



## INTERNAL AUDIT DIVISION

# AUDIT REPORT

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## HIV/AIDS awareness and prevention programmes in UNMIS

HIV/AIDS activities were well integrated in the Mission's programmes; however, the HIV/AIDS Unit's capacity was limited, impacting on the level of training provided

13 April 2011  
Assignment No. AP2010/632/14

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United Nations  Nations Unies

INTEROFFICE MEMORANDUM

MEMORANDUM INTERIEUR

OFFICE OF INTERNAL OVERSIGHT SERVICES · BUREAU DES SERVICES DE CONTRÔLE INTERNE  
INTERNAL AUDIT DIVISION · DIVISION DE L'AUDIT INTERNE

TO: Mr. Haile Menkerios  
A: Special Representative of the Secretary-General  
United Nations Mission in Sudan

DATE: 13 April 2011

REFERENCE: IAD: 11- **00357**

FROM: Fatoumata Ndiaye, Director  
DE: Internal Audit Division, OIOS



SUBJECT: **Assignment No. AP2010/632/14 – Audit of HIV/AIDS awareness and prevention programme in UNMIS**  
OBJET: UNMIS

1. I am pleased to present the report on the above-mentioned audit.
2. Based on your comments, we are pleased to inform you that we will close recommendation 6 in the OIOS recommendations database as indicated in Annex 1. In order for us to close the remaining recommendations, we request that you provide us with the additional information as discussed in the text of the report and also summarized in Annex 1.
3. Please note that OIOS will report on the progress made to implement its recommendations in its annual report to the General Assembly and semi-annual report to the Secretary-General.

cc: Mr. Georg Charpentier, DSRSG/HC/RC, UNMIS  
Mr. Nicolas Von Ruben, Director of Mission Support, UNMIS  
Mr. Swatantra Goolsarran, Executive Secretary, UN Board of Auditors  
Ms. Susanne Frueh, Executive Secretary, Joint Inspection Unit  
Mr. Mario Baez, Chief, Policy and Oversight Coordination Service, Department of Management  
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Ms. Eleanor T. Burns, Chief, Peacekeeping Audit Service, OIOS  
Ms. Amy Wong, Programme Officer, Internal Audit Division, OIOS

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## INTERNAL AUDIT DIVISION

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### FUNCTION

*“The Office shall, in accordance with the relevant provisions of the Financial Regulations and Rules of the United Nations examine, review and appraise the use of financial resources of the United Nations in order to guarantee the implementation of programmes and legislative mandates, ascertain compliance of programme managers with the financial and administrative regulations and rules, as well as with the approved recommendations of external oversight bodies, undertake management audits, reviews and surveys to improve the structure of the Organization and its responsiveness to the requirements of programmes and legislative mandates, and monitor the effectiveness of the systems of internal control of the Organization” (General Assembly Resolution 48/218 B).*

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## EXECUTIVE SUMMARY

### Audit of HIV/AIDS awareness and prevention programmes in UNMIS

The Office of Internal Oversight Services (OIOS) conducted an audit of Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome (HIV/AIDS) awareness and prevention programmes in the United Nations Mission in Sudan (UNMIS). The overall objective of the audit was to assess the adequacy and effectiveness of internal controls over HIV/AIDS programmes in UNMIS. The audit was conducted in accordance with the International Standards for the Professional Practice of Internal Auditing.

Activities of the HIV/AIDS Unit were well integrated with those of other sections of the Mission. In addition, the HIV/AIDS Unit worked closely with various stakeholders in creating awareness on HIV/AIDS prevention issues to members of the host government. However, the capacity of the HIV/AIDS Unit was insufficient to enable it to fully achieve its mandate of creating awareness on the prevention of HIV/AIDS in UNMIS to all personnel. The main audit results were as follows:

- Thirty eight per cent of military contingents, and 25 per cent of civilian personnel, United Nations police and military observers did not receive the mandatory training on HIV/AIDS as part of their Mission induction training. Also, there were inadequate mechanisms to ensure that all Mission personnel completed the mandatory HIV/AIDS workplace orientation programme.
- Preparation of Mission-specific standard operating procedures for the use, custody and administration of post-exposure prophylaxis kits had not been finalized.
- Dedicated facilities were not available to provide voluntary confidential counseling and testing services.

OIOS made six recommendations to address the issues identified during the audit and to contribute towards the improvement of HIV/AIDS awareness and prevention programmes in UNMIS.

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## I. INTRODUCTION

1. The Office of Internal Oversight Services (OIOS) conducted an audit of HIV/AIDS awareness and prevention programmes in the United Nations Mission in Sudan (UNMIS). The audit was conducted in accordance with the International Standards for the Professional Practice of Internal Auditing.
2. Security Council Resolution 1308 (2000) mandated the United Nations Department for Peacekeeping Operations (DPKO) to provide awareness and prevention programmes for all peacekeeping personnel in order to reduce the risk of peacekeepers contracting and/or spreading Human Immunodeficiency Virus (HIV). The DPKO issued a Policy Directive on “the role and functions of HIV/Acquired Immunodeficiency Syndrome (AIDS) Units in United Nations Peacekeeping Operations” (DPKO Directive). The DPKO Directive provides the framework for action to reduce HIV risk and vulnerability and to manage its impact on peacekeeping operations and on host populations.
3. The UNMIS HIV/AIDS Unit is responsible for designing and implementing HIV/AIDS awareness and prevention activities across the Mission and providing technical support to civil societies involved in creating HIV/AIDS awareness activities in Sudan. The Unit does not have a separate budget, and its activities are funded through other units including Medical, Supply and Disarmament, Demobilization and Rehabilitation. The HIV/AIDS Unit had 11 staff members, and three additional staff seconded from other sections in the Mission.
4. Comments made by UNMIS are shown in *italics*.

## II. AUDIT OBJECTIVES

5. The main objective of the audit was to assess whether UNMIS had established and implemented effectively and efficiently an adequate system of control over its HIV/AIDS programme including: (a) programmes put in place to provide awareness and prevention of HIV/AIDS to Mission personnel; (b) integration of HIV/AIDS issues in the Mission’s mandate; and (c) support provided to the host government to create awareness on the prevention of HIV/AIDS.

## III. AUDIT SCOPE AND METHODOLOGY

6. The audit reviewed programmes and activities of the HIV/AIDS Unit for the period 1 July 2009 to 30 June 2010.
  7. The audit methodology included interviews with relevant staff, review of documents and visits to Khartoum, Juba, Wau, Malakal, Kadugli and Ed Damazin locations, representing the six sector headquarters.
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## IV. AUDIT RESULTS

### A. HIV/AIDS awareness and prevention programmes

#### HIV/AIDS awareness training

8. The DPKO Directive requires the Mission to provide mandatory HIV/AIDS awareness training to all Mission personnel, including international and national staff, contractors and uniformed personnel.

9. A total of 6,315 (38 per cent) personnel from military contingents and 649 (25 per cent) civilian, United Nations police (UNPOL) and military observers personnel who checked into the Mission between 1 July 2009 and 31 December 2010, and 1 July 2009 and 30 September 2010, respectively, did not receive the mandatory training. Contractors were also not provided with this training.

10. The Mission was of the view that it did not have the capacity to train personnel in the Mission. For example:

- Only six training officers were dedicated to the function with the responsibility to train 15,787 staff members.
- Sector 5 did not have a resident HIV/AIDS training officer.
- Only one staff member was assigned to Sector 3 with the responsibility to train over 5,000 military personnel.

11. The HIV/AIDS Unit provides peer educator training to representatives of military contingents in the Mission, who in turn provide HIV/AIDS awareness training to their colleagues. However, this was not fully effective, as on completion of their tour of duty, the trained peer educators leave the Mission putting additional pressure on the HIV/AIDS Unit to continually train incoming contingents.

12. The lack of adequate training/sensitizing of Mission personnel and contractors on HIV/AIDS issues increases the risk that personnel may not be aware of high risk behavior to reduce vulnerability to contracting and/ or transmitting HIV.

13. The UNMIS Management stated that civilian personnel have core duties assigned to them by the Mission and it has proved difficult in the past for them to be released to support training activities of the HIV/AIDS Unit. In addition, most of the peacekeepers are uniformed (military) and it is prudent to have members among them trained to train others. Nevertheless, the HIV/AIDS Unit will endeavor to improve this area through continued provision of peer education training, staff decentralization, event prioritization and web-based learning. Based on UNMIS Management's assurances, OIOS does not issue a recommendation in this regard.

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## HIV/AIDS in the workplace orientation programme

14. The Secretary-General's bulletin on "HIV/AIDS in the workplace orientation programme" (ST/SGB/2007/12) dated 1 December 2007, established as mandatory, the HIV/AIDS in the workplace orientation programme aimed at assisting staff members to make informed decisions on HIV/AIDS related issues. The programme is provided in addition to the HIV/AIDS awareness training, and three hours of attendance are required for its completion.

15. The HIV/AIDS Unit conducted three training sessions in Khartoum in September and October 2010, which were only attended by 15 personnel. No sessions were held in other Mission locations. The HIV/AIDS Unit also extended the same programme to 152 personnel of six United Nations agencies in Khartoum and Juba. According to the Chief, HIV/AIDS Unit, the low staff turnout was a result of reluctance amongst section chiefs to release staff members to participate in the training. The training format was not web-based, unlike other mandatory courses. Therefore staff members were unable to complete it at their own pace, and at a time convenient for them. Furthermore, the Mission had not put in place adequate measures to ensure that the programme was accessible to, and attended by all personnel.

16. As a result, there is an increased risk that staff members who do not participate in this mandatory training are not able to make adequately informed decisions on HIV/AIDS related issues.

### **Recommendations 1 and 2**

#### **The UNMIS Management should:**

**(1) Request the Department of Peacekeeping Operations HIV/AIDS Policy Advisor to redesign the HIV/AIDS workplace orientation programme to make it web-based to be easily accessible to all Mission personnel.**

**(2) Assign responsibility to monitor staff members' compliance with mandatory training programmes, and report periodically on the status of compliance in the Mission.**

17. *The UNMIS Management accepted recommendation 1 and stated that it will discuss the initiative with the DPKO/DFS Policy Advisor who will advise on its feasibility and implementation date. Recommendation 1 remains open pending follow up with the DPKO/DFS Policy Advisor on the feasibility and implementation of a web-based HIV/AIDS mandatory training programme.*

18. *The UNMIS Management accepted recommendation 2 and stated that since the Mission's current mandate will end in July 2011, it will consider incorporating this training as part of the induction training, if a new Mission is established in South Sudan. Recommendation 2 remains open pending*

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confirmation that adequate measures have been put in place to monitor staff compliance with the mandatory training programmes.

#### Post-Exposure Prophylaxis (PEP) kits

19. The DPKO Directive provides that the Chief Medical Officer, Force Medical Officer, Chief HIV/AIDS Officer and the Procurement Section should ensure the availability of PEP kits in all Mission locations. The 10 minimum standards introduced by United Nations Cares, a work place programme on HIV embracing the entire United Nations family, require all personnel and their family members to have rapid access to PEP starter kits within 72 hours in case of possible exposure to HIV.

20. The Mission had not prepared and distributed to its personnel the names, contact details and locations of PEP kit custodians. Draft standard operating procedures (SOP) for the use, custody and administration of PEP kits had been prepared, but not submitted to the Designated Official for Sudan for approval. OIOS visited six of the Mission's level 1 clinics, representing 42 per cent of the available clinics, and observed that PEP kits in stock included components that were either partially or entirely expired. The level 1 clinic in Sector 3, Malakal did not have a PEP kit.

21. The absence of valid PEP kits and the lack of information among Mission personnel of respective custodians, could delay access to PEP kits, increasing the likelihood of HIV infections arising from occupational exposure or sexual assault.

#### **Recommendation 3**

**(3) The UNMIS Designated Official should ensure that: (a) its Mission-specific standard operating procedures for the use, custody and administration of post-exposure prophylaxis (PEP) kits are finalized; (b) contact details of PEP kit custodians are circulated to all personnel; and (c) valid PEP kits are maintained.**

22. *The UNMIS Designated official accepted recommendation 3 and stated that the HIV/AIDS Unit is engaging the Medical Section and the Department of Safety and Security to put in place a PEP kit protocol. The draft SOPs for the use, custody and administration of PEP kits will be reviewed and approved. Recommendation 3 remains open pending the establishment and approval of PEP SOPs on the use, custody and administration of PEP kits.*

#### Voluntary confidential counseling and testing facilities

23. Appendix 2 of the draft DPKO SOP on voluntary confidential counseling and testing (VCCT) in DPKO missions requires laboratories and testing sites to be kept neat, clean and free of materials not pertinent to the process when administering a rapid HIV antibody test.

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24. OIOS visited six Mission locations and noted that facilities were not available to ensure provision of VCCT in line with the draft SOP. In addition, the HIV/AIDS Unit staff members shared offices and they experienced regular disruption of their work, as they had to vacate their offices prior to VCCT sessions to ensure privacy and confidentiality of the process. Dedicated facilities for VCCT safeguards the confidentiality required by recipients and enhances the productivity of staff members in the HIV/AIDS Unit.

#### **Recommendation 4**

**(4) The UNMIS Office of Mission support should ensure that dedicated facilities are provided to the HIV/AIDS Unit for the effective provision of voluntary and confidential counseling and testing.**

25. *The UNMIS Office of Mission support accepted recommendation 4 and stated that it will provide dedicated facilities as per requests from the HIV/AIDS Unit and recommendation by the Space Allocation Committee.* Recommendation 4 remains open pending allocation of dedicated facilities for the provision of VCCT.

#### Monitoring of condom usage

26. The DPKO Directive requires the Chief HIV/AIDS Officer, in consultation with the Supply and Medical Sections, to develop a Mission supply strategy for condoms and subsequently monitor their availability, usage and distribution to the sectors and ensure sufficient stocks are maintained in the Mission area.

27. OIOS visited six locations in the Mission and observed an uneven distribution of condoms. Sector 3 headquarters, Malakal and the level 1 clinic in Khartoum did not have any inventory of male condoms, whereas Sector 5 headquarters, Ed Damazin had a condom inventory in excess of 230,000 and an additional 21,600 that had expired. A draft Mission supply strategy for condoms had been prepared and was undergoing review. Inadequate monitoring of condom utilization resulted in stock-outs and expiry of condoms in Mission locations, increasing the risk of transmission of HIV and other sexually transmitted infections among staff members.

#### **Recommendation 5**

**(5) The UNMIS Office of Mission Support should better monitor the distribution and usage of condoms in all Mission locations to ensure optimum levels are maintained.**

28. *The UNMIS Office of Mission Support accepted recommendation 5 and stated that it will distribute condoms and monitor their usage in line with the Mission supply strategy for condoms.* Recommendation 5 remains open pending confirmation of distribution and monitoring of condom usage in line with the Mission's supply strategy for condoms.

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Procurement of HIV/AIDS items

29. The HIV/AIDS Unit rejected a delivery of 400 pieces of HIV test kits, as they did not meet the required specifications. Consequently, there was no available stock, impacting on the testing for HIV. Moreover, due to a mismatch in specifications, the size of condoms that were in stock could not be dispensed through the 300 heavy duty metallic condom dispensers fitted at various locations in the Mission. As a result of this, condoms were sometimes placed on water heaters and window sills which resulted in deterioration in the quality.

**Recommendation 6**

**(6) The UNMIS Office of Mission Support should ensure that condom dispensers and other items procured for use by the HIV/AIDS Unit adhere to the required specifications.**

30. *The UNMIS Office of Mission support accepted recommendation 6 and stated that the HIV/AIDS Unit has raised another requisition for condoms that can be dispensed using the condom dispensers.* Based on the action taken, recommendation 6 has been closed.

B. Integration of HIV/AIDS into the Mission's mandate

31. The HIV/AIDS Unit was effective in carrying out its responsibilities by integrating its activities with various sections including DDR, Recovery, Return and Reintegration, Rule of Law, Gender, UNPOL, Public Information Office (PIO) and Integrated Mission Training Cell.

32. The HIV/AIDS Unit provided HIV/AIDS awareness training to ex-combatants during sessions organized by the DDR Unit as part of the latter's core activities. In addition, the HIV/AIDS Unit invited representatives from UNPOL to participate in peer educator training sessions that were held in various locations of the Mission. The trained peer educators from UNPOL were subsequently involved in conducting HIV/AIDS awareness training to the Sudanese police force.

33. Between 1 July 2009 and 30 June 2010, through collaboration with these sections, the HIV/AIDS Unit trained 1,307 ex-combatants, 68 community police in camps for internally displaced persons and 2,367 police officers and police recruits of the North and South Sudan Police forces. In addition, 20 prison officers, 17 child protection officers and 150 pupils under a programme managed by the Gender Unit and PIO received training and awareness on HIV/AIDS.

C. HIV/AIDS awareness support provided to the host government

34. At the time of audit, the HIV/AIDS Unit had trained 131 out of 150 change agents planned for the period between 1 July 2009 and 30 June 2011. Training sessions for the change agents were conducted in Khartoum, Juba, Torit

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and Rumbek, and those in attendance were drawn from local populations including community safety police personnel associated with armed forces.

35. In addition, during this period, 20 representatives from the Sudan Police Service, Sudan People's Liberation Army, Sudan Armed Forces and local communities were among 143 participants who attended peer educator training workshops conducted by the HIV/AIDS Unit. The trained change agents and peer educators subsequently assisted in conducting HIV/AIDS awareness training and public awareness sessions to an estimated 8,822 members of the local population.

## V. ACKNOWLEDGEMENT

36. We wish to express our appreciation to the Management and staff of UNMIS for the assistance and cooperation extended to the auditors during this assignment.

## STATUS OF AUDIT RECOMMENDATIONS

Recom. no.	Recommendation	Risk category	Risk rating	C/O <sup>1</sup>	Actions needed to close recommendation	Implementation date <sup>2</sup>
1	The UNMIS Management should request the Department of Peacekeeping Operations HIV/AIDS Policy Advisor at United Nations Headquarters to redesign the HIV/AIDS workplace orientation programme to make it web-based to be easily accessible to all Mission personnel.	Human resources	Medium	O	Follow up with the DPKO/DFS Policy Advisor on the feasibility and implementation of a web-based HIV/AIDS mandatory training programme.	Not provided. (Dependent on action to be taken by DPKO).
2	The UNMIS Management should assign responsibility to monitor staff's compliance with mandatory training programmes, and report periodically on the status of compliance in the Mission.	Compliance	Medium	O	Confirmation that adequate measures have been put in place to monitor staff compliance with the mandatory training programme.	After 1 July. (It is dependent on UNMIS' new mandate)
3	The UNMIS Designated Official should ensure that: (a) its Mission-specific standard operating procedures for the use, custody and administration of post-exposure prophylaxis (PEP) kits are finalized; (b) contact details of PEP kit custodians are circulated to all personnel; and (c) valid PEP kits are maintained.	Governance	Medium	O	Establishment and approval of PEP SOPs on the use, custody and administration of PEP kits.	May 2011
4	The UNMIS Office of Mission support should ensure that dedicated facilities are provided to the HIV/AIDS Unit for the effective provision of voluntary and confidential counseling and testing.	Operational	Medium	O	Allocation of dedicated facilities for the provision of VCCT.	March 2011
5	The UNMIS Office of Mission Support should better monitor the distribution and usage of condoms in all Mission locations to ensure optimum levels are maintained.	Operational	Medium	O	Confirmation of distribution and monitoring of condom usage in line with the Mission's supply strategy for condoms.	March 2011
6	The UNMIS Office of Mission Support should ensure that condom dispensers and other items procured for use by the	Operational	Medium	C	Action taken	Implemented

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<b>Recom. no.</b>	<b>Recommendation</b>	<b>Risk category</b>	<b>Risk rating</b>	<b>C/O<sup>1</sup></b>	<b>Actions needed to close recommendation</b>	<b>Implementation date<sup>2</sup></b>
	HIV/AIDS Unit adhere to the required specifications.					

1. C = closed, O = open
2. Date provided by UNMIS in response to recommendations.