



**HIV and AIDS AND THE AFRICAN MILITARY: TOWARDS A COMMON AND  
COMPREHENSIVE APPROACH CONFERENCE  
JINJA – UGANDA  
11 – 13 MARCH 2009**

**RECOMMENDATIONS**

The Participants to the 11 – 13 March 2009 conference on “HIV and AIDS and the Military: Towards a Common and Comprehensive Approach” comprising of delegates from Botswana, Burundi, Ethiopia, Egypt, Chad, Cote D’Ivoire, Democratic Republic of Congo, Kenya, Ghana, Malawi, Nigeria, Senegal, South Africa, Swaziland, Togo, Tanzania, Uganda, Zambia, Zimbabwe and some non-governmental organizations whose details appear at the annex to this report:

- 1. RECALL** that the Organisation of African Unity (OAU) acknowledged consistently that HIV and AIDS was a problem for the whole continent and that there was need to place the fight against AIDS high on its agenda. It consequently called for the development of partnership with the international community on the mitigation of the HIV and AIDS pandemic. Also recalled is the Abuja Summit in April 2001 on HIV and AIDS, Tuberculosis and Other Related Infectious Diseases; the 2003 Maputo Declaration on Malaria, HIV and AIDS, Tuberculosis, and Other Related Infectious Diseases and the AUC HIV and AIDS Strategic Plan of 2004/2005;
- 2. FURTHER RECALL** the outcome of the Abuja Summit in 2006 that set the targets for Universal Access to HIV and AIDS, Malaria and Tuberculosis; the Continental Framework for Harmonization of Approaches among Member States and Integration of Policies on Human Rights and People

infected and affected by HIV and AIDS in Africa; the African Union Commission HIV and AIDS Strategic Plan 2005-2007 and AIDS Watch Africa (AWA) Strategic Framework: Accelerating Action to Combat a Continental Emergency; and the Third Session of the African Union Conference of Ministers of Health 9-13 April 2007, Johannesburg, South Africa under theme “Strengthening of Health Systems for Equity and Development in Africa”;

3. **NOTE** the initiatives taken by the various governments and militaries on the African continent in addressing HIV and AIDS in society in general and the militaries in particular. Further note that research efforts have been undertaken by various national institutions and by some military establishments as well as efforts by the West and Central African States to developing a network for the fight against HIV and AIDS in their militaries; Also note African militaries are playing a significant role in peace keeping and peace building in Africa despite the prevalence of HIV and AIDS;
4. **FURTHER NOTE** that most militaries exclude recruitment on the basis of health and non-health factors, including HIV and AIDS and therefore face policy dilemmas as well as grossly diminished soldier’s combat readiness;
5. **ENDORSE** the collaborative work undertaken by governmental institutions, international organisations and Non-Governmental Organisations, particularly in Africa such as the Centre for Conflict Resolution (South Africa), Institute for Security Studies (African Region); and the Kofi Annan International Peacekeeping and Training Centre (Ghana) and the Joint Clinical Research Centre (Uganda);
6. **STRESS** that the goal is to **evolve a Common and Comprehensive African Approach** to HIV and AIDS (CCAAHM) pandemic in the military in focusing on the following;
  - Aspects of HIV and recruitment **within a human rights culture**;

- **Challenges of what to do with soldiers who become HIV positive during service**, leading to questions of forced re-mustering from *active* to administrative duties;
  - **New skills** required for supporting people living with HIV and AIDS around nutrition, dieting;
  - Holding of controlled drugs as part of the quartermaster responsibility;
  - **Home based care and welfare policies** related to early termination of employment on medical grounds for those HIV positive cases advancing into Aids;
  - **Budgetary and cost implications** given the fact that armed forces have to carry anything up to 20% and more of non-effective soldiers; and
  - **Developing common and good practices** within policy related challenges, which emerge around peacekeeping deployments; whether or not countries were adhering to the guidelines set by the United Nations Department of Peacekeeping Operations (UNDPKO) and the African Union's Peace and Security Department. Questions of conducting HIV tests before, during and after the deployment and how this is related to capacity and what goals to be achieved after the tests are also widely debated given the diverse practice of various countries in not following set international and continental guidelines.
  - **Military Command has a significant role to play** in the management (command, control, communication and coordination) of HIV and AIDS pandemic at all levels of command, i.e. tactical, operational and strategic by example.
7. **REQUEST** African Member States, in collaboration with the African Union Commission (AUC) through the African Chiefs of Defence Staff, Regional Economic Communities (RECs) and other Regional Mechanisms (RMs) as well as other institutions and selected African Non-Governmental Organizations (NGOs), take all the necessary steps for the effective implementation of the overall objective to evolve a common and comprehensive African approach on managing HIV/AIDS in the military.

- 8. RECOMEND THE FOLLOWING DECISIONS** in evolving a common and comprehensive African approach to HIV/AIDS in the military:
- a. The African Union Member States to adopt a common policy on control, prevention and management of HIV and AIDS in the African Armed Forces;
  - b. African Militaries adopt polices for the protection, counseling and care of persons living with and affected by HIV and AIDS;
  - c. African Militaries to strive for a common understanding and approach regarding recruitment and deployment of Armed Forces on peacekeeping operations;
  - d. The AUC through its African partner institutions to harmonize the existing initiatives and practices into a unified and comprehensive policy;
  - e. The CCAAHM should be spearheaded by AU Member States and supported by RECs, RMs and AUC's Peace and Security Department (PSOD) and the Social Affairs Department.
  - f. Strengthen experiential learning and sharing among regional and national militaries in Africa through collaborative research, documentation and dissemination of good practices on addressing HIV and AIDS in the military which would, inter alia, assist in reducing speculation about the extent of the problem in the military;
  - g. Review and compliment evidence/research-based positions on the rigorous nature of military training to the propelling of HIV Sero-positive conditions;

- h. Undertake urgent studies in the general area of recruitment; and military progression of sero-positive personnel;
  - i. Form an African Network on HIV and AIDS in the military to spearhead the development and implementation of CCAAHM;
  - j. Identify a Technical Team/Secretariat to support the African Network and serve as link to the harmonisation of CCAAHM and other HIV and AIDS efforts including undertaking monitoring and evaluation in African militaries;
  - k. Undertake a study on the existing policy initiatives with the purpose of identifying the common areas as well as the existing grey areas;
  - l. Adopt second-generation HIV surveillance approach to generate more accurate data to inform decision-making;
  - m. Integrate VCCT in pre-deployment testing of peacekeepers;
  - n. Undertake human rights assessments of all HIV-related policies;
  - o. Adopt a comprehensive multi pronged and multi dimensional approach in the mitigation of HIV and AIDS in the military
9. **FURTHER RECOMMEND** that there be a meeting of the Chief of Defence Staff of the African Union to deliberate on the contents of this conference as well as other AU processes on the matter, mindful of progress made by other sub-regions such as ECOWAS and also propose the mobilization of the requisite human and material resources under the leadership of the African Union for the effective management of HIV and AIDS in the African militaries;

10. **REEMPHASISED** that HIV and AIDS remains a threat to regional security and development and demands discipline, political consciousness and a team spirit to mitigate the threat.
11. **ENCOURAGE** AU Member States, RECs, and RMs, to use the relevant AU instruments such as the Abuja Summit in April 2001 on HIV and AIDS, Tuberculosis and Other Related Infectious Diseases; and the Third Session of the African Union Conference of Ministers of Health 9-13 April 2007, Johannesburg, South Africa under theme “Strengthening of Health Systems for Equity and Development in Africa”.
12. **RECOGNISE** with gratitude the strategic leadership of the AUC in the convening of the conference and support of the Republic of Uganda, in particular the Uganda People’s Defence Forces (UPDF), for hosting the conference as well as to the Institute for Security Studies for designing and operationalising the conference.