Agenda item 7

Follow-up to the thematic segment from the 36th PCB meeting:
“HIV in emergency contexts”

27 October 2015
Objectives

- **The effects** of humanitarian emergencies on HIV vulnerability and risks, and on HIV programmes

- Raise awareness – **preparedness** and crisis management in country strategies
Timely discussion

- 314 million people were affected by emergencies

- Forced displacement affects more people than ever before – 67 million

- 1,6 million PLHIV affected by humanitarian emergencies

(data from 2013)
A reminder

… “the need to never lose sight of the human faces behind the numbers of people affected by emergencies”.

Michel Sidibé
Key note speaker – “A travers mon regard” – former refugee from Burundi

“…being uprooted from one’s home feels like a tree taken out of its soil”
Panel discussions

- Increased focus on HIV in emergency contexts
- Setting the scene – the latest evidence
- Delivering in times of emergency: what works for HIV?
  - Enabling continued services for conflict affected communities
  - Delivering community services in public health emergencies
Panel discussions

- Enabling protective environments
  - Services for migrants: challenges and opportunities
  - Sexual violence and HIV – safe spaces for survivors
  - Ensuring dignity - protection and services for KP
    - PWID
    - Transgender

- Promoting preparedness and resilience
  - IFRC
  - Haiti
  - ICMHD
Emergencies are diverse but are universally disruptive

Double discrimination: restrictions on migrants, refugees and displaced people are magnified on PLHIV and KP

Refugees do not increase HIV risk – lower prevalence than hosts
The issues

- Sexual violence is widespread in emergency contexts

“Harrowing accounts” of rape, sexual slavery and forced marriage in conflict.”

Ban Ki-moon, March 2015
The issues

- **Demand continues** for HIV services during emergencies

- **Malnutrition** is a particular risk for people living with HIV
Conclusions

314 million people affected by emergencies
+ 67 million people forced displaced

“the largest fragile community globally”
Conclusions – a dual challenge

- Integration of displaced persons’ needs into local HIV programmes needs to improve

- Integration of PLHIV’s needs into emergency responses needs to improve
Conclusions

HIV vulnerability and risk can be managed during emergencies if ...
Conclusions

- Ending sexual violence in conflict and stigma and discrimination are common objectives for all partners.
- Food insecurity and service disruption are addressed.
- Preparedness is embedded in all strategies – strengthened logistics and supply chains – including availability of flexible funding.
Thank you