

August 2007

Dear ASCI Research Community,

Below please find the AIDS, Security & Conflict Initiative Research Update which contains a variety of recent research and other resources related to ASCI's four thematic areas: 1) HIV/AIDS in uniformed services, including military, peacekeeping and policing; 2) HIV/AIDS, humanitarian crises and post-conflict transitions; 3) HIV/AIDS, fragile and crisis states; 4) Cross-cutting issues of gender, data collection & measurement, and media representation. These updates are a regular supplement to the ASCI Newsletter which will be distributed over the duration of the Initiative. Please email asci@ssrc.org if you would like us to include other relevant resources and materials in future Research Updates. For more information and resources on AIDS, security and conflict please visit the ASCI website at <http://asci.ssrc.org>.

Also, look for the ASCI Research Hub launching soon at <http://asci.ssrc.org>. The site will feature a searchable database of relevant resources and organizations. It will also allow users to upload their own resources, publish their own lists of recommended resources, and connect with other researchers and policy makers working on AIDS, security and conflict.

The June 2007 ASCI Research Update includes:

1. Recent academic and policy publications
2. Events - conferences, CFPs, etc
3. Web resources
4. Relevant Partners

1. Recent academic and policy publications

Allred KJ. "Peacekeepers and Prostitutes: How Deployed Forces Fuel the Demand for Trafficked Women and New Hope for Stopping It." *Armed Forces Soc* 2006; 33(1): 5-23.

On numerous occasions in the past fifteen years, U.N. peacekeepers have been accused of sexually assaulting or abusing the populations they serve. A Comprehensive Review of peacekeeper misconduct completed in 2005 identified significant problems and recommended numerous changes to address them. The U.S. Army and NATO, in a response to the possibility that their deployed troops will be engaged in or facilitate human trafficking, have enacted new policies intended to remove their troops from the demand for women trafficked for sexual services. The Department of Defense and NATO initiatives are similar to those being considered by the United Nations for preventing sexual misconduct by its peacekeepers. Because the United States, NATO, and the United Nations are all addressing the problems of sexual misconduct by deployed troops, their efforts should be mutually reinforcing. The examples of American and NATO armed forces offer hope that the United Nations will also enact strong measures to prevent future misconduct by its peacekeepers.

Aniekwu, Nkolika Ijeoma; Ayo Atsenuwa. "Sexual Violence and HIV/AIDS in Sub-Saharan Africa: An Intimate Link." *Local Environment*, Volume 12, Issue 3 June 2007 , pages 313 - 324.

Sexual violence is an epidemic that often overlaps with the AIDS pandemic and is often a cause and consequence of the spread of HIV/AIDS amongst women and girls. Presently, half or more of the 40 million people infected with HIV in the world are women. Millions of those infected are aged 15-24 years and have suffered some form of intimate partner violence. This group accounts for half of all new infections. In sub-Saharan Africa, young women account for 75% of HIV infections and are approximately two-and-a-half times more likely to be infected than young men of the same age (UNAIDS, Report on the Global AIDS Epidemic: 4th Global Report, Geneva, 2004). What makes women, especially girls and younger women, so disproportionately vulnerable to HIV infection, and why have current AIDS control efforts in sub-Saharan Africa largely failed to stem the epidemic in this gender?

<http://dx.doi.org/10.1080/13549830601098289>

Bora, Jacob. (2007) "The political economy of AIDS leadership in developing countries: An exploratory analysis." *Social Science & Medicine*. Volume 64, Issue 8, April 2007, Pages 1585-1599.

The commitment of high-level government leaders is widely recognized as a key factor in curbing national AIDS epidemics. But where does such leadership come from? This paper presents a quantitative analysis of the determinants of AIDS leadership in 54 developing countries, using the 2003 AIDS Program Effort Index "political support" score as an indicator of political commitment. Explanatory variables include measures of political institutions as well as economic development and integration. Models developed in the analysis explain over half of the variation in commitment across the countries in the sample. In particular, press freedoms, income equality, and HIV prevalence stand out as determinants of political commitment.

<http://www.sciencedirect.com/science?>

[_ob=ArticleURL&_udi=B6VBF-4N08V2B-2&_user=10&_coverDate=04%2F30%2F2007&_rdoc=1&_fmt=&_orig=search&_sort=d&view=c&_acct=C000050221&_version=1&_urlVersion=0&_userid=10&md5=82e965f15ec7cf600ea0694e92fb15b1](http://www.sciencedirect.com/science?_ob=ArticleURL&_udi=B6VBF-4N08V2B-2&_user=10&_coverDate=04%2F30%2F2007&_rdoc=1&_fmt=&_orig=search&_sort=d&view=c&_acct=C000050221&_version=1&_urlVersion=0&_userid=10&md5=82e965f15ec7cf600ea0694e92fb15b1)

Bosmans, Marleen. "Challenges in Aid to Rape Victims: the Case of the Democratic Republic of the Congo." *Essex Human Rights Review* Vol. 4 No. 1, February 2007.

Officially the war in the Democratic Republic of the Congo (DRC) has ended, but human rights reports leave no doubt that the conflict is still going on, particularly in the Eastern provinces. The widespread and systematic use of rape as a weapon of war has put the issue of sexual violence at the heart of the public debate. Rape victims are faced with severe physical and psychological trauma, high risks of unwanted pregnancies, infections with sexually transmitted diseases including HIV/AIDS, and rejection by their family and the community. Based on broader empirical research focusing on the sexual and reproductive health (SRH) rights and needs of war-affected children, this article suggests the adoption of a rights-based approach in the aid to rape victims. Such an approach should not only pay attention to the provision of direct aid to the victims and to protecting them from being repeatedly victimised, but also to the prevention of the further spread of sexual violence. Direct aid to the victims requires the development of comprehensive programmes that should include five interrelated and complementary components: medical assistance, psychosocial support, economic aid, legal aid, and protection. Prevention should focus on the fight against impunity and the elimination of socio-cultural barriers that enhance the 'acceptability' of sexual violence perpetrated by non-combatants. In the reconstruction of the country the fight against impunity will be paramount to counteract the 'ethical vacuum' that has been created, whereby other forms of sexual violence, such as adult men making use of the services of children who try to survive as sex workers, are not only tolerated but even accepted. Given the complete state of impoverishment in the DRC to which the author calls attention, the support of international donors will be indispensable. The creation of effective coordinating mechanisms will be essential and the strengthening of the national and local capacities to respond properly to the needs of the rape victims will be paramount in order to guarantee sustainability of the programmes.

<http://projects.essex.ac.uk/ehrr/archive/pdf/Volume%20IV/pdf%20vol.IV/RapeDRCrevisedtextOct20062AF%20CR%2029.1106.pdf>

Chretien, Jean-Paul. "The importance of militaries from developing countries in global infectious disease surveillance." *Bulletin of the World Health Organization* 2007;85:174-180.

Military forces from developing countries have become increasingly important as facilitators of their government's foreign policy, taking part in peacekeeping operations, military exercises and humanitarian relief missions. Deployment of these forces presents both challenges and opportunities for infectious disease surveillance and control. Troop movements may cause or extend epidemics by introducing novel agents to susceptible populations. Conversely, military units with disease surveillance and response capabilities can extend those capabilities to civilian populations not served by civilian public health programmes, such as those in remote or post-disaster settings. In Peru and Thailand, military health organizations in partnership with the military of the United States use their laboratory, epidemiological, communications and logistical resources to support civilian ministry of health efforts. As their role in international affairs expands, surveillance capabilities of militaries from developing countries should be enhanced, perhaps through partnerships with militaries from high-income countries. Military-to-military and military-to-civilian partnerships, with the support of national and international civilian health organizations, could also greatly strengthen global infectious disease surveillance, particularly in remote and post-disaster areas where military forces are present.

<http://www.who.int/bulletin/volumes/85/3/06-037101.pdf>

Escola de Cultura de Pau. "Analysis of DDR programmes in the world during 2006." Mar 2007.

The study presented below is the update to the one carried out last year. The aim of this study is to analyse current DDR programmes, not those of the past, in the conviction that those that are being carried out at the moment have a general profile that is quite novel, both in terms of the quantity of experiences existing, and the number of beneficiaries and the international context in which they are produced. Although the historical, geographical, political and other contexts are quite different, there are lessons that can be learnt from each and every one of the cases. The basis for performing this comparative analysis is to be found in the country briefings of the 22 DDR programmes.¹ With regard to the previous year's study, the programme in Sierra Leone was completed, and programmes in Nepal, Niger and Uganda have been included. This study has been drawn up in a practical and didactic way, with the result that it may prove just as useful to read the conclusions as to study each of the cases analysed, all of which are very diverse.

<http://www.escolapau.org/english/programas/ddr.htm>

Fabiani, Massimo, et al. "HIV-1 prevalence and factors associated with infection in the conflict-affected region of North Uganda." *Conflict and Health* 2007, 1:3.

Since 1986, northern Uganda has been severely affected by civil strife with most of its population currently living internally displaced in protected camps. This study aims at estimating the HIV-1 prevalence among this population and the factors associated with infection. In June-December 2005, a total of 3051 antenatal clinic attendees in Gulu, Kitgum and Pader districts were anonymously tested for HIV-1 infection as part of routine sentinel surveillance. Factors associated with the infection were evaluated using logistic regression models. The age-standardised HIV-1 prevalence was 10.3%, 9.1% and 4.3% in the Gulu, Kitgum and Pader district, respectively. The overall prevalence in the area comprised of these districts was 8.2% when data was weighted according to the districts' population size. Data from all sites combined show that, besides older women [20–24 years: adjusted odds ratio (AOR) = 1.96, 95% confidence interval (CI): 1.29–2.97; 25–29 years: AOR = 2.01, 95% CI: 1.30–3.11; ≥ 30 years: AOR = 1.91, 95% CI: 1.23–2.97], unmarried women (AOR = 1.47, 95% CI: 1.06–2.04), and those with a partner with a non-traditional occupation (AOR = 1.62, 95% CI: 1.18–2.21), women living outside of protected camps for internally displaced persons have a higher risk of being HIV-1 infected than internally displaced women (AOR = 1.55, 95% CI: 1.15–2.08). Although published data from Gulu district show a declining HIV-1 prevalence trend that is consistent with that observed at the national level since 1993, the prevalence in North Uganda is still high. Internally displaced women have a lower risk of being infected probably because of their reduced mobility and accessibility, and increased access to health prevention services.

<http://www.conflictandhealth.com/content/1/1/3>

Henry, Marsha. "Gender, security and development." *Conflict, Security & Development*, Volume 7, Issue 1 April 2007, pages 61 - 84.

This paper examines the links amongst the concepts of gender, security. In particular, it seeks to examine how each of the concepts can be critically understood independently and as interrelated. Through understanding each of these concepts as socially and discursively constructed, contingent and fluid, the paper examines the consequences of such a theoretical framework for key issues facing gender, security and development practitioners: Trafficking, Resolution 1325 and HIV/AIDS.

<http://dx.doi.org/10.1080/14678800601176535>

Husseini, Abdullatif; Niveen ME Abu-Rmeileh. "HIV/AIDS-Related Knowledge and Attitudes of Palestinian Women in the Occupied Palestinian Territory." *Am J Health Behav.* 2007; 31(3):323-334.

Objective: To explore Palestinian women's knowledge, perceptions, and attitudes towards HIV/AIDS. Methods: Data used in this study were collected as a part of the Demographic and Health Survey (DHS) 2004 in the Occupied Palestinian Territory (OPT). Results: Most of the women in the OPT (93.4%) had heard of AIDS. They had fair general knowledge of HIV/AIDS prevention methods and transmission. TV was the main source of information about HIV/AIDS. Among the determinants of HIV/AIDS knowledge identified by this study were education, region, and locality. Conclusion: A research-informed policy concerning HIV/AIDS prevention should be formulated

<http://www.atypon-link.com/PNG/doi/pdf/10.5555/ajhb.2007.31.3.323?cookieSet=1>

Hyder, Tina; Johanna Mac Veigh. "Gender-based violence against children in emergencies: Save the Children UK's response." *Gender & Development, Volume 15, Issue 1 March 2007*, pages 81 - 93.

Violence against children is a global phenomenon. During humanitarian crises, and armed conflict in particular, the potential for gender-based violence (GBV), including sexual exploitation, increases. Children, particularly adolescent girls, are vulnerable. This article traces the impact of an exposé of sexual abuse by humanitarian workers on the wider protection policies and practices of Save the Children UK. The article concludes that awareness of gender discrimination must underpin the implementation of protection policies for all children and their carers. Furthermore, it proposes that comprehensive responses to GBV must be devised, alongside prevention strategies, if children are to be effectively protected.

<http://dx.doi.org/10.1080/13552070601179110>

Ikpe, Eka. "Challenging the discourse on fragile states." *Conflict, Security & Development, Volume 7, Issue 1 April 2007*, pages 85 - 124.

The paper reviews the current discourse on state fragility and examines the definitional basis for this label. It puts forward a model for defining state fragility that is based on the state's capacity, which is its capability to protect itself, deliver services and manage economic risks and the state's resilience, which has to do with the management of social relations and political risks. This model also takes into account both middle-income and low-income countries. The nature and extent of state fragility here is a function of the relationship between state capacity and resilience. The relationship between state fragility and development and security outcomes is addressed with reference to the impact of initial conditions. The paper concludes by examining the resulting aid allocation on the basis of the existing state fragility discourse and puts forward an alternative aid allocation structure based on the proposed model for state fragility, and finds significant differences to the existing arrangement.
<http://dx.doi.org/10.1080/14678800601176543>

Izumi, Kaori. "Gender-based violence and property grabbing in Africa: a denial of women's liberty and security." *Gender & Development*, Volume 15, Issue 1 March 2007 , pages 11 - 23.

Property grabbing is a new form of gendered violence against women, threatening the security of women across Southern and East Africa. Forced evictions are often accompanied by further acts of violence, including physical and mental harassment, and abuse. Widows are particularly vulnerable, partly as a result of weakened customary practice and social safety nets that used to provide support to widowed women and their children, a situation made worse by the HIV and AIDS epidemic. Defending their property has cost some women their lives, while other women have lost their shelter and source of livelihoods, and have become destitute. The harassment and humiliation that often accompany property grabbing further strip women of their self-esteem, affecting their ability to defend their rights.
<http://dx.doi.org/10.1080/13552070601178823>

Joint United Nations Programme on HIV/AIDS. Policy Brief: HIV and Refugees. UNAIDS, Jan 2007, 4 pp.

Conflict, persecution and violence affect millions of people worldwide, forcing them to uproot their lives. Refugees flee their country of origin across national borders, often to a neighbouring country. This policy brief focuses specifically on actions required to address the spread and effect of HIV on refugees and their host communities.
http://data.unaids.org/pub/Report/2007/JC1300-PolicyBrief-Refugees_en.pdf

Katz, Rebecca & Daniel A Singer. "Health and security in foreign policy." *Bulletin of the World Health Organization*. March 2007, 85 (3).

Historically, health has occupied the lower echelons of national priorities. Over the past decade, however, national policy-makers have increasingly recognized the deleterious impacts that health crises may have on national interests. As a result, particular health issues occasionally have been elevated within national agendas, especially if they have implications for foreign policy and/or they are perceived as threats to national security.
<http://www.who.int/bulletin/volumes/85/3/06-036889.pdf>

O'Reilly M, Walden V, Yetter M, Humanitarian Programmes and HIV and AIDS: A Practical Approach to Mainstreaming, Oxfam Novib, February 2007.

Manual aimed at humanitarian, pre-dominantly rapid-onset programmes in all countries. It is produced by Oxfam Novib and based on the organisation's practical experience. The manual elaborates on how to mainstream HIV/AIDS in humanitarian programmes, internal as well as external. It is explained how emergencies can result in spreading HIV, although it is also noted that conflict can hinder the spread of the virus. Furthermore, attention is given to the ways in which HIV can aggravate the impact of emergencies. Vulnerable groups are recognized in which, unlike other manuals, attention is also given to young males and the factors that increase their susceptibility to HIV infection. Recommendations are made for mainstreaming HIV/AIDS throughout the emergency project cycle, including the phase of pre-emergency preparedness, assessment, implementation, and monitoring and evaluation. Special attention is asked for the avoidance of stigmatization in projects. The method recommended for this is to target all households where there are chronically ill people. A note is made that while gender dimensions deserve full attention in projects, women should not be portrayed as victims. Furthermore, it is shown that the ABC-approach might not be as simple to implement as it seems. Another recognized problem is the taboo resting on rape of men. Advice is given to managers. Examples include the designation of a HIV focal point, awareness trainings for staff and trainings for communities. Finally, examples are given for activities and exercises that can be used for internal as well as external projects. Appendices include basic information sheets about HIV/AIDS, an overview of factors increasing HIV in emergencies and possible responses, and activity cards.

<http://publications.oxfam.org.uk/oxfam/display.asp?searchterm=Humanitarian+Programmes+and+HIV+and+AIDS&K=9780855985622>

"POLITICAL RELATIONS -- REFUGEES: Burundi–Tanzania." Africa Research Bulletin: Political, Social and Cultural Series. Volume 44 Issue 2 Page 16962B-16963B, March 2007.

Reluctant HIV-positive refugees are being urged to return home. The United Nations refugee agency, UNHCR, is urging HIV-positive Burundian refugees in camps in neighbouring Tanzania to return home, where they will have better access to treatment and care, and care programmes have been set up for them. After 13 years of civil war, Burundi held democratic elections in 2005 that ushered in a new government and brought hope for a return home to an estimated 400,000 refugees. About 152,000 of them are assisted by UNHCR in camps in Tanzania. The only group encouraged to remain in the camps, at least in the interim, are pregnant HIV-positive women. "Prevention of mother-to-child transmission services are not strong in Burundi", Bottineau said. "We are asking them to stay there, give birth in hospitals where they have access to drugs, and remain there for a period of two months after the child's birth." (continues...)

<http://www.blackwell-synergy.com/doi/abs/10.1111/j.1467-825X.2007.00816.x>

SILVA, Marlene, SANTANA, Vilma and DOURADO, Inês. Military rank and AIDS proportionate mortality in the Brazilian Navy. Cad. Saúde Pública, Feb. 2007, vol.23, no. 2, p.419-426. ISSN 0102-311X.

This study describes AIDS mortality and occupational factors among servicemen in the Brazilian Navy. This is a proportional mortality study of 2,586 servicemen's death certificates (20-72 years of age) recorded from 1991 to 1995. Death certificates and occupational histories came from the Brazilian Navy Insurance System archives. Association was measured using proportionate mortality odds ratios obtained with unconditional logistic regression. AIDS proportionate mortality was estimated at 4.8% (n = 125) and increased during the study period, particularly among servicemen under 50 years of age and those with low rank. As compared to other occupations, there was relative excess AIDS in the "management" (proportionate mortality odds ratio, PMORage-adjusted = 2.45; 95%CI: 1.27-4.71), "secretarial" (PMORage-adjusted = 2.49; 95%CI: 1.22-5.08), and "janitorial" (PMORage-adjusted = 2.61; 95%CI: 1.10-6.16) occupational groups. AIDS proportionate mortality was higher among male than female military members. Higher rates were observed in some occupational groups when the members were low ranking. Power distribution, gender issues, and low socioeconomic status require further investigation using more appropriate methods.

http://www.scielo.br/scielo.php?pid=S0102-311X2007000200018&script=sci_abstract

Todd, Catherine, et al. "Association between expatriation and HIV awareness and knowledge among injecting drug users in Kabul, Afghanistan: A cross-sectional comparison of former refugees to those remaining during conflict." *Confl Health*. 2007; 1: 5.

Little is known about human immunodeficiency virus (HIV) awareness among Afghan injecting drug users (IDUs), many of whom initiated injecting as refugees. We explored whether differences in HIV awareness and knowledge exist between Afghan IDUs who were refugees compared to those never having left Afghanistan. A convenience sample of IDUs in Kabul, Afghanistan was recruited into a cross-sectional study through street outreach over a one year period beginning in 2005. Participants completed an interviewer-administered questionnaire and underwent voluntary counseling and testing for HIV, syphilis, hepatitis B surface antigen, and hepatitis C antibody. Differences in HIV awareness and specific HIV knowledge between IDU who lived outside the country in the last decade versus those who had not were assessed with logistic regression. Of 464 IDUs, 463 (99%) were male; median age and age at first injection were 29 and 25 years, respectively. Most (86.4%) had lived or worked outside the country in the past ten years. Awareness of HIV was reported by 46.1%; those having been outside the country in the last decade were significantly more likely to have heard of HIV (48.3% vs. 31.7%; OR = 2.00, 95% CI: 1.14 – 3.53). However, of those aware of HIV, only 38.3% could name three correct transmission routes; specific HIV knowledge was not significantly associated with residence outside the country. Accurate HIV knowledge among Afghan IDUs is low, though former refugees had greater HIV awareness. Reported high-risk injecting behavior was not significantly different between IDU that were refugees and those that did not leave the country, indicating that all Afghan IDU should receive targeted prevention programming.

<http://www.pubmedcentral.nih.gov/articlerender.fcgi?artid=1847809>

United Nations Education Scientific and Cultural Organization. Educational Responses to HIV and AIDS for Refugees and Internally Displaced Persons. United Nations Educational, Scientific and Cultural Organization, Jan 2007, 31 pp.

This discussion paper examines the current situation with regard to conflict, displacement, and HIV, and notes the protection risks faced by refugees and Internally Displaced Persons (IDPs). It recognises the importance of education for affected populations, and refers to the existing and significant work undertaken to develop minimum standards for education in emergency situations. The paper then focuses on the key components of education sector responses to HIV and AIDS, and addresses the policy and programmatic measures required to address the prevention, treatment, care and support needs of refugees and IDPs as well as the HIV-related stigma and discrimination that they often face. Figures, References.
<http://unesdoc.unesco.org/images/0014/001493/149356e.pdf>

World Bank. 2007 Global Monitoring Report Millennium Development Goals: Confronting the Challenges of Gender Equality and Fragile States.

"The largest 'MDG deficit' is in states with weak institutions and governance, and often in conflict-the "fragile states." With 9 percent of the developing world's population, they account for over one-fourth of the extreme poor and nearly one-third of child deaths and 12-year olds who do not complete primary school. Efforts to support their transition from fragility must be deepened through improving response time to crises and opportunities, increasing field presence, better interagency collaboration, and building on lessons from successful state-building transitions." (p.3)

<http://web.worldbank.org/WBSITE/EXTERNAL/EXTDEC/EXTGLOBALMONITOR/EXTGLOMONREP2007/0,,menuPK:3413296~pagePK:64218926~piPK:64218953~theSitePK:3413261,00.html>

Woodrow Wilson Center. REPORT FROM AFRICA: Population, Health, Environment, and Conflict.

Woodrow Wilson Center publication containing the following articles on the major issues facing Sub-Saharan Africa by experts in the field: 1) Sustained Development, Democracy, and Peace in Africa by Wangari Maathai 2) Madagascar Naturellement: Birth Control Is My Environmental Priority by President Marc Ravalomanana 3) Minerals, Forests, and Violent Conflict in the Democratic Republic of the Congo by John Katunga 4) Population, Migration, and Water Conflicts in the Pangani River Basin, Tanzania by Milline J. Mbonile 5) HIV/AIDS and Governance in Africa by Nana K. Poku 6) Climate-Related Conflicts in West Africa by Anthony Nyong 7) Oil Conflict and Accumulation Politics in Nigeria by Kenneth Omeje 8) Conflict and Cooperation: Making the Case for Environmental Pathways to Peacebuilding in the Great Lakes Region by Patricia Kameri-Mbote

<http://www.wilsoncenter.org/topics/pubs/ReportFromAfrica12.pdf>

2. Events - conferences, meetings, etc

Global Women's Leadership in HIV/AIDS Workshop
16 July- 10 August 2007, Washington DC, United States

The world has never had a more pressing need to involve women in the fight against AIDS. Worldwide, 17.5 million women are living with HIV, and three out of four live in sub-Saharan Africa. Young women age 15 to 24 in sub-Saharan Africa are three times more likely to be HIV-positive than young men of that age. More than half of all adults living with HIV in the Caribbean are women, and new HIV infections among women are rising rapidly in Asia and elsewhere.

http://www.cedpa.org/section/training/aids_leadership

8th International Congress on AIDS in Asia and the Pacific (ICAAP)

19-23 August 2007, Colombo, Sri Lanka

Within the theme "Waves of Change - Waves of Hope" the 8th ICAAP aims - To enhance the local, regional and global response to HIV/AIDS by creating an opportunity: - to achieve meaningful exchanges of expertise, experiences, advances, lessons learnt, challenges faced and successes achieved in HIV/AIDS programmes; - to form meaningful and sustainable partnerships between stakeholders at all levels; - to showcase achievements and successes and share best practices; - to empower and strengthen political, community and business leadership, adopting a consultative, collaborative and participatory approach; - to ensure that communities that are infected, affected and vulnerable to HIV/AIDS and their families are free from stigmatization, marginalization and discrimination by addressing political, social, economic and cultural barriers and working towards societies in which they can enjoy the full range of human rights and protections as enshrined in the Universal Declaration of Human Rights and associated Protocols; - to promote equal access to prevention, support, treatment and care for all people

<http://www.icaap8.lk/index.htm>

First International Conference on Child Sexual Abuse in Africa (Monday, September 24, 2007)

The specific objectives of the conference are to: (a) identify the causes, nature and magnitude of child sexual abuse in Africa; (b) create a forum to identify strategies to deal with sexual violence against children; (c) provide an opportunity to share information and experiences with a view to enhancing partnership and networking.

<http://www.anppcankenya.co.ke/>

11th European AIDS conference (EACS)

24-27 October, Madrid, Spain

The European AIDS Clinical Society (EACS) is a not-for-profit scientific society of European clinicians and researchers, active in the field of HIV/AIDS. It was established in 1991 by Pr. Nathan Clumeck and Pr. Christine Katlama and has around 600 members. It is currently chaired by Pr. José M. Gatell from Barcelona, Spain as President and Pr. Peter Reiss from the Netherlands as Vice President. The Executive Committee consists of ten voting members, elected every four years, and three ex-officio non-voting members.

<http://www.eacs-conference2007.com/>

Congreso centroamericano de ITS/VIH/SIDA

4-9 November 2007, Managua, Nicaragua

En el marco de CONCASIDA 2007 se realizará reunión del Consejo de Ministros de Salud (COMISCA) que permita tomar decisiones políticas y estratégicas en el tema de VIH/Sida para la Región Centroamericana. Así mismo, se dará seguimiento y se evaluará la declaración de los Presidentes Centroamericanos firmada en El Salvador (noviembre 2005) para ser ratificada y/o renovada por los Presidentes centroamericanos donde el tema del VIH/Sida sea prioridad para la agenda regional.

<http://www.concasida2007.org>

3. Web Resources

AIDS Portal: Sexual Violence & HIV

Sexual violence is a public health issue that has both psychological and physical implications for HIV prevention, treatment and care. Sexual violence includes rape, forced prostitution and other coerced sexual activity. This page brings together research and best practice for addressing the issue of sexual violence and HIV. The knowledge library is being developed in partnership with the Sexual Violence Research Initiative.

http://www.aidsportal.org/overlay_details.aspx?nex=53

Factors of Vulnerability Towards HIV/AIDS in Cambodia

Numerous factors render Cambodia particularly vulnerable to HIV/AIDS. These include a legacy of genocide, civil war, and famine. In tandem with persistent poverty and political turmoil, this scenario has led to a weak health infrastructure badly in need of rehabilitation ...

<http://topics.developmentgateway.org/gender/rc/ItemDetail.do~1104090?intcmp=700>

Fried, Susana, *Show Us the Money: Is Violence against Women on the HIV & AIDS Funding Agenda? Women Won't Wait*, March 2007.

Report which speaks of two interrelated pandemics: HIV/AIDS and violence against women. Both are cause and consequence of the other. *Show Us the Money* analyses the work of five key HIV/AIDS agencies on the basis of policy framework assessments and the support institutions gave to projects, to gauge the levels and patterns of funding directed to programming at the intersection of HIV/AIDS and violence against women and girls. Gender inequality underlies the feminization of HIV/AIDS and the persistence of gender based violence. However, this is not reflected consistently in policies and programs of governments, donors and other actors. A clear human-rights basis is lacking. Furthermore, although spending on HIV has increased over the years, funding for sexual and reproductive health work has experienced a reduction with severe implications for violence against women and the realization of women's rights. Current donor frameworks lack markers for gender-based violence as well as clear funding allocations for the intersection of violence against women and girls and HIV/AIDS. This leads to difficulties regarding accountability of donors and advocating for more funding. The author warns for that vulnerable groups in a society will become further marginalized and gender equality likewise, when there is too little oversight by civil society actors on what is done with donated money. Recommendations are presented in the conclusion in which increased attention is asked for the inter-linkage of HIV/AIDS and violence against women.

<http://www.womenwontwait.org/>

"HIV/AIDS, Democracy And Governance In Africa: A Retrospect of Recent Developments." Gain Issues Brief No. 10; May 2007

<http://www.justiceafrica.org/blog/2007/05/03/aids-and-governance-brief-no10/>

HIV/STI Prevention among Uniformed Services in Ukraine

The Project's objective is to significantly reduce incidences of HIV/STI and form safe behavior among the personnel of the uniformed services in Ukraine. The Project aims to support the development of effective mechanisms for comprehensive HIV/STI prevention measures in the uniformed services of Ukraine. The Project is a subcomponent of the UN Country Program Action Plan for Ukraine for 2006-2010. Also, the Project contributes to the "National Programme on HIV/AIDS Prevention and Care for people living with HIV in 2004-2008". European Union is the donor of the Project granting 2,5 millions Euros for the implementation of the Project activities from it's official launch in November 2005 untill April 2008.

<http://www.zdorovavarta.org.ua/index.php>

International Peace Academy. Coping with Crisis Working Paper Series

EVOLVING CHALLENGES TO HUMAN AND INTERNATIONAL SECURITY "In this ongoing series of Working Papers, IPA has asked leading experts to undertake a mapping exercise, presenting an assessment of critical challenges to human and international security. A first group of papers provides a horizontal perspective, examining the intersection of multiple challenges in specific regions of the world. A second group takes a vertical approach, providing in-depth analysis of global challenges relating to organized violence, poverty, population trends, public health, and climate change, among other topics. The Working Papers have three main objectives: to advance the understanding of these critical challenges and their interlinkages; to assess capacities to cope with these challenges and to draw scenarios for plausible future developments; and to offer a baseline for longer-term research and policy development." --Terje Rød-Larsen, President, International Peace Academy

<http://www.ipacademy.org/our-work/coping-with-crisis/working-papers>

Royal Tropical Institute. Exchange magazine on HIV/AIDS, Sexuality and Gender.

<http://www.kit.nl/smartsite.shtml?id=10497>

4. Relevant Partners

The Geneva Centre for the Democratic Control of Armed Forces

<http://www.dcaf.ch/>

The International Centre of Technical Cooperation on HIV/AIDS (ICTC)

ICTC is an initiative of the Brazilian Government and the Joint United Nations Programme on HIV/AIDS (UNAIDS). Its main objective is to strengthen the capacity of developing countries to respond to AIDS through horizontal technical cooperation. ICTC operates with a network of governmental and non-governmental organizations from Brazil and other developing countries in order to meet demands for cooperation. The network is currently comprised of 74 organizations which work in a variety of areas related to combating the AIDS epidemic, and which were accredited following public selection processes in 2005 and 2006.
<http://www.cict-aids.org>

International Peace Academy

<http://www.ipacademy.org/>