points:**

***HIV/AIDS programming in an emergency setting***

- HIV/AIDS issues belong in the analysis of conflicts
  - Spreads rapidly in conflict situations
    - Reduced services
    - Increased vulnerability of population
  - Affects the post-conflict situation as well
    - Refugee/IDP populations
    - Ex-combatants
    - Former child soldiers

### ***How do we address HIV/AIDS programming in emergency settings?***

- Health services (collapse of public services)
- Not only a medical issues, but an issue that cuts across all spectrums of society
- Review of experiences
  - Interagency guidelines, tools  
[http://www.unfpa.org/upload/lib\\_pub\\_file/249\\_filename\\_guidelines-hiv-emer.pdf](http://www.unfpa.org/upload/lib_pub_file/249_filename_guidelines-hiv-emer.pdf)
  - Framework for programming  
[http://www.unicef.org/aids/index\\_documents.html](http://www.unicef.org/aids/index_documents.html)
  - Guidelines on Gender-based programming

### ***Why is HIV/AIDS prevalence lower in countries not affected by conflict (i.e. Zambia, Botswana, South Africa...)?***

- Factors:
  - Militaries select people that are not-affected
  - Emergencies are fluid, not all of a country is necessarily affected by the emergency
  - Some ideas that conflict actually reduces the spread of HIV
  - Is it a post-conflict environment?
    - Patterns of displacement
    - Structures
  - Each situation is defined by a series of factors and each needs a separate analysis
    - Botswana, Zambia, South Africa: Role of mining
    - Programming in Uganda
      - IDP camps
      - Night commuting
  - “Ancillary range of services”
  - Mobility of populations
  - Economic situation
  - Historic
  - In emergency situations, the change in power dynamics
    - Rape as a weapon of war
- What is the “make-up” of each crisis?
  - Vulnerability
  - Risks
- HIV/AIDS is more than a medical issue, intertwined into everything
  - Two schools of thought
    - Increased by conflict
    - Decreased by conflict

### ***Conclusions from workshop in Entebbe:***

- Attention has been given to trauma and psychosocial stress
- There is a significant set of actors involved in armed conflict issues
- Another set of actors are solely involved in HIV/AIDS issues
  - These groups weren't talking to each other, while there was a growing discussion on psycho-social issues with regard to HIV/AIDS
    - Dynamic relationship exists between them
    - Issues of overlap:
      - Loss of family/parents

- Importance of education
- Gender affect vulnerability
- Collaborative effort necessary with affected communities, among agencies
- Children/youth participation
- Economic issues & Livelihoods
- Risk of HIV/AIDS high among youth
- Social/cultural patterns
- The need to build local capacities
  
- Promoting psychosocial well-being, rather than treating trauma
  - Need “normalization” of life
  - Build on traditional contexts and approaches
  - Work at community level
  - “Journey of Life” community mobilization tool [www.repssi.com](http://www.repssi.com)
- The Framework, 5 strategies
  - Strengthen capacities of Families to provide care & support
  - Strengthen capacities of Communities to provide care & support
  - Strengthen capacities of Children, themselves, to provide care & support
  - Strengthen capacities of Governments, to provide for the needs of its citizens and capacity for coordination
  - At the societal level: reduce stigma and discrimination
  
- Pitfalls:
  - Focusing on a specific category of children (child soldiers, abducted, displaced, orphaned...)
    - There are a lot of similarities among each group
      - Family reunification
      - Increased capacity for communities to protect the most vulnerable
      - Psycho-social care
    - Program design is often donor driven; moving away from “category approach” to program design has an impact for programming
      - How do we transcend current practices and not stick to setting categories?
      - Sector-wide approach to funding
      - Sector-wide approach to community, multi-sector projects
      - The five above mentioned strategies relates to a cross sector approach
        - View of a menu of services decided by the communities
        - Want opportunities to use the money that we have, making optimal use of resources = multi sector approach
      - Donor are responding to situations in their environment
        - Long-term funding commitments can be problematic (political implications depending on administration)

- Look at a trust fund approach?
- Need to be analytical about Donor response
- Millennium Development Goals
- Outcomes vs. Impact programme evaluation
- The more we think about multi-sector approaches, the more we need to think about monitoring and evaluation

***Program Sharing***

- House sub-committee Hearing on Uganda April 26 2 – 4
- May 18 – 19 American University, Youth and conflict conference  
[www.american.edu/sis/peacebuilding](http://www.american.edu/sis/peacebuilding)
- August 28 – 30 Expanding the Dialogue, child soldier initiative workshop in Winnipeg, Canada  
<http://www.childsoldiersinitiative.org/>

***For further information/documents relating to this topic:***

[http://www.unaids.org/en/Issues/Impact\\_HIV/hiv\\_in\\_emergencies.asp](http://www.unaids.org/en/Issues/Impact_HIV/hiv_in_emergencies.asp)

***Upcoming event:***

***Lessons Learned and Good Practices: World Learning's USAID/CMM-funded African Peace and Development Initiative (APADI) in Ethiopia and Uganda***

**Date:** May 22, 2006

**Time:** 12:00 p.m. - 2:00 p.m.

**Venue:** World Learning for International Development, Conference Room

**Address:** 1015 15th Street, N.W., Suite 750, Washington DC

<http://www.sidw.org/event/2006/lessons-learned-and-good-practices-world-learnings-usaid-cmm-funded-african-peace-and-development-initiative-apadi>