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Regional Minimum Standards for the Harmonised Control of HIV and AIDS, Tuberculosis and Malaria in Militaries in the SADC Region



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Due to the nature of their work, militaries can be especially vulnerable to communicable diseases. But they are also well equipped to combat those diseases in their own ranks and among the communities they serve.

The Background

The SADC region bears an inordinately large share of the global HIV and tuberculosis (TB) burdens. The region contains about 2% of the world's population, but is home to about 37% of all HIV-infected persons and 33% of all AIDS deaths. Linked to that are serious TB epidemics. The region includes five of the 22 countries with the highest TB burdens globally, and multidrug-resistant (MDR) and extensively drug-resistant (XDR) TB are now major concerns. In addition, some 20 million Malaria episodes and an estimated 300 000-400 000 Malaria-related deaths occur in the region each year.

The Rationale

Certain sub-populations, such as military personnel, are especially vulnerable to these diseases due to the nature of their work. The military, however, are also unique in the sense that they typically are well-disciplined and -organised, and form a 'captive audience' for public health interventions. This positions them well to respond positively to such activities. They are also in a unique position to strengthen awareness and prevention initiatives among communities.

The Principles

The proposed regional minimum standards are informed by the *SADC Protocol on Health* and the *Maseru Declaration*. Key among the principles guiding them are universal access, gender equality and non-discrimination, and the need to involve all partners (civil and military) in the planning, implementation and evaluation of the standards. Communicable disease responses have to be evidence-based and include appropriate prevention, care and treatment interventions.

The Scope

The regional minimum standards serve as a framework for guiding the regional harmonisation of activities for preventing and controlling HIV and AIDS, TB and malaria in all SADC Member State militaries. They set out minimum policy requirements for Governments, military health service managers and other policy development personnel in the areas of policy and programming, training, prevention strategies, diagnostic tools and methods, case management, treatment and care, as well as referral systems, data collection, and monitoring and evaluation.

Key Points

The framework emphasises the need for Member State militaries to actively participate in the development and implementation of their respective national strategic plans. Military health services have to ensure that adequate administrative, environmental, and personal protection protocols are practiced to limit HIV, TB and Malaria infection. Education about the diseases must be incorporated at all levels into military training, and personnel must be provided with the means to protect themselves and others against infection. A comprehensive health assessment is recommended before and after deployment. The assessment may include testing for HIV, as well as screening for both TB and malaria. Periodic routine TB/HIV testing, as well as malaria awareness talks and sensitisation, must be offered at all military health service healthcare facilities, in accordance with national health policies. Militaries must ensure access to quality-assured diagnostic services that are linked to effective treatment systems.

A structured antiretroviral programme is recommended, and should eventually cover all military personnel and their families. Prompt treatment in malaria areas must be ensured. Military health services must have a standard TB treatment policy in line with their national policies, based on multi-drug therapy. The directly-observed treatment, short-course (DOTS) strategy is recommended.

Implementation

The regional minimum standards were approved through all the relevant SADC structures. Implementation will be coordinated through SADC military health services. The latter will work with their Ministries of Health and national coordinating bodies to ensure that issues pertaining to the military are fully integrated into national plans. Military health services and national coordinating bodies will monitor the implementation of programmes at national level and provide necessary feedback to the SADC Secretariat. Indicators used for monitoring should be in line with other SADC indicators (while fitting the military context).

More Information

The full set of minimum standards for militaries in the SADC region is available in the publication, *Regional Minimum Standards for the Harmonised Control of HIV and AIDS, Tuberculosis and Malaria in Militaries in the SADC Region (2010)*. A comprehensive situation assessment is available in the *Assessment Report for the Harmonised Control of HIV and AIDS, Tuberculosis and Malaria in Militaries in the SADC Region (2010)*.

Both publications are available from the **Directorate of Social & Human Development & Special Programs (Private Bag 0095, Gaborone, Botswana)**.