

Securing an AIDS Free Future: Practical Lessons about Security and AIDS in Conflict and Post-Conflict Settings



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UN Security Council Resolution 1983

“Saving succeeding generations from the scourge of war” was the primary motivation for creating the United Nations. Since its founding, the United Nations has engaged in 67 peacekeeping missions in furtherance of this fundamental aim, but no conflict on the agenda of the Security Council has resulted in greater or more widespread devastation than AIDS. In 2011 alone, 2.5 million people were newly infected with HIV and 1.7 million people died of AIDS-related causes.

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President of Gabon Ali Ben Bongo Ondimba (R) addresses the United Nations Security Council meeting on impact of HIV/AIDS epidemic on International Peace and Security, 7 June 2011 in New York.

“Global, national and personal insecurity undermine efforts to prevent new HIV infections and increase access to HIV services for both peacekeepers and civilians,” “This resolution will help to mitigate the impact of HIV among uniformed services and civilian populations affected by conflict and increase access to HIV services.”

*President of Gabon,
Ali Bongo Ondimba.*

OVERVIEW AND BACKGROUND

LEADERSHIP OF THE SECURITY COUNCIL

The Security Council has played a leading role in raising global awareness of the links between AIDS and security. Through landmark resolutions 1308 in 2000 and 1883 in 2009, the Security Council has galvanized global action to integrate HIV responses in uniformed services. In this regard, the UN has led by example, addressing HIV as an integral component of its own peacekeeping missions in diverse settings.

These Resolutions emphasize that societal instability can exacerbate the spread of HIV and, if left unchecked, threaten international peace and security. The Security Council called on UNAIDS and the UN Department of Peacekeeping Operations (DPKO) to implement HIV-specific strategies and programmes in UN peacekeeping missions.

The Resolutions also highlight the need to leverage the potential of peacekeepers to combat sexual and gender-based violence and called for integration of HIV and SGBV prevention in demobilization, disarmament and reintegration processes and security sector reforms.

United Nations partnerships to address the epidemic’s security dimensions

To implement the directives of the Security Council, UNAIDS and DPKO entered into a landmark cooperative agreement in 2001. This unique collaboration sparked the imagination of programme planners, practitioners and scholars, encouraging innovation and strengthening the evidence base for action on AIDS and security.

Today, HIV is being comprehensively integrated in all United Nations peacekeeping operations. UNAIDS/DPKO HIV/AIDS units have forged strong working partnerships with other aspects of peacekeeping missions, including in areas of gender; demobilization, disarmament and reintegration; and security sector reform. The UNAIDS/DPKO collaboration on AIDS has leveraged the strengths and expertise of other UN partners, including UNFPA, UN Women, the UN High Commissioner on Refugees, UNDP, UNICEF and WHO.

The effects of conflict are often especially acute for women and girls. In many settings, widespread sexual violence has been used as a tool of warfare, increasing gender inequalities and contributing to the spread of HIV.

In conflict and post-conflict settings, women (including many with children) often confront the choice between starving to death in devastated local communities or entering refugee camps where rape and sexual violence may be endemic.



UNAIDS Executive Director, Michel Sidibé and Under Secretary General of DPKO Hervé Ladsous

PRIORITY THEMES FOR SCALING UP

A unified United Nations system in conflict and post-conflict settings has also worked closely with diverse local partners, including:

- national AIDS programmes
- national ministries (such as health and gender)
- non-governmental organizations, community organizations and
- broader civil society, and networks of people living with HIV.

UN partners, Member States with the support of multilateral funding mechanisms and bilateral Donors have leveraged their presence in conflict and post-conflict settings to strengthen the capacity of national partners, with the ultimate aim of building national capacity to respond to HIV, promote gender equity, sustain the peace, eradicate impunity, increase commitment to the rule of law, and build robust national institutions.

Over more than a decade of experience in implementing Security Council Resolutions, the UNAIDS/DPKO collaboration has also accumulated considerable knowledge on AIDS and security. Best practices have been identified, and both successes and challenges have been documented.

Regular reports by UNAIDS and DPKO has enabled the Security Council to monitor progress in implementing SCR 1308. In 2011, UNAIDS and DPKO submitted a comprehensive report – “*On the Frontline: A review of programmes that address HIV among international peacekeepers and uniformed services 2005–2010*” – documenting a decade of experience in integrating HIV interventions in peacekeeping operations.

In 2013, UNAIDS and DPKO will submit a comprehensive report to the Security Council on action taken in implementing Security Council Resolution 1983.

This document identifies lessons learnt as a result of the implementation of the Security Council’s directives on AIDS and security. Drawing on experiences from UN peacekeeping operations over the last 12 years, the report underscores the security dimensions of the AIDS response, summarizes both successes and challenges to date in integrating HIV in peacekeeping missions, and identifies key priorities for future efforts to mainstream HIV across all aspects of peacekeeping operations.

Accelerating action to address AIDS in conflict and post-conflict settings is an urgent global necessity. According to the World Bank, more than 1 in 5 people live in countries affected by violent conflict.

Effective action to minimize the vulnerability resulting from conflict is critical to sustain and accelerate gains in responding to AIDS. Robust, evidence-based action is especially vital to mitigate the effects of conflict on women and girls and to advance towards genuine gender equality.

An overriding challenge in all aspects of the AIDS response is to mobilize sufficient resources for HIV-related programmes and use every iota of funding as effectively as possible. According to a recent review of HIV-related initiatives in UN peacekeeping operations, limited resources constitute one of the greatest barriers to HIV-related programming in peacekeeping missions.

Available evidence indicates that peacekeeping operations offer an excellent venue for leveraging investments to generate broad-based public health benefits. Reaching the nearly 120,000 personnel who currently serve in UN peacekeeping missions not only helps protect the health and well-being of peacekeepers themselves, but the effects of such investments are magnified many times over, as peacekeepers serve as agents of change in surrounding communities and eventually in their home countries.

* Missions represented were Côte d’Ivoire (UNOCI), the Democratic Republic of Congo (MONUSCO), Haiti (MINUSTAH), Lebanon (UNIFIL), Sudan (UNAMID), and South Sudan (UNMISS).

HIV programmes in peacekeeping operations also help build durable capacity in the countries and communities in which missions are situated, yielding long-term benefits for national and community-based AIDS responses. And by prioritising the mainstreaming of AIDS and sexual and gender-based violence programming in peacekeeping operations, current investments are generating long-lasting change in the security apparatus of the UN and among contributing countries.

In May 2012, AIDS officers from six peacekeeping missions’ met with their respective UNAIDS Country Coordinator counterparts to examine available evidence and determine how best to catalyse an enhanced AIDS response in conflict and post-conflict settings. Over three days of consultations, it was agreed to prioritise work in three thematic areas – interventions to address sexual and gender-based violence, integration of HIV in demobilization, disarmament and reintegration programmes, and integration of HIV in security sector reform initiatives.

The extract below examines lessons learned from peacekeeping operations in each of these thematic areas. Information for these case studies is drawn from a data-gathering exercise jointly implemented by UNAIDS and DPKO to inform accelerated implementation of Security Council Resolution 1983.

SEXUAL AND GENDER-BASED VIOLENCE

International outrage over the use of rape as a weapon of war is only one reason prompting the formation of United Nations Secretary-General Ban Ki-moon's multi-year *UNiTE to End Violence against Women* campaign. The campaign has issued a broad call to women's organisations, international organisations, governments, the private sector, civil society, and people of all ages to get involved in efforts to end the pandemic of violence against women and girls. Among the campaign initiatives is an international network that focuses ending the use of rape as a weapon of war.

As conflict and post-conflict settings increase women's risks, UN agencies operating in conflict settings have taken steps to protect women and girls from sexual and gender-based violence. UN agencies have organised security patrols, used physical deterrents to prevent unauthorized entry into camps, and in some cases relocated the most vulnerable women to safer areas. UNAIDS-DPKO HIV/AIDS units collaborate with UN partners (e.g., UNHCR, UNFPA), UNICEF and UN Women) to reduce risks of SGBV, provide reproductive health services to prevent the deaths of mothers and children, and deliver services to reduce risks relating to HIV and other sexually transmitted infections.

UNITED NATIONS ORGANIZATION STABILIZATION MISSION IN THE DEMOCRATIC REPUBLIC OF THE CONGO (MONUSCO)

MONUSCO

Quick Facts

Conflict: A series of conflicts in the DRC following the Rwanda genocide involved numerous countries in the region resulted in 3.8 million deaths from 1998 to 2004.

Mission Mandate: Ensure the protection of civilians, humanitarian personnel and human rights defenders under imminent threat of physical violence and to support the Government of the DRC in its stabilization and peace consolidation efforts

Mission Personnel: 23,586
(as of 2010).

MONUSCO works with diverse partners to transform social norms in a setting where rape and sexual violence have been widely used as tools of warfare. MONUSCO's ultimate aim is to convert perpetrators of violence into agents of positive change.

MONUSCO's SSD unit implemented a comprehensive training on sexual violence, using a train-the-trainer approach and a participatory model. MONUSCO has trained 130 military trainers and 30 officers of the DRC armed forces (FARDC), who in turn provided SGBV sensitivity training to 2000 FARDC soldiers. Through the train-the-trainer approach, which allows armed services to train each other, MONUSCO trainings speak to uniformed personnel in language



The UN Stabilization Mission in Haiti (MINUSTAH)'s Community Violence Reduction Section and the Mission's non-governmental partners host approximately 4,000 children from the remote town of Pilate and its surrounding areas to celebrate International Children's Rights Day. A MINUSTAH peacekeeper fits one of the children with a blue beret. UN Photo/Victoria Hazou

to which they can relate. Trained soldiers are expected to train their own units, with the aim of affecting attitudes and social norms of FARDC's 120,000 soldiers.

Results to date are encouraging. As a result of trainings for high military command, SGBV is now at the top of the FARDC agenda. Since FARDC implemented a "zero tolerance" policy for sexual and gender-based violence in 2009, reported cases have plummeted. Whereas 12,311 cases of sexual violence were registered in 2011, significantly fewer (647) were recorded between January and April 2012. The "zero tolerance" policy is also helping end the impunity that

has long surrounded sexual and gender-based violence, with 719 cases against perpetrators or sexual violence heard in court in 2011. More than 150 FARDC and Congolese National Police elements were sentenced for rape and other acts of sexual violence.

While gains in bringing perpetrators to justice are substantial, judicial processes to address cases of sexual and gender-based violence often place overwhelming burdens on women who have survived such experiences. Stronger systems are needed to support women throughout these processes and to provide them with the tools they need to see judicial processes through to their end.

UNITED NATIONS MISSION IN THE REPUBLIC OF SOUTH SUDAN (UNMISS)

UNMISS Quick Facts

Conflict: Twenty years of conflict with Sudan ended with a 2011 referendum that endorsed independence for South Sudan.

Mission Mandate: Consolidate peace and security and help establish conditions for sustainable development.

Mission Personnel: 7,000 military personnel, 900 civilian police, and an additional civilian contingent.

In South Sudan, the world's newest country, rape has also been widely used as a weapon of war. Persistent cultural practices reflecting the low social status of women – such as polygamy, forced marriages, wife inheritance, and incest – also help fuel the spread of HIV in South Sudan.

While still new, UNMISS has already taken strong steps to prioritise HIV prevention and combat SGBV. The mission has trained 120

change agents, 105 peer educators, and 34 HIV counsellors. HIV awareness campaigns sponsored by UNMISS have reached more than 30,000 individuals, and the mission has delivered HIV voluntary counselling and testing to more than 3,000 uniformed personnel.

UNMISS has worked to integrate AIDS and sexual and gender-based violence programming throughout its operations, establishing a task force to guide and support an integrated approach. Sexual and gender-based violence sensitization programming has been rolled out to local communities in South Sudan, utilization of UNMISS-supported voluntary counselling and testing services is increasing, and services for post-exposure antiretroviral prophylaxis for rape survivors have been implemented. UNFPA, UNHCR and UN Women have joined with UNMISS to support the development and delivery of sexual and gender-based violence programming.

Experience to date underscores the important role of civil society in extending the reach of HIV and sexual and gender-based violence programming and diversifying women's economic opportunities. The mission has forged partnerships with such groups as the South Sudan Women's Association, the Association for South Sudan Women Lawyers, and the Ministry of Gender. Similarly vital have been efforts to build sexual and gender-based violence awareness among law enforcement personnel.

DEMOBILIZATION, DISARMAMENT AND REINTEGRATION

The UN has increasingly focused on implementation of demobilization, disarmament and reintegration programmes in countries emerging from conflict. Demobilization, disarmament and reintegration initiatives address a broad array of complex issues, including security, human rights, rule of law, elections and economic governance, as well as traditional peacekeeping functions. Ultimately, these programmes aim to lay the groundwork for safeguarding and sustaining health communities, while building national capacity to ensure long-term peace, security and development.

The factors addressed by demobilization, disarmament and reintegration programmes – human rights, inclusive and functioning governance, and sound approaches to development – are intimately related to a society's ability to respond effectively to AIDS phase addresses and the root causes of conflict and in promoting healthy, sustainable communities and societies.

UNITED NATIONS MISSION IN DARFUR (UNAMID)

UNAMID Quick Facts

Conflict: Fighting between rebels and government forces drove 2.7 million people from their homes, creating what observers labeled the world's worst humanitarian crisis.

Mission Mandate: Protect civilians; facilitate humanitarian assistance; monitor and verify implementation of agreements; assist inclusive political process; promote human rights and rule of law.

Mission Personnel: 26,932.

Evidence underscores the urgent need to integrate HIV services within UNAMID's demobilization, disarmament and reintegration initiatives. UNAMID training initiatives have detected extremely low HIV awareness among ex-combatants, including persistent and widespread misconceptions, such as the belief that a cure exists for AIDS. More than 90 per cent of ex-combatants report that HIV remains highly stigmatized, with HIV-positive ex-combatants expressing worries about whether their families will accept them. Most ex-combatants are unaware of their HIV serostatus, in part due to the acute shortage of HIV testing and counselling services in rural settings.

HIV sessions that occur as part of UNAMID's demobilization, disarmament and reintegration programmes provide a rare opportunity for ex-combatants to voice health concerns and obtain essential health information and services. Integration of HIV in DDR has also provided a critical avenue for strengthening the national capacity of the Ministry of Health and the Sudan National AIDS Programme to provide sustainable, appropriate HIV-related services for ex-combatants. In addition to national health authorities, UNAMID has partnered with other national stakeholders including the Sudan DDR Commission, the Sudanese police and military, and civil society organisations.



Bangladeshi peacekeepers with the UN Mission in the Republic of South Sudan (UNMISS) are deployed to Likuangole Payam, Jonglei State, in an effort to stem the cycle of revenge attacks and killings that have killed more than 1,000 people in the last three months. UN Photo/Tim McKulka

UNITED NATIONS MISSION IN THE REPUBLIC OF SOUTH SUDAN (UNMISS)

South Sudan has the largest demobilization, disarmament and reintegration process in the world, targeting more than 120,000 ex-combatants. The new state is disarming rebels and nationals who hold weapons illegally, with the government having established a small arms cluster sector as part of the DDR process.

With the full-fledged demobilization, disarmament and reintegration programme set to launch the last quarter of 2012, integration of HIV represents an urgent necessity. Towards this end, UNMISS is collaborating with key UN and national partners including the South Sudan HIV/AIDS Commission, the Ministry of Health and other national ministries, the national DDR commission, non-governmental organisations and the national network of people living with HIV.

SECURITY SECTOR REFORM

According to a 2008 report by the Secretary-General, security sector reform aims to enhance “effective and accountable security for the State and its peoples, without discrimination and with full respect of human rights and the rule of law”. The security sector encompasses defence, law enforcement, corrections, intelligence services and institutions responsible for border management, customs and civil emergencies, as well as relevant judicial authorities.

Sound, rights-based national security that allows individuals and communities to live and flourish is an important element of an effective national response to AIDS. In addition, the security sector itself is often heavily affected by HIV.

UNITED NATIONS STABILIZATION MISSION IN HAITI (MINUSTAH)

MINUSTAH Quick Facts

Conflict: An armed conflict following a political dispute over national leadership led to formation of MINUSTAH, which has also been forced to keep the peace and support national rebuilding in the aftermath of the devastating 2010 earthquake.

Mission Mandate: Secure a stable environment, promote the political process, strengthen governmental institutions and rule-of-law structures, and promote and protect human rights.

Mission Personnel: More than 10,000, including 7,297 military personnel and 2,866 police.

With incarceration rates in Haiti on the rise, MINUSTAH is helping national stakeholders address HIV in prisons. Adapting a programmatic model that was successfully implemented by the Florida Department of Corrections in the United States, MINUSTAH has trained 65 peer educators on strategies to address HIV within the sensitive confines of a prison setting.

To maximize the reach and impact of this peer-based program, MINUSTAH recruited as trainees inmates who already commanded respect within their cells. Feedback from prisoners has been exceptionally favourable, with several reporting that they have taken steps to avoid HIV transmission as a result of lessons learned during peer-delivered HIV sessions. The strong support of the Department of Penitentiary Administration of the Ministry of Justice has helped ensure the success of MINUSTAH’s HIV-related work.

MINUSTAH is also building national capacity to sustain an effective AIDS response in prisons. MINUSTAH has worked with prison authorities to develop treatment strategies in the context of limited health budgets and lack of laboratory facilities. As an innovative solution to resource constraints, MINUSTAH has arranged with the United States Agency for International Development, GHESKIO Center in Port-au-Prince, and UNDP to provide follow-up care and support for inmates diagnosed with HIV.

Problem-solving has been a key attribute of MINUSTAH’s HIV-related efforts. To ensure roll-out of its HIV programme, MINUSTAH had to overcome challenges posed by a vacancy in the post of Medical Director for the penitentiary system, as well as an acute shortage of resources to implement peer-based programming. In addition, the 2010 earthquake caused extraordinary disruptions nationwide, requiring MINUSTAH to redouble efforts to roll out its peer programme in the midst of such uncertainty.

UNITED NATIONS MISSION IN LIBERIA (UNMIL)

UNMIL

Quick Facts

Conflict: A civil war from 1989 to 1997 claimed 150,000 lives, most of them civilians.

Mission Mandate: Support implementation of ceasefire agreement, protection of UN personnel, humanitarian and human rights assistance, security reform, and implementation of peace process.

Mission Personnel: Up to 14,875 military personnel and 1,250 police officers.

To ensure sustainable HIV and STI awareness and prevention education for the Liberian uniformed services and their families, UNMIL has supported the training and post-training support for a core group of trainees from each of the four components of the armed services. Trainees, in turn, deliver sensitization sessions to their colleagues and families, HIV prevention training, and behaviour change communication.

Trainings address facts and myths about HIV; clinical manifestations of HIV and STIs; HIV in humanitarian emergencies; human rights, stigma and discrimination; HIV treatment; gender issues and AIDS; and the role of alcohol and drug use in HIV risk behaviours. Diverse UNMIL units (such as gender, staff counselling, and integrated mission training) joined with other UN agencies and national partners to plan and implement the training programme.

The successful delivery of this multi-component training programme is having an important effect on policy and practice in Liberia's uniformed services. With material support from the Joint UN Team on AIDS, each arm of the uniformed services (armed forces, national police, immigration and naturalisation, and corrections) has developed three-month workplans to sensitise their respective units on HIV-related issues.

UNITED NATIONS INTEGRATED MISSION IN TIMOR-LESTE (UNMIT)

UNMIT

Quick Facts

Conflict: A major political, humanitarian and security crisis emerged in 2006 – four years after Timor-Leste was recognized as a new country by the United Nations.

Mission Mandate: Support the national government in “consolidating stability, enhancing a culture of democratic governance, and facilitating political dialogue among Timorese stakeholders, in their efforts to bring about a process of national reconciliation and to foster social cohesion”.

Mission Personnel: 1,275 uniformed services (June 2012).

UNMIT has integrated HIV interventions into national security sector reform processes. UNMIT has thus far provided HIV induction training to 2,088 individuals (352 women and 1,271). HIV counselling and testing was offered to all mission personnel and UN agency staff, with 462 personnel (84 women and 462 men) availing themselves of this service. UNMIT distributed 35,605 condoms and trained 34 staff in post-exposure antiretroviral prophylaxis.

Strategic partnerships have enabled UNMIT to implement the Security Council's HIV resolutions in Timor-Leste. Close collaboration with the Ministry of Health as facilitated implementation of peer leadership and HIV training for national uniformed services.

Reaching the community at large, UNMIT's collaboration with national partners has facilitated the delivery of HIV prevention, care and support to sex workers in the border region near Indonesia. Within UNMIT itself, the HIV/AIDS unit has worked closely with units on gender, human rights, counselling and code of conduct, and UNMIT has benefited from the guidance, input and expertise of numerous UN partners.

UNMIT is also working to ensure the sustainability of these HIV initiatives. To help build robust community capacity, UNMIT facilitated a fundraising for a local network of people living with HIV. And funding from Round 10 of the Global Fund to Fight AIDS, Tuberculosis and Malaria will help support continuation and extension of HIV prevention and voluntary counselling and testing activities for uniformed services.

KEY FINDINGS AND THE WAY FORWARD

While real progress has been achieved, acute resource limitations have often impeded efforts to realise the Security Council's vision. Stronger, more strategic action will be needed to protect peacekeepers and national uniformed services with life-saving HIV interventions, to extend

AIDS responses to surrounding communities and the families of uniformed services, and to leverage these investments to strengthen long-term capacity to respond effectively to ever-evolving national and local epidemics.

Fortunately, experience to date has generated an important body of strategic information. In moving forward, concerned stakeholders should take account of lessons learned:

- **The UNAIDS-DPKO collaboration has been proven to achieve powerful results.** UNAIDS-DPKO teams have effectively climbed the learning curve and are now well established at mission level. These teams are taking on board lessons learned to extend the reach and impact of HIV programming. A solid foundation now exists on which to base future work.
- **The field of AIDS and security vividly demonstrates the enormous potential for success when the United Nations system operates as one.** Diverse United Nations partners have joined together to achieve synergistic success in integrating HIV in implementing Security Council Resolutions 1308 and 1983, bringing their respective expertise to bear and working together to overcome impediments to roll-out. "Delivering as one" has proven especially effective in responding to cross-cutting issues, such as human rights, gender-based violence, and gender equality.
- **Flexible working partnerships are essential to success.** Strong working relationships with key partners – including national ministries, other governmental authorities, local NGOs, youth associations, women's and farmers' groups, and associations of people living with HIV – are extending the reach and increasing the impact of UNAIDS-DPKO teams. Innovative partnerships are also helping UNAIDS-DPKO teams anticipate and address challenges as they arise. As circumstances evolve, with settings transitioning from conflict to post-conflict phases, the nature and breadth of partnerships also need to change.
- **Experience underscores the critical importance of country ownership.** Strong ties with national partners have been central to success on HIV prevention in post-conflict settings. Placing national partners at the core of this work has promoted strong country ownership, which in turn promotes sustainability, accelerated action, and the overall success of the peacekeeping mission.

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- **An integrated response maximizes effectiveness, efficiency and impact.** Integrating AIDS in the day-to-day workflow of peacekeeping missions, such as disarmament and reintegration and security sector reform components, has promoted innovation, ensured synergistic results, and contributed to programmatic sustainability.
 - **Integration of AIDS initiatives in conflict and post-conflict settings generate benefits that extend beyond the peacekeeping mission itself.** Returning peacekeepers who are trained and sensitised serve as agents of change in the home communities, generating long-term health dividends in troop-contributing countries. UNAIDS-DPKO AIDS units also build the capacity of national and local partners, helping strengthen and sustain AIDS responses over the long run.
 - **AIDS programmes in conflict and post-conflict settings advance human rights and gender equality.** AIDS interventions combat sexual and gender-based violence, increase awareness of the harmful effects of stigma and discrimination, sensitise perpetrators and help convert them into agents of change, and promote integration of human rights protections in national legal and policy frameworks.
 - **AIDS programmes contribute to long-term peace and security.** Far from serving as an ancillary "add-on" component, AIDS programmes complement demobilization, disarmament and reintegration efforts by saving lives and promoting more responsible sexual behaviour.
 - **Peer educators generate cost-effective results.** Peer educators accelerate programmatic expansion, facilitate access to local leaders and community gatekeepers, and contribute to long-term continuity and sustainability. Peer education has proven to be a high-impact, cost-effective vehicle for disseminating key messages and influencing social norms in programming pertaining to sexual and gender-based violence; disarmament and reintegration; and security sector reform.

“Uniformed personnel can act as agents of positive change, particularly in relation to preventing sexual violence in conflict and post-conflict situations.”

Executive Director of UNAIDS, Michel Sidibé.

In the face of initial scepticism, the Security Council’s pioneering leadership on AIDS and security has proven to be visionary. Against considerable odds, efforts to implement Security Council Resolutions 1308 and 1983 are achieving tangible results and building the foundation for more durable, rights-based AIDS responses – within uniformed services, in the countries where peacekeeping missions exist, and among countries that contribute forces to United Nations peacekeeping operations.

But more – much more – remains to be done. Learning across countries needs to be disseminated to peacekeeping operations throughout the world, with particular attention to the three priority thematic issues. Substantially stronger political engagement and leadership will also be vital to continued and accelerated success. To build political support and ensure greater accountability on AIDS and security, it is especially critical to engage national and regional bodies (such as the African Union) that have the capacity to strengthen and mainstream essential programmatic and policy responses and to influence decision-makers in diverse countries and settings.

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