

## STRATEGIC PLAN ON HIV and AIDS FOR 2005-2007

### I. INTRODUCTION

1. UNHCR's primary purpose is to safeguard the rights and well-being of refugees. HIV and AIDS prevention and impact mitigation are essential components in the overall protection of refugees. While refugees do not necessarily have high HIV prevalence rates, they are often disproportionately vulnerable to HIV due to the environment in which they find themselves. This is especially so in the case of women, young people and children. Refugees are also inextricably linked to any successful effort to combat the pandemic in the countries that host them. In order to reduce stigmatization and to ensure that the whole population has access to HIV and AIDS prevention and care interventions, UNHCR believes refugees must be integrated into host government HIV and AIDS policies and programmes. Although UNHCR is conducting HIV and AIDS activities globally, we concentrate our efforts in sub-Saharan Africa, the region most affected by the pandemic. Having signed a Cooperation Framework with UNAIDS in 1998, UNHCR became a UNAIDS Cosponsor in June 2004.

2. The fundamental principles of international protection and durable solutions for refugees, as well as the universally recognized human rights standards remain the core framework upon which UNHCR policies are formulated. UNHCR's policies cover: the need to address HIV and AIDS in the earliest stage of an emergency situation and throughout the stabilization period; efforts to expand and improve prevention programmes for the entire refugee community as a refugee situation stabilizes as well as to provide comprehensive care services for people with HIV and AIDS; HIV testing in refugee situations; and resettlement considerations.

3. UNHCR's Refugees, HIV and AIDS Strategic Plan for 2005-2007 is a follow-up to its 2002-2004 Strategic Plan. Introduced in 2002, the 2002-2004 Strategic Plan on HIV/AIDS and Refugees was based on a human rights framework with three main objectives:

- (i) to ensure that refugees live in dignity, free from discrimination, with their human rights respected;
- (ii) to ensure that a minimum and coordinated package of HIV/AIDS programmes is provided in refugee emergency situations; and,
- (iii) to implement multi-sectoral and comprehensive HIV/AIDS pilot programmes in more stable situations that link prevention to care and reinforce surveillance, monitoring and evaluation.

4. From the phased implementation of these three objectives, UNHCR and its partners have realized the need to:

- (i) accept that each refugee situation is unique: HIV and AIDS programmes in low resource settings need to be adapted to local circumstances;
- (ii) ensure that host countries always include refugees and all other potentially vulnerable groups in their efforts to combat HIV and AIDS;
- (iii) promote sub-regional approaches to address the constant movement between countries;
- (iv) improve cooperation and coordination between UNHCR and other United Nations agencies, non-governmental organizations (NGOs) and governments in both host countries and countries of origin;
- (v) provide more vigorous support to such regional initiatives as the Great Lakes Initiative on AIDS<sup>1</sup> and West Africa's Mano River Union AIDS Initiative<sup>2</sup>;
- (vi) ensure that donors include refugees and internally displaced persons in all HIV and AIDS programmes and funding proposals;
- (vii) encourage donor governments to ease conditions preventing funds being simultaneously used for resident and displaced populations; and,
- (viii) ensure that refugees are not excluded as antiretroviral therapy becomes more widely available in developing countries.

## II UNHCR's ADVISORY COMMITTEE ON HIV/AIDS AND REFUGEES

5. UNHCR's Advisory Committee on HIV/AIDS and Refugees, originally consisting of a group of approximately 35 participants representing recipient and donor countries, United Nations agencies, NGOs and intergovernmental organizations, and now enlarged to include representatives from all UNAIDS Cosponsors, as well as some additional countries and NGOs, and the Global Fund to Fight AIDS, Tuberculosis and Malaria (details annexed), was established in 2001 to:

- (i) advocate for the rights of refugees to be included in HIV programmes and to reduce discriminatory practices;
- (ii) promote partnerships and complementary collaboration;
- (iii) improve the provision of technical and financial support in terms of an agreed plan of action; and
- (iv) identify potential support for refugees from existing bilateral or multilateral aid.

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<sup>1</sup> See [www.onusida-aoc.org/Eng/GLIAEN.htm](http://www.onusida-aoc.org/Eng/GLIAEN.htm)

<sup>2</sup> See [www.onusida-aoc.org/Eng/Mano%20River%20Union%20Initiative.htm](http://www.onusida-aoc.org/Eng/Mano%20River%20Union%20Initiative.htm)

6. The Advisory Committee will on 16 February consider UNHCR's draft Strategic Plan for 2005-2007, elements of which are set out below. Comments from this Advisory Committee will be incorporated into a final draft Strategic Plan that will be sent to Executive Committee members and Standing Committee observers as an addendum to this Conference Room Paper by 1 March 2005.

### III. UNHCR'S STRATEGIC PLAN 2005-2007: ELEMENTS

7. Refugees, HIV and AIDS: UNHCR's Strategic Plan for 2005-2007 is based on UNHCR's policies, lessons learned from implementation of the 2002-2004 Strategic Plan, technical guidance from the UNAIDS Secretariat and other Cosponsors, and the Inter-Agency Standing Committee (IASC) guidelines on HIV/AIDS in emergency settings. The Plan will state UNHCR's objectives and key strategies from 2005 to 2007 to combat HIV and AIDS among refugees, returnees and other persons of concern as well as to ensure that the human rights of persons of concern to UNHCR who are living with HIV and AIDS are duly respected.

8. In addition to protection concerns and basic human rights principles, other fundamental approaches to be considered in the 2005-2007 Strategic Plan and during all stages of programme implementation include the need to:

- (i) integrate refugees into HIV policies, funding proposals and programmes of countries of asylum;
- (ii) address the needs of refugee women and children, and mainstream gender and age considerations;
- (iii) adopt a sub-regional approach, reflecting the cycle of displacement; and,
- (iv) advocate for the elimination of HIV-related discrimination against refugees and other persons of concern to UNHCR.

9. The ten objectives of the strategy are:

- (i) protection - to ensure that refugees, asylum-seekers and other persons of concern who are affected by HIV and AIDS can live in dignity, free from discrimination, and that their human rights are respected, including their non-discriminatory enjoyment of the highest attainable standard of physical and mental health;
- (ii) coordination and mainstreaming - to ensure that HIV policies and interventions for refugees are coordinated, mainstreamed and integrated with those at the international, regional, sub-regional, country and organizational levels;
- (iii) durable solutions - to develop and incorporate HIV policies and interventions into UNHCR's programmes for durable solutions and to mitigate the long-term effects of HIV;
- (iv) advocacy - to advocate for HIV-related protection, policy and programme integration, and sub-regional initiatives for refugees and other persons of concern in a consistent and sustained manner at all levels;

- (v) quality HIV programming - to ensure appropriate, integrated HIV interventions for refugees, returnees and other persons of concern;
- (vi) prevention - to reduce HIV transmission and HIV morbidity;
- (vii) support, care and treatment - to reduce HIV morbidity and mortality;
- (viii) assessment, surveillance, monitoring and evaluation - to improve programme implementation and evaluation;
- (ix) training and capacity building - to improve HIV-related skills and capacities of UNHCR, its partners and refugees; and,
- (x) resource mobilization - to increase funds and move beyond traditional donors to ensure the objectives stated in this Strategic Plan are achieved.

### UNHCR's HIV ADVISORY COMMITTEE INFORMATION NOTE

1. A meeting on HIV and Refugees on 23 May 2001 agreed on the establishment of an Advisory Committee to: 1) advocate for the rights of refugees to be included in HIV programmes and to reduce discriminatory practices; 2) promote partnerships and complementary collaboration; 3) improve the provision of technical and financial support in terms of an agreed plan of action; and 4) identify potential support for refugees from existing bilateral or multilateral aid.

2. On 5 February 2002 the 1<sup>st</sup> Advisory Group meeting was held to discuss UNHCR's HIV/AIDS and Refugees Strategic Plan for 2002-04. It consisted of a well-balanced group of approximately 35 participants representing recipient and donor countries, United Nations agencies and NGOs/IGOs.

	<i>Governments</i>	<i>UN Agencies</i>	<i>NGOs</i>
1	Australia	ILO	AHA
2	Denmark	IOM	ICMC
3	Finland	OHCHR	IFRC
4	France	UNAIDS	MSF
5	Ghana	Secretariat	NCA
6	Greece	UNESCO	
7	Iran	UNFPA	
8	Italy	UNICEF	
9	Netherlands	WFP	
10	Norway	WHO	
11	South Africa		
12	Spain		
13	Sweden		
14	Switzerland		
15	Uganda		
16	United Kingdom		
17	USA		
18	Zambia		

4. For the upcoming meeting, this group will include representatives from all UNAIDS Cosponsors (e.g. the addition of UNDP, UNODC, and World Bank), as well as some additional Missions and NGOs, and the Global Fund to Fight AIDS, Tuberculosis and Malaria.

5. For further insight into UNHCR's HIV programmes, see UNHCR HIV and Refugees Report for 2003. It can be found at [www.unhcr.org/hiv-aids](http://www.unhcr.org/hiv-aids) –then click on Mission reports and workshops on the bottom left hand side of the page.