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The Vulnerability of the Girls to HIV/AIDS in Conflicts

Examining Factors that Increase Girls Vulnerability to HIV/AIDS in Darfur Conflict   -   South Darfur

Master thesis

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Abstract

Sudan region of Darfur has been experiencing an internal war which has caused hundreds of thousands of deaths and displaced millions of the civilian population. The purpose of this study is to examine factors that increase the vulnerability of girls in Darfur's IDP camps to HIV/AIDS.

In this thesis I have used a case study approach utilizing qualitative methods to examine how conflict gender, power and HIV/AIDS merge to create situations of risk and vulnerability for girls in a specific IDP camp in Darfur. In total 28 interviews were conducted with IDP girls in the camp, interviews with one member of the IDP camp committee, one lab technician and a head teacher of one of the IDP schools. This study highlights the experiences that the girls in the IDP camp in south Darfur go through and the factors that create risk conditions for them.

The study found out that the factors which increase the vulnerability of the girls to HIV/AIDS in Darfur are mainly socio-economic and political ones, relating to situations existing on ground. The environmental problems resulting from the climatic change play a great role in the Darfur conflict, and in turn make people more vulnerable to disaster and disease. Daily activities such as farming and collecting of firewood exposed girls to the risks of being abducted or raped. Additionally, sexual harassment and female genital mutilation are areas of concern as they increase gender inequality and the domination of men. Knowledge about HIV/AIDS is also limited; due to a culture of silence where girls cannot ask for information about sex out of fears that they will be thought to be sexually active.

List of Abbreviations

AIDS **:** Acquired Immune-Deficiency Syndrome

FGM **:** the female genital mutilation

HAC **:** the humanitarian Aid commission

HIV **:** Human Immune-deficiency Virus

IDPs **:** Internally Displaced Person(s)

JEM **:** the Justice and Equality Movement

MTCF : Mother Teresa Children Foundation

NGOS **:** Non-Governmental Organizations

PLWHA : people living with HIV/AIDS

SGBV : sexual Gender Base Violence

SLM **:** Sudan Liberation Movement

SNAP **:** Sudan National AIDS Control Programme

SPLA **:** Sudan people's liberation army

STIs **:** Sexually transmitted infections

UNAIDS: the Joint United Nations Program on HIV/AIDS

UNICEF: United Nations Children's Fund

UNFPA : United Nations Population Fund

VCT **:** Voluntary counseling and testing

WHO **:** World Health Organization

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1. Chapter 1: Introduction to the Case Study

1.1. Objective

This introductory chapter aims at introducing the research questions which this research work has been built on, along with some highlights on the thesis overview. The chapter also comprises a brief introduction in relation to the rationale of the research, emphasizing and highlighting the key topics addressed, contents and the structure of the thesis

1.2. Rationale for the Research

Violence against young girls seems to increase in times of conflict and war. Conflict can cause rapid social changes, a large numbers of refugees, displaced women, men and children and the breakdown of social norms. Rates of coercive sex, sexual violence, HIV and sexual transmitted infections (STIs) are also magnified and accelerated by conflict.

The scale of violence against young girls during conflict situations is not known, but they are at particular risk, and face not only rape and sexual violence, but also social rejection and punishment which often follow. A UN report of the Secretary-General (2006) mentioned that:

> In Darfur, the practice of ethnically targeted sexual violence against girls and women continues, particularly in areas of displaced populations. Some 40 percent of the victims have been under 18 years of age. Many of the attacks are carried out by uniformed men. Girls have been targeted in inter ethnic conflicts as a deliberate form of humiliation of a group, and as a means of ethnic cleansing (UN, 2006: 18).

The vulnerability of women and girls to sexualized violence in situations of conflict makes them also especially susceptible to human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS infection) .A report of the UN secretary – general 2003 in children and armed conflict states that:

> There is a correlation between the spread of the HIV/AIDS, sexual violence and the exploitation of girls and women in corridors of wars. A report in the civil - military alliance newsletter on HIV/AIDS UNAIDS estimates the rate of HIV

among combatants to be three to four times higher than those among local populations, and when rape is used as a weapon of war, the consequences for girls and women are often deadly. Armed conflict also exacerbates other conditions in which HIV/AIDS thrives, such as extreme poverty, displacement and separation. UN, 2003:5).

Conflict has long been assumed to contribute significantly to the spread of HIV infection. A report issued by the ISCA revealed how conflict is a catalyst for the spread of HIV, speeding up transmission rates in the developing world. In food insecure conflict zones young girls are being forced into sexual bartering so that they can eat. Forced migration and military movements in conflict zones are contributing to the more rapid transmission of the virus (ISCA, 2002).

Conflict and HIV feed upon one another. "In 2001 some 40 million people in the world were living with AIDS, 28 million of them in sub- Saharan Africa, where most of the world's conflicts are concentrated" (Save the Children 2002:5). However during the last decade several African conflict zones have demonstrated lower than expected HIV prevalence. Spiegel and Haroff-Travel (2006) find a correlation between internally displaced persons (IDPs) and the rate of HIV infection in 8 countries: Burundi, Democratic Republic of Congo, Columbia, Liberia, Nepal, Somalia, Sudan and Uganda which reveals that in most of these countries, HIV prevalence is low in comparison to surrounding countries in the respective regions. Spiegel and Haroff (2006) argue that there is no evidence to support the claim that conflict increases HIV and AIDS among IDPS or IDPS have higher rate of infection than the general population.

On the other hand, conflict and war often entails displacement of large groups both within and across national borders influencing the HIV epidemic in different ways. In some countries; "like Mozambique, conflict took place in all parts of the country and infrastructure was destroyed throughout the country" (Hoeffler, 1999 in Samuel at el, 2007:5).further (Mills, et al. 2006 in Samuel at el, 2007:5) continue to say that "In others, war has been relatively localized, such as in Ethiopia, where military and accompanying civilian commercial activity were concentrated along the Ethiopian-Eritrean border". Internal migration and displacement, from a rural area to an urban area can bring populations with different HIV prevalence rates into contact, thus increasing HIV risk for

those with lower HIV prevalence. In addition to this, women are socially and culturally more at risk than men; certain cultural norms heighten young women's overall vulnerability, such as those encouraging (or forcing) girls into female circumcision and early marriage (Clark, 2004; Glynn et al. 2001). Early marriage also decreases the ability of a young girl to negotiate condom use. "Forced sex or rape, can make HIV transmission more likely, since it may result in more trauma and tissue tearing" (Jewkes and Abraham, 2002 cited in Edstrom and Samuel, 2007:7). In conflict situations where (multiple) rape is widespread, this kind of vulnerability increases, alongside the assumption that attackers are unlikely to use condoms.

> Since rape has been a feature of all recent conflicts, including the ongoing one in the Darfur region of Sudan, as well as in the former Yugoslavia, DRC, Rwanda, Sierra Leone, Liberia, Northern Uganda, and Chechnya, it is claimed that rape is often used as an instrument of war to denigrate the enemy, terrorise and humiliate civilian populations and as a means of soldier gratification (Mills, et al. 2004; WHO, 2004a in Samuel at el, 2007:10).

The psychological, emotional and spiritual damage brought about by rape, as well as the stigma and discrimination faced by the victims from partners, family and the community, cannot be underestimated. Such stigma and exclusion can further marginalize girls victimized by Sexual Gender Base Violence (SGBV) and can result in destitution, leading potentially to transactional sex and HIV infections. Hence, women and girls during conflict, post-conflict and other emergency situations may face a hostile local population, they may be raped during flight or be forced into non-consensual and unprotected sex with fellow refugees/IDPs and/or camp personnel. All these situations place women and girls at heightened risk of acquiring HIV. Additionally, since emergency situations destroy livelihoods, making people more susceptible to food insecurity, which in turn lowers their immunity to acquiring HIV (see Edstrom and Samuels, 2007 for overview of linkages between HIV, nutrition, food security and livelihoods), often a response by women is to engage in sex work, survival or transactional sex as a means of maintaining themselves and their family. It is therefore increasingly accepted that girls in emergency situations are at an increased risk of exposure to HIV infection. Existing gender inequalities exacerbate the vulnerability of

women and girls to sexual violence and exploitation and other human rights abuses during emergencies.

In the context of the issues discussed I believe that it was important to take a closer look at HIV/AIDS issue in light of the Darfur conflict. In the next section I will discuss my research questions.

1.3. The Research Questions

This research aims at investigating the factors that increase the vulnerability of girls to HIV/AIDS in the Darfur conflict. The main question that the study seeks to answer is: What are the conditions that contribute to the spread of HIV/AIDS with a focus on IDPs girls in the Darfur conflict**?**

The primary questions that guided the study are:

- What are the factors that most influence girls' vulnerability to HIV?
- What experiences did girls go through during the conflict?

1.4. Thesis Structure

This thesis is divided into six chapters. While this first chapter has aimed to introduce the research topic and discuss the motivation for this study, chapter two will discuss topics related to the HIV/AIDS pandemic in Sudan, and provide background information of the conflict in Sudan. The third chapter will outline the research methodology utilized through the research. Chapter four will discuss a number of conceptual frameworks relevant to this study including gender and power; in particular gender, culture and power. These are linked to a framework to explore how gender, culture and power relations could affect girls in conflict zone. In addition the relationship between conflict and HIV/AIDS will be discussed. Chapter five will present and discuss the findings and results of my research. The last chapter will synthesize and discuss the findings and generate suggestions for future research.

In the next chapter, I will describe the root causes of the conflicts in Darfur related to issues of identity and I will present relevant literature.

2. Chapter 2: Contextual Analysis

2.1. Introduction

This chapter will briefly introduce the context of the study, the historical background of conflict in Sudan with special emphasis on the Darfur region, its geographical location, and the population. It will also describe the different points of view made by different authors about the root causes of the Darfur conflict. Further it will give an overview of the HIV/AIDS epidemic in Sudan and the relationship between conflict and HIV/AIDS will be discussed and finally a description of the impact of the conflict on education, children and girls will be made. Education is focused on in particular as it is through education that much of the information about HIV/AIDS and other diseases is provided.

2.2. History of Conflict and Civil war in Sudan

The United Kingdom and Egypt agreed to provide Sudan self-government in 1953, so Sudan began the transitional period towards independence with the opening of the first parliament in 1954 under a provisional constitution. Sudan was declared an independent country on January 1st, 1956.

Since its independence, Sudan has enjoyed only eleven years of peace, until the signing of the Comprehensive Peace Agreement (CPA) in 2005 which has added to the number of years of peace. The eleven years of peace was between 1972 and 1983 before civil war broke out again and divided the country between the government of Sudan in the North and the Sudan people's liberation army (SPLA) in the South. In the last twenty years the war killed roughly two million people and displaced 4.5 million. The war has had catastrophic implications for both the North and the South (El-Mardi, 2008: online). Peace talks between the SPLM political party mainly of the South and the National Congress Party (NCP) the ruling party, made significant progress between 2003 and 2004 which resulted into the signing of the Comprehensive Peace Agreement; a major agreement for the consolidation of peace signed on January 9, 2005 in Nairobi. As Sudan was reaching a resolution for the long civil war between North and South, tribal clashes

broke out in the western region of Darfur with rebels like the Justice and Equality Movement (JEM) and Sudan Liberation Movement (SLM) claiming the government has neglected the Darfur region economically.

A combination of political, social, economic and environmental problems has caused the current conflict in Darfur to be complicated. This complicated conflict has affected millions of people with hundreds of thousands killed and over two million left displaced in refugee camps and neighboring countries thus straining local resources. Human rights watch (2005online) reported "Countless women and girls have been raped. Hundreds of villages have been bombed and burned, water sources and food stocks have been destroyed, property and livestock looted, and mosques, schools and hospitals have been burnt to the ground". Also according to MTCF (2008: online) "an estimated 3.6 million people have been affected by the ongoing crisis in Darfur". Communities continue to be in need of basic social services due to insecurity and a lack of funds.(UNICEF, 2006: online) reported that "A total of about 1.8 million children have been affected by the conflict, some of them displaced multiple times through repeated attacks. The impact of violence, disease, malnutrition and dependency is leaving a mark on this generation of children, weakening their capacity and trapping them in the cycle of poverty". Also a UN Report of the Secretary-General on children and armed conflict in the Sudan(UN:2007) stresses that the level of grave violations against children in the Sudan remains high, including their recruitment and use by armed forces and groups and rape and sexual violence, especially in Darfur. The report continues stating that "with over 30 armed groups operating in Sudanese territory, and with the regular shifts in alliances and splintering of the groups, it is a considerable challenge to present a definitive and comprehensive overview of parties" (UN, 2007:4).

2.3. Darfur Demography

Darfur is a region located in the far west of Sudan, bordering the Central African Republic, Libya, and Chad. In the 1990s, the Darfur region was divided into three federal states by the central government: West Darfur, South Darfur and North Darfur, with their capitals being AL Geneina, Nyala and Elfasher respectively.

Darfur means in Arabic "the homeland of the Fur" and the region is inhabited by different ethnic groups just like the Sudan in general. Ibrahim (2006:12) states that "in Darfur, there live about eighty ethnic groups; some of Darfur's people are of African origin while some are Arabs". Both groups are Muslim and Ibrahim argues "we should differentiate between the groups which define themselves as Arab and those which define themselves according to their respective indigenous groups" Ibrahim (2006:12).

According to Ahmed (2006:22) "it is important to note that, however that the word Arab represents a cultural rather than a racial identity." He continues arguing that "the word Arab therefore, stands for those Arabic–speaking people who, through a long historical process, have intermingled with the indigenous non-Arab Sudanese. Physically they bear more similarities to Africans than to the people of Arabian Peninsula" (Ahmed, 2006: 22). The majority of indigenous people in Darfur speak Sudanese Darfuri Arabic as a lingua franca, in addition to their own languages.

However, Mamdani (2004:online) points out that "…all parties involved in the Darfur conflict - whether they are referred to as 'Arab' or 'African' - are equally indigenous and equally black, all are Muslims and all are local." He also states that from a cultural point of view one can be both "African and Arab" (Mamdani, 2004: online).

Since the Darfur conflict erupted in early 2003, it has been described as ethnic cleansing. Grono (2005:39) states that "what we have seen in Darfur since early 2003 is a process of ethnic cleansing taking place before the world's eyes." Furthermore Apsel (2007:25) asks "after genocide or ethnic cleansing was acknowledged by governments and international bodies, the question remains: why has so little been done to stop the governments genocide practice?'' Going back to the history of Darfur may explain these statements by different people and that describing the social identity of the people in Darfur could bring more understanding of what is going on in Darfur region.

Waal (2004:online)[1] explains the identities' formation that took place throughout the history in the country, stating that there are three different identities each is primarily associated with a different period in the region's history. He explains that there are four in total:

- Sudanic identities associated with the Dar Fur sultanate.
- Islamic identities, the administrative tribalism associated with the 20th century Sudanese State.
- The recent polarization of Arab and African identities, associated with new forms of external intrusion and internal violence.

In this research work I will concentrate on the last and most recent one that is associated with violence.

Before moving on however, I want to explain the two terms race (racial) and ethnicity for a clearer understanding. According to Giddens (2006:486), the term race could be understood as "a set of social relationships which allow individuals and groups to be located, and various attributes or competencies assigned, on the basis of biologically grounded features." And he defines ethnicity as "an idea that is purely social in meaning. Ethnicity refers to the cultural practice and outlooks of a given community of people that set them apart from others" (Gidden, 2006: 487). According to this, different ethnic groups can be distinguished from one another by the cultural practice, language, religion and their lifestyle. Apsel (2007:25) states that for the case of the Darfur "the increased distinction between Arab and African identity was overlaid onto differing lifestyle." According to these points of view regarding the Darfur context, the term "Arab" is used as occupational rather than ethnic as most of the Arabic- speaking groups are pastoralists, while the other non Arabic groups are sedentary farmers. But Mamdani (2009:148) says Haaland discovered during his research in Darfur that:

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[1] Some information I use is taken from online articles and UN agencies reports where there are no page numbers thus I use the word online to show this

...“fur” could become “Arab” and “Arab” could become “Fur.” [He began his research with the assumption that] ethnic identities were fixed and permanent, so that a person's identity determined his or her occupational specialization.

His field work shows that the fur were identified with grain cultivation and sedentarily village life where as the Baggara ideology show the preferences for pastoralism. But then he came across the cattle camps whose members came from Fur and thus field work showed that many transit processes were at work. Not only were some peasants becoming nomads (nomadisation), but some nomads were also becoming cultivators (peasantisation). Furthermore the transitions were not just occupational; they were also ethnic; not only could Fur become Zaghawa (non Arab) or Baggara (Arab), but a Zghawa or Baggara person could become Fur (Mamdani, 2009).

The root of the Darfur conflict was also discussed in relation to ethnic cleansing. M, Ahamed (2006:20) states that "since most African Darfurian people are settled cultivators and most Arab Darfurian are nomadic, the question arises regarding the extent to which the current conflict is related to competition over natural resources." The Darfur Arab tribes are nomadic cattle and camel herders, while Darfur African tribes are mostly settled farmers. But Ardenne and Hoeven (2005:19) argue that:

> For centuries, African subsistence farmers and Arab nomadic herders, all of them being Muslims, coexisted there. They, also, cooperated for example after farmers had harvesting a crop, the nomads would bring their cattle and camels to eat the residues and fertilize the soil, this symbiosis ensured the survival of both groups.

In the next section, I will describe the conflict over resources with emphasis on the land. The land system called "hakur'' which was introduced by Sulayman - a member of the Keira dynasty of the Keira Kingdom in mid of 17th century – and is considered as one of the most important factors that contributed to Darfur conflict in 2003.

2.4.   Land system (Hakura)

In the earliest period recorded, the Daju, non -Muslim ruling family inhabiting Darfur appears to have been the dominant group in Darfur. Daju were succeeded by the Tunjur by the13th century. The region had fallen under the domination of Islamic powerful empire and was ruled by Tunjur elites. When the Tunjur Empire fell for unknown reasons, the Keira (Fur) expanded and took power over the region. The sultanate of Darfur entered the historical records during the mid 17th century, under Sulayman, who belonged to the Keira dynasty and considered by the Fur as the second founder of the state. Sulayman introduced a new system of granting land called "hakur" (derived from the word Hikr, meaning ownership). The granting of hawakir-plural of hakur- by sultans was initially associated with the encouragement of fugara (religious teachers) to settle in Darfur and preach Islam. Abdul Jualil (2006) says the hakura granted by Keira sultans were two types; an administrative hakura, and a more exclusive hakura of privilege that gives the title holder all rights for taxes and religious dues. (Abudl Jualil, 2006:4) continues to say

> The first type was usually granted to tribal leaders and later came to be known as "dars" (literally meaning homeland). Effectively, administrative hakura confirmed communal ownership of land for a given group of people, who usually make up a tribe or a division of it under a recognized leader.

Originally the group had acquired such rights as a result of occupation from the pre-state period. The sultan in this case merely recognized that fact and reconfirmed the position of the group's leader. Thus, while much of the land in Darfur was communally held according to tribal dar rights, the later development of the hakura system show some parallels with the feudal system. As far as tribal groups are concerned, the land they occupied effectively became synonymous with an administrative hakura. In other words, what used to be communal land has now come to be considered as an administrative hakura or dar. Tribal homelands were named after the tribe e. g. dar Zaghawa (land of the Zaghawa people) and Dar Rezeigat (land of the Rezeigat people). This development introduced a new function to the land other than its economic potential; it became a symbol of the group identity (Abudl Jualil, 2006).

When Darfur was finally annexed to Sudan in 1916, the colonial authorities introduced little changes to the existing system of administration. Under their policy of indirect rule, they confirmed tribal leaders as part of a native administration system and custodians of land belonging to their tribes. (Abdul Jalil, 2006:25) states that "tribal homelands (dars) came to be recognized by the government on basis of expediency since it helped in controlling the rural population more efficiently" (Abdul Jalil, 2006:25). The nomads were not part of the hakura system. Hence, the nomads had to rely on customary rights to migrate and pasture their animals in areas dominated by farmers. As the nomads moved between the northern and the southern part of the region, specific arrangements for animal routes were made by their leaders and those of the farming communities, and these arrangements were sanctioned by the government. Further, a law was introduced in 1970 during the era of the Numeiri government called the Unregistered Land Act (ULA) that added another complexity to the system of land tenure in Darfur. Abdul Jalil(2006:25) states "according to that law, all unofficially registered land in all parts of the Sudan was to be considered government owned land, hence accessible to all citizens." Non-land-holding groups, includes the Arab camel nomads of the north plus new-comers from neighboring Chad were ready to claim rights for establishing their own native administration structures in their new homes since the land they occupied belonged to the government. Such claims would have been unthinkable in the past when newcomers were expected to remain as "guests" of the host tribe and abide by its customary rules regarding land tenure and native administration. The land tenure system in Darfur has tended to increase inter-communal tensions, which has in its turn has led to many conflicts. The system worked for decades until the drought of the 1980s that occurred as a result of climatic change.

2.5. Climatic Change

The Darfur region, over the last several decades has shown an overall declining trend in rainfall and an increase in the number of dry seasons. The area has experienced severe droughts that have caused the loss of human life, livestock and crop failure. The desert in northern Sudan has advanced southwards "108 km over the past 40 years"(IRIN, 2007:

online). Accordingly, some of the analysts consider the major factor that lies behind the conflict in the region is the climatic change.

The western part of the Sudan is among the areas that have been deeply affected by the drought in the 1970s, besides the famine and drought of the 1980s. (IRIN, 2007: online) noted that

> Competition between pastoralists and agriculturalists is key to so many conflicts in East Africa, including the crisis in Darfur. Violence between tribes and ethnic groups are the most visible dividing lines, but the stories of these conflicts cannot be told without including underlying environmental and demographic stresses (IRIN, 2007: online).

Due to this, some believe that the root of Darfur's troubles lie in the dearth of natural resources in the region, bolstering of its disintegrating ecology from drought and desertification which has been brought on by global warming.

However, the (IRIN, 2007: online) reported that many elements contributing to the conflict in Sudan have little or no link to the environment or natural resources. These include political, religious, ethnic, tribal and clan divisions, economic influences, land tenure deficiencies and historical feuds. "In addition, where environment and natural resource management issues are important, they are generally contributing factors only - not the sole cause for tension" (IRIN, 2007: online).

The marginalization of the region, as well as the political roots of the conflict should thus not be ignored.

2.6. Marginalization of the region

"It is a problem of underdevelopment that has inflicted the region" (Ibrahim, 2004 in Salih, 2005:23). There are claims that the problem is not resource scarcity, but the central government's neglect of the Darfur region.

When the rebellion broke out in 2003, the two rebel movements, the Sudan Liberation Movement (SLM) and the Justice and Equality Movement (JEM), declared that their primary goal as to end the economic, social, and political marginalization of Darfur-the Sudanese province that has been completely neglected and marginalized since 1917, when it was annexed by the British colonial forces (Heleta, 2008: online). Throughout history, during the Mahdyya, the Egyptian and British colonial periods, and even after independence, Darfur has been denied access to national power and wealth. The poverty and oppression in Darfur is the result of many years of marginalization. One of the JEM commanders said that the JEM's goal is to change the regime and make dramatic changes in Sudan, adding that "power and wealth must be shared equally in all the marginalized areas" (Heleta, 2008: online).

Overall it may be concluded that the political, social, economic and environmental problems have been the main causes of the Darfur conflict and each one of these factors play a major role. Also populations affected by conflict or natural disasters can become more vulnerable to HIV because of a range of factors including poverty; displacement; food insecurity; increases in pre-existing GBV. The next Chapter will give overview of the HIV/AIDS situation in Sudan and the impact of armed conflict and its relation to HIV/AIDS.

3. Chapter 3: HIV/AIDS and the impacts of armed Conflict

3.1. HIV/AIDS in Sudan

The AIDS epidemic has quickly become one of the most serious health and development problems facing Sudan today. The Sudan National AIDS Control Program (SNAP) reported "efforts to combat AIDS in the country have so far been too little, too late" (SNAP, 2005:4).

> The first case of HIV/AIDS was diagnosed in Sudan in 1986. Since then the prevalence of the disease is on the increase. In 2001, AIDS was responsible for about 23 thousands deaths in the country and leaving more than 63 thousands orphans. By December 31, 2006 the total number of HIV/AIDS cases reported since 1986 was 17,000 cases (SNAP, 2005, 5).

Over half million people are currently infected with HIV in Sudan. SNAP states also that "the major mode of HIV transmission was heterosexual transmission which accounts for (97%) of all reported AIDS cases" (SNAP, 2005:5). The factors driving the HIV/AIDS epidemic in Sudan were identified as war and the resulting population movement (displacement, refugees, and military personnel), the wide open borders with nine African countries some of which have high HIV prevalence rates, the economic crisis in the country and urbanization with extensive migration from rural to urban areas (UNAIDS, 2006). According to a National Policy report on HIV/AIDS in Sudan, "no study was done to evaluate the social and economic impact on the country" (National Policy report on HIV/AIDS, 2005:2). UNAIDS has estimated that 23,000 persons died of AIDS during 2001 and estimated number of children who have lost their mothers or fathers or both parents to AIDS and who were alive and under age 15 at the end of 2001 is 62,000" (National Policy report on HIV/AIDS, 2005). Another report by UNAIDS expects Sudan to be the country with the highest prevalence in the region of North Africa and the Middle East (UNAIDA, 2007). Sudan is also facing the risk of displacement from affected areas such as the south part of the country. South Sudan HIV policy (2008)

reported that in southern Sudan further spread of HIV/AIDS, which already affects 2.6 percent of the adult population in that region, could take place.

Research carried out by SNAP in 2002 for strategic planning purposes found out that Khartoum state with its largest population is considered as one of the states with higher prevalence rates. The estimated number of people living with HIV/AIDS in the state is approximately 88,000 cases of whom only 6, 517 (7.4 %) were detected up to December 2006. A total of 2, 353 of the cases were AIDS while 4, 164 were asymptomatic HIV infected (SNAP, 2005).

3.2.   The Impact of Conflict in HIV/AIDS

Conflict has long been assumed to contribute significantly to the spread of HIV infection. However, during the last decade several African conflict zones have demonstrated lower than expected HIV prevalence. A recent study by Spiegel in 2007 examined HIV prevalence data from seven separate African conflict zones and concluded that there is some evidence that

> When initial low prevalence rates are combined with conflict-induced isolation over long periods of time, HIV progression at the population level may be considerably attenuated. Evidence from DRC, south Sudan, Sierra Leone, and Somalia suggests that conflict began when the prevalence of HIV infection in those countries was low and it remained fairly low throughout the conflict compared with peaceful neighboring countries (Spiegel, 2007 in Samuels et al. 2008:6)

Spiegel continues to say that "A plausible explanation is that low pre-conflict prevalence rates among local populations and combatants were insufficient to accelerate HIV infection, despite increased risk of transmission due to rape and other factors associated with vulnerability to HIV in conflict settings" (Spiegel, 2007 in Samuels et al. 2008:6).

On the other hand, conflict and war often entails displacement of large groups both within and across national borders and this will affect the HIV epidemic in different ways. Disasters within a country can lead to internal migration and increase HIV risks

among populations. For example, groups of people with higher HIV prevalence migrating to an area with lower HIV prevalence can increase HIV risk for the people in that area.

The case in Angola could be a clear demonstration of the above; where in 1987 HIV had spread from northern areas of Angola to central and southern regions, accompanying war-induced population displacement but for (Spiegel, 2004:335) who sheds light on the relation between conflict and HIV and argues that "The complex relationship between HIV and conflict it is a misperception that refugees HIV rate are always higher than those in their host communities; in fact evidence suggests the opposite is more likely , but it is always context specific".

3.2.1. The impact of conflict on children

War creates child- headed household, unprotected children and homeless children. Save the children, UK (2002) reported that children affected by conflict are often "denied their basic rights to food, shelter, education and health care" (Save the children, 2002:1). They are forced prematurely to take on adult roles, they drop out of school and take up work to survive. In a report addressed to the Security Council, the United Nations Secretary-General summarized well how children are affected by conflicts:

> Children continue to be the main victims of conflicts. Their suffering takes many forms. Children are killed, made orphans, maimed, abducted, deprived of education and health care, and left with deep emotional scars and trauma. Forced to flee from their homes, refugees and internally displaced children are especially vulnerable to violence, recruitment, sexual exploitation, disease, malnutrition and death. Children are being recruited and used as child soldiers on a massive scale. Girls face additional risks, particularly sexual violence (UN, 2003: 4).

Thus I have pointed out that war affects children in many different ways. Also war affects boys and girls differently, manifesting the issue of gender as important where the impact of war is concerned.

3.2.2. The impact of conflict on education and gender

Although there are no clear causal linkages between lack of education and conflict (Vaux, 2002 cited in Kirk, n.d:2),state that "understanding the linkages between gender, education and conflict is an important issue in achieving Education For All (EFA); it is also a human rights issue, and more specifically a women's and girls' rights issue".

Education is an absolute right for all children, yet in Darfur children have always had limited access to schooling. According to Reid "in South Darfur it is estimated that there are nearly 257,000 conflict-affected children of school age, two thirds of them IDPs. South Darfur has the largest population of school-age children not enrolled in school" (Reid, n.d.: 60).

"It is important to acknowledge that women and girls experience conflict differently from men and boys. Conflict impacts in particular ways on the educational opportunities of girls and women; school-going girls are forced to drop out, and those excluded in pre-conflict times, may have even less chance of access" (Governance and Social Development Center, 2010: 8). Many times during conflicts and crisis, discrimination and marginalization against women and girls tends to be at a high level by factors such as disability, ethnicity, and location causing them to miss out on education. There is increased vulnerability and inequality faced by the female sex in times of conflict; for example, girls are denied education in favor of boys, high rate of early pregnancy and early marriage cases.

All in all, war lays bare the gender dynamics of societies, and of education systems, and the particular vulnerabilities of girls. "As conflict makes living conditions more difficult, dangerous and uncertain, tentative educational and other rights-based gains made by women may be reversed" (Kirk ,2003:5).

Conflict can exacerbate the factors which contribute to low school enrollment of girls. These include parents being unable and unwilling to spare the costs (direct and indirect) of sending girls to school, and the safety and security concerns about girls traveling the long distances from home to school, and then being at risk of sexual harassment from teachers (2003cited in Krik 2003:6). Reid noted that in Darfur for those who do not have

immediate access to schools within camps, long distances to the nearest available schools – sometimes an hour's walk in each direction – additionally hamper access to educational services. This marginalizes girls in particular, many of whom are not permitted to walk long distances for fear of attack (Reid, n.d.: 60). Gender-aware responses are therefore critical. Girls are more likely to drop out of school than boys in difficult circumstances when their labor is needed at home, or when a decreased family income means that there is no money to pay fees, or provide the necessary uniforms and supplies. Gender roles and stereotypes are often reinforced by the need to protect women and girls, and by the additional time and energy spent in traditional roles, such as collecting water and firewood. In Darfur, the work of women and girls has doubled or tripled, and yet the situation has left boys with no new or heavier workloads. Reid continues arguing that "instead of attending schools, girls are required to take care of children, cook and clean, and boys are often expected to support their families financially" (Reid, n.d.:60).

In addition Kirk (2003:6) states that "conflict and its aftermath can also be a time when gender roles have to change, and the practical and economic imperatives of survival and reconstruction take priority over education. When a husband/father is away fighting, has been killed or has fled, women and even young girls are left heading households". El-Bushra et al (2002cited in Kirk 2003:7) continue arguing that "conflict tends to result in women and girls taking on additional responsibilities" (El-Bushra et al., 2002), and economic necessity may mean that they are forced into income-generating activities rather than attending school.

3.2.3. Conflict and Sexual violence and Rape

Sexual violence is a prominent aspect of many recent conflicts. This sexual violence is often linked to the possible consequence of infection with the HIV virus. In the case of Rwanda, HIV/AIDS has even been identified as a "weapon of war," which is transmitted to women intentionally by using rape. The special Representative of the Secretary General for children and armed conflict reported in 2007 that in Darfur the international community has witnessed alarming levels of sexual violence, often as a deliberate strategy of humiliation and ethnic cleansing (special Representative of the Secretary

General for children and armed conflict report, 2007). Such attacks have been directed especially against the large populations of internally displaced girls and women. In many places, the collection of water and firewood outside the boundaries of camps has become a life-and-death gamble for girls.

The risk of direct HIV transmission due to rape is affected by a range of physiological factors. When sexual intercourse is forced, abrasions and cuts are more likely to appear, increasing the risk of transmission. Reports show that "sexually transmitted infections (STIs) are common amongst the IDPs population in Darfur, while there is strong evidence that STIs also increase the risk of HIV transmission" (Scheewe:2007: online). The practice of female circumcision is widespread in Darfur, increasing the risk for injury during sexual intercourse, and thus the risk of HIV infection. Moreover, women are biologically twice as likely as men to contract HIV during sexual intercourse, while this probability is even higher for young women and girls. UN report (2007) states that in Darfur rape is widespread and used as weapon of war. It is clear that the problem extends far beyond the few cases that have been confirmed. In Darfur, investigation and prosecution of the crime of rape is also very rare.

3.2.4. The Impact of conflict on knowledge

Lack of awareness of STIs and HIV was one of the most important behavioral causative (Save the Children, 2002) reported that the acute lack of HIV/AIDS knowledge in conflict situations increases vulnerability to infection denies young people access to vital information and leads to discrimination. Although correct information is not sufficient for behavioral change, it is a necessary precondition. Low awareness is partly due to the fact that conflict undermines awareness raising and prevention efforts, and partly because, even where awareness is high, the daily realities of life under conflict can diminish the perceived risk of HIV infection.

I have now provided a brief picture of the impact of HIV/AIDS, both in terms of conflict and also in terms of how it can affect the lives of women and girls particularly in Darfur. I now move to address the methodology of this study.

4. Chapter 4: Research Methodology

4.1. Introduction

This chapter will describe the methodology used in this study by identifying the steps that were used in this research process. These steps include defining the methodological approach, study design, the description of how the population and sample size of the study were selected, and how the researcher obtained access to the research site. This will be followed by explaining the tools of data collection, and the ethical matters that I came across during the field work. Finally this chapter discusses the issues of validity, reliability and limitations that face the study.

4.2. Qualitative research

"Qualitative research is a research strategy that usually emphasizes words rather than quantification in collection and analysis of data" (Bryman, 2004:266). I see qualitative research as a way to dig deep and to discuss perspectives, experiences about life. It might well be chosen for investigating issues, which for ethical, practical or epistemological reasons are difficult to measure. The topic of my study represents such an example of a case which is difficult to measure.

Since my research inquiry is focused on the investigation of the factors that influence girl's vulnerability to HIV/AIDS in the Darfur conflict, the study employed a qualitative research approach. The identification of the research approach is based on the perspective of what Rubin and Rubin (1995:38) argue that "qualitative research is not looking for principles that are true all the time and in all conditions, like laws of physics; rather, the goal is understanding of specific circumstances, how and why things actually happen in a complex world." Furthermore, the qualitative method has the capability to provide opportunities to get the inner experiences of the participants, which can contribute to discover the factors that may spread HIV/AIDS among girls due to the conflict in Darfur. Patton (2002) argues that the qualitative researches produce rich details and narrative descriptions that are usually used in order to understand the specific populations or situations being studied.

Qualitative research in addition employs different methods that facilitate in-depth understanding of different factors, such as those that make girls vulnerable to the infection of HIV. I used a number of methods to collect the data in order to get a better and complete understanding of the research focus. In the study the data collection methods used include participant observation, interviews as well as document analysis.

The next section will address the research design which describes the selection of the appropriate research approach and research methods and the other resources that were needed for the research.

4.3.   Research design

Having a plan is essential in most of the social research. The research design of the study followed what Cohen et al. (2007:117) state as "the criterion of planning must be fitness for the purpose." The purpose of the design is thus to determine a method which generates accurate and neutral data from which valid conclusions may be drawn. Since the study seeks in depth detailed data to understand the particular social phenomena in the real setting of the people, I chose to use a case study design which I believe is appropriate for the subject of my enquiry. I also decided not only what kind of data I needed, but how the data would be collected. Moreover, for analyzing such kind of data the selection of the form of data analysis must be appropriate for the data collection. Cohen et al. (2007:86) argue that "the criteria for deciding which forms of data analysis to undertake are governed both by fitness for purpose and legitimacy." Since the nature of data collection is description and narrative the analysis would also be qualitative.

The size and accessibility of the sample included in this study was affected by the time and work involved. Next I will explain more about the population and sample of the study.

4.4. Sample of the study

In doing social research, one of the most important decisions that any researcher makes is how to obtain the type of participants needed for the study. It is often difficult to talk to every possible person of interest; the sample that we draw for the study must be in some way representative of the people of groups to whom we want to focus our attention upon. Thus the study used purposeful sampling as Patton (2002:230) argues that "focuses on selecting information rich cases whose study will illuminate the questions under study." Therefore, the selection of the sample is based on the judgment to include people of interest and exclude those who do not suit the purpose of the research.

There are several purposive sampling strategies that can be used in qualitative studies; the logic of each strategy serves a particular data gathering and analysis purpose. As Cohen et al. (2007:117) state the "selection of a sampling strategy must be governed by the criterion of the suitability." Consequently this study used a snowballing strategy. When utilizing this strategy, the researcher usually asks whom should I talk to; so the process begins with one person or a small group of people who are relevant to the research topic. Patton (2002:243) describe snowball sampling which is to "identify cases of interest from sampling people who know people who know people who know people what cases are information rich, that is, good examples for study, good interview participants." Also Cohen et al. (2007:116) noted that "this method is useful for sampling population, where access is difficult, maybe because it is a sensitive topic ([HIV and Sex) or where communication network is undeveloped."

The study applied the snowball strategy where some of the cases were identified by the teachers in the IDP girls school (I particularly sought out girls who were in a high risk groups, such as girls who were known or thought to exchange sex for food). Also some teachers directed me to the literacy center where I could find girls who work as tea sellers in the market, many of whom are pregnant without being married.

Once respondents were identified, arrangements were made for times to interview them. This was arranged by the headmaster and the staff of teachers. The respondents were girls ages 9-18. The total number of interviewee is 28, the technician of the lab at the health

Center, the head of the reconciliation committee of the IDP camp, the headmaster of the IDP school and two of the health promoters who work for the NGOS in the IDP Health Center.

4.5.   Study site

I consider myself familiar with the context of the study due to my previous work with Non Governmental Organization (NGOs) operating in the camps for displaced persons in West and South Darfur; I worked there for almost two years. Since I still had a good relationship with my previous employer, this made it easier to know in which camp I could conduct the study in, without having to worry about the security situation. They (my pervious employer) suggested that the study could take place in one of the South Darfur camps where the organization has a project and they offered to facilitate access to the place so that I could do my work. They started by introducing me to the head of the committee at the camp. I was in the middle of the process of getting the permission to access the field when I received an apology from the organization stating that it will be difficult to access the field due to political instability in the region. Thus, it is very important to explain how the security situation in the Darfur region during that period of June and July 2008, which affected the study and delayed my field work.

July, 14, 2008 was the date of the filing of the Prosecution's Application for the warrant of arrest for the president Omar Al Bashir for war crimes and crimes against humanity in the Darfur region. According to Mr. Luis Moreno-Ocampo, the Prosecutor of the International Criminal Court (ICC), the President Al Bashir "bears criminal responsibility in relation to 10 counts of genocide crimes against humanity and war crimes" (Zimmermann July 14, 2008 online). The Prosecutor went on to state that, President Al-Bashir "masterminded and implemented a plan to destroy in substantial part the Fur, Masalit and Zaghawa groups, on account of their ethnicity" (Zimmermann July 14, 2008 online). It was in the Darfur region that the Pre-Trial Chamber of the ICC was going to review the evidence presented by the Prosecutor and decide on whether or not to issue an

arrest warrant. Therefore, the UN changed the security levels in Darfur region and reduced the number of the (NGO) staff working in the field site in Darfur.

As such, it was not possible under these circumstances to access the field, because this affected the security in the region. After sometime I was informed that the security situation had improved and I tried to negotiate entry to the camp again. This time they agreed to support my study and they introduced me to the people in the camp. This facilitated the process of interviewing my respondents at the health clubs that were run by the NGO, because they were readily available.

Furthermore, the permission that I got from the contact organization and Humanitarian Aid Commission (HAC) enabled me access the IDP camp and it was an opportunity to introduce myself to some of the community leaders who ensured that my work was progressing smoothly. It also provided me with a chance to be aware of power relations within the setting. Hammersley and Atkinson (2007:50) state that "knowing who has the power to open up or block off access or who considers themselves and are considered by the others to have the authority to grant or refuse the access is, of course, an important aspect of sociological knowledge about the setting." In my view the relationship I had established, had important consequences for the research. Maintaining a trusting relationship with such people, made it easy for me to build trust with community leaders, people in the field and this facilitated data collection.

Thus I will now proceed to explain about the particular data collection methods used in this study.

4.6.   Data collection

Data was collected within a three month period. I conducted my fieldwork between the 7th of August and 11th of November 2008. Data was collected from different respondents who were relevant to the topic of the study. The respondents were chosen from different locations, IDP schools, literacy center, health center, health clubs run by NGOs, and from homes of some people when I was doing house visits with the health promoter of the

Health Center. Various methods were used to collect the information such as participant observation.

4.6.1. Participant Observation

Participant observation is an important data collection technique in qualitative studies. One of the characteristics of participant observation is that one immerses the self into a community to gain a deep knowledge about the details and inner workings that could not be obtained from literature or a type of method where information is rendered second-hand, such as document analysis.

Moreover, participant observation enables the researcher to share as intimately as possible in the life and activities of the people in the observed setting. The purpose of such participation is to develop an insider's view of what is happening. This means that the researcher not only sees what is happening but s/he "feels" what it is like to be part of the group. It also yields insights into people's lives and customs that they would not be able to tell you if you just asked (Bryman, 2004).

The reason why I considered observation particularly important for this study is because I realized that being in the IDP camp I experienced and observed how the world looked for the people in the camp; I was able to see what they liked to do, hear what they always spoke about, and learned what they had experienced during displacement. Furthermore, I heard their stories on how they were living in the villages before the displacement, their losses during the conflict and their fear and anger.

Also participant observation allowed me to accept a role within the social situation; as I participated in the context as a member of the group while observing it. Seale et al. (2004:218) argued that, "participant does not mean doing what those being observed do but interacting with them while they do it." In this study I adopted the role of an observer as a participant. According to Bryman (2004:301) in this role the researcher is mainly an interviewer." I spent some time writing some notes during and after interviews while working in the IDP school and in the health center. I also visited the homes with health promoter, spent some time in the literacy center watching and helping occasionally. My

role as observer and participant allowed me to gather two kinds of data, the detailed descriptions of peoples' life stories and the natural worldview as experienced by those studied. All this helped to contextualize the information that I would gather in the interviews.

Observation helped me as well to establish contact with respondent and build relations with people in the field. It also contributed to shaping questions in my interview guide and this brought in new perspectives on some events. Moreover, since I was investigating the factors that increase the vulnerability of the girls to HIV/AIDS, observation helped me to understand the challenges of discussing such issue with the girls in the IDP camp. Therefore, some of the questions were rephrased in a way that was acceptable to the participants and at the same time helped me answer the research questions.

4.6.2. Interviews

Interviews are used as the main method of data collection in this study. The interviews are chosen according to Kvale's (2009:3) understanding which is that "an interview is a conversation that has structure and a purpose." Through conversations and by being curious about what people are saying we get to know them, understand their world; learn about their experiences and feelings. Kvale, (2009:7) also argues that "conversations are an old way of obtaining systematic knowledge". Though the subject of the study was sensitive and people were reluctant to speak about the topic, the use of interviews facilitated an in-depth investigation. It also allowed me to understand the world of the participants from their own perspective and the stories of their daily lives.

Qualitative interviews as Rubin and Rubin (1995:51) state " are specially use full when you need to bring some new light on puzzling questions" or "when you want to learn how present situations resulted from past decisions or incidents further when the purpose of the research is unravel complicated relationship and slowly evolving events.". The study used a semi-structured interview guide (see appendix B), which is flexible, and it allows new questions to be brought up during the interview as a result of what the interviewee says or in order to follow up the stories that are told by the respondents. Also there is

openness to changes of sequences and forms of the questions. In addition, this type of interview is an effective method to learn from people what they believe, how they think, and how that affects their life from their point of view (Kvale, 2009).

Interviews were carried out with girls who were both in school and also with those who had dropped out. With the girls who were in school the interviews were conducted at the end of the school day in one of the classrooms. The other girls were interviewed in their houses during pay-in visits. In terms of language, I used Arabic in the interviews because all the respondents were fluent in this language.

The health committee of the camp had to approve my interview guide in advance and some of my questions were deleted without significant impact to my research. However the flexibility of the interview guide approach allowed for other questions to be introduced or some questions to be articulated in different ways.

The researcher also interviewed the Head of the Reconciliation Committee who was recommended by other members of the committee to answer the questions that were deleted from the interview guide, and interviewed the lab technician with separate interview guide.

4.6.3. Document review

In addition to participant observations and interviews, I also made use of various documents to obtain knowledge about the HIV/AIDS in conflict and emergency setting before I left to the field. I also read some documents about Darfur conflict and displacement which were relevant to the concern of my study subject. These documents added additional insight and information to the study. According to Hammersley and (Atkinson, 2007:121) "there are multiple sources of relevant documentation for any setting or group of people one might study". I was able to look at government reports such as Sudan's National AIDS Council Strategic Plan on HIV/AIDS for 2004-2009, and the Sudan National AIDS Control Program (SNAP). I also reviewed some documents sourced from the UNAIDS, UNFPA, WHO, UNECIF and NGOS such as Save the

children. Some of these materials were on the Internet. Furthermore, I was also able to obtain medical information regarding the number of HIV positive people in the area.

The documents that were used in this study were guided by the criteria of assessing the quality of the documents suggested by Scott (1990, in Bryman: 2004) listed as: authenticity, credibility, representativeness and meaning. Next I will discuss issues related to the validity and reliability of the study.

4.7.   The Validity and reliability

Validity and reliability as criteria of the evaluation of the qualitative research mainly were the issues of debate among the researchers. Validity as Cohen et al. (2007) state is an important key to effective research and recently the concepts of validity have been redefined by qualitative researchers. Many of the researchers have developed their own concepts of validity and have often generated or adopted what they consider to be more appropriate terms, such as, quality, rigor and trustworthiness also Winter (2000, in Cohen, et al, 2007: 117) argues that "in qualitative data validity might be addressed through the honesty, depth, richness and scope of the data achieved, the participants approached, the extent of triangulation and disinterestedness or objectivity of the researcher."

Thus when I conduct this qualitative study, the major consideration was to obtain valid and reliable findings without bias and error or to minimize them to the least as possible. I used the strategy of triangulation of data from different methods such as interviews, observation and document analysis to maximize the validity of data. Using triangulation allows a more detailed picture to emerge and thus a deeper understanding was obtained. Patton (2002) argues that fieldwork is more than one technique, when different sources of information are required. The researcher uses several sources because no single source of information can be trusted to give a clear picture and a comprehensive perspective. By combining observations, interviews and document analysis, I focus on the strength of one technique over the other. Since observations emphasize the external behavior of the observed, it could not help me see what the respondents felt inside. The interviews gave

the observed an opportunity to express their feelings and thoughts. Yate (2004:52) argues that "the advantages of face to face interviewing in terms of establishing rapport with the respondent and providing opportunity for clarification had to be balanced against the possible great opportunities for bias due to interviewer effect and reduce anonymity" (Yate, 2004:52). Also the researcher would not be decisive with information from documents without supplements from interviews and observations. Thus, these methods were compatible: observation guided me as researcher to add some of the important questions that I wanted to ask the respondents, and interviews facilitated my interpretation of the significance of what was observed, while reviewing documents provided an important insight to the study. By using these different methods I tried to overcome the weaknesses and minimizing the limitations of using a single method.

In addition the crucial point of any qualitative study is its quality. A good qualitative study can help us understand a situation of a particular group of people in a particular context by providing significant descriptive details that would otherwise be confusing as Bryman(2004:281) states "qualitative studies are often full of details information about the social worlds being examined." Guba and Lincoln (1985 cited in Bryman 2004:275) argue that "the thick description provides others with what they refer to as database for making judgments about the possible transferability of finding to other milieux" (Guba and Lincoln 1985 cited in Bryman 2004:275).

Transferability refers to the degree to which finding could be generalizable across groups (Lincoln and Guba, 1985 in Cohen, et al, 2007). As I employ case study research in which I examine the factors that increase the vulnerability of the girls to HIV/AIDS in the IDP camp in South Darfur, the generalizability was not my target but rather that the finding of the study can be transferred to a similar situation. By providing rich thick description, I provide the user of this information the opportunity to see if these families can be transferred to their context.

Finally I believe that the good cooperation between the researcher and the study population before and during the interviews achieved a high standard quality study and ensured that different point of views were raised among the community under research. I also insured that everything said during the interviews by the respondents was recorded

and everything including the general surrounding that may affect the interviews and even the reactions of the respondents were recorded in the field notes. The recording of data allowed me to revise and check again and again.

I also insured that every one of the respondents knew that It is voluntary to be part of the study and this will be discuss next with other ethical issues that I encountered during the study.

4.8.   Ethical considerations

Ethical issues related to social research are very important and need to be discussed. Since the research involved a sensitive issue, I gave serious thoughts to a number of special ethical concerns.

When investigating a very sensitive topic with people in a very sensitive context (an IDP camp) particular ethical problems may arise during the interviews. An informed consent process is the ethical foundation for any research involving human participants (Bryman, 2004). It involves the researcher informing potential participants of the purposes and procedures of the research to ensure that participants are fully informed about a study before they agree to participate. In addition, the researcher is ethically obligated to fully inform participants so that they can make a decision whether to participate based on a complete understanding of the risks and benefits of participation associated with the study. This is what Bryman (2004:511) discusses when he notes that "informed consent entails the implication that, even when people know they are being asked to participate in research they should have full knowledge of all the research process". In addition participants should know how the data that is provided by them will be protected and stored. As such all the respondents were informed about the objectives of the study and the purpose of the interviews in advance. They were also informed that their participation was voluntary and they were also assured confidentiality. Participants were never asked to disclose their names.

Also, there is a situation in which some community authority must approve the research before any individual community member is asked to participate. In some communities an individual would be put at risk of community sanction if he or she agreed to participate in a research project without the formal approval by community authorities. This may pose a problem and might even lead to the researcher being denied access to members of the communities if such regulations are not followed. Thus permission to carry out the study was obtained from the Humanitarian Aid Commission (HAC) in Sudan and from the High Committees in the IDP camp investigated. Heads of institutions; the headmaster of the IDPs school, the head of the literacy center and the head of the organization that was responsible for the health center in the camp, also gave me permission to conduct the study in respective institutions, and more importantly the individuals themselves gave their permission.

4.9.   Study challenges

The research work faced many obstacles both during preparation for and conduction of the study. For example, the long process and difficulty encountered for getting permissions to access the setting (IDP camp). The first permission I received came from the HAC. It took 38 days to get the final acceptance to do research. One month was spent at the HAC main office in Khartoum, five days in the HAC office in Nayala the capital of South Darfur state and three days in HAC sub-office in a place where the target groups were eventually interviewed.

The other permission to access the IDP camp was obtained from the Camp High Committee. Tearfund organization facilitated the whole process of fieldwork by introducing me to the head of the high committee who promised to inform the other members of the committee and sub committees about my work in the camp. Lack of communication between the high committee and sub-committees inside the IDP camp almost brought my work to a stall; as they claimed they did not know about my work in the camp. This required conduction of a meeting to clarify things, and until the meeting was held, I had to stop working. The decisions that were made by the health committee

during the meeting led to deleting of some questions which were considered too political. An example of a question that was deleted for fear of bringing trouble with the government was, "What are the reasons of displacement?" The use of a voice recorder during interviews was a risk, so I avoided tape-recording the interviews. Also there were a lot of warnings from the committee of talking to the organizations or the government in this stage of data collection, because, as they mentioned, such things happened before and they heard wrong information about the situations in the camp in the international media. At this point, I started to realize just how sensitive the work was and how complicated the setting for my field work was. I was obliged to be careful and follow their instructions in order to insure their cooperation.

I also faced indifference from some of the teachers and health committee members at the beginning of my work. They suspected that I was sent by the government to collect data about the camp. One of the committee members said, "Because you are student we will let you collect your data but, if this data is not for the research and used for other purposes, you will create a problem for the people here, and you should know, we came here to this place for the sake of our children."

5. Chapter 5: Theoretical framework

5.1. Introduction

The objective of this chapter is to present the theoretical framework upon which the current study is based. This chapter is composed of a major part that relates to the conceptual framework of the study, which includes eight interrelated parts revolving around the objective of the study.

HIV/AIDS is a complex and pressing issue worldwide. It is not just an issue of health, but also an issue of culture, gender and power relations. The purpose of this study is to examine the factors that increase girls' vulnerability to HIV/AIDS in the Darfur conflict. To try and address these three issues, namely culture, gender and power, in one chapter is quite a challenge; on the contrary it also makes sense, since they are related. I shall argue that the overarching culture of domination, which has prevailed in Sudan for thousands of years, provides the framework and cultural sanction for oppression and exploitation, and is characterized by an oppressive male/female relationship.

In the first part of this chapter I shall discuss the relationship between culture, attitudes to power, constructions of gender and gender relations and their impact and mutual influence on conflict and its conduct. In the second part of the chapter, I shall discuss the vulnerability theories which may relate to factors that increase HIV/ AIDS in Darfur.

5.2. The relationship between culture, gender and power

Culture is indeed quite hard to define but according to Berger and Luckmann (1966) culture is a process of social construction. Every part of this process appears to follow a logical progression. An act receives inter-subjective approval (objectivity) which is habitualized through role playing and is legitimized as a practice worthy of transmission to the next generation. Berger and Luckmann (1966) remind us that culture is a set of values, customs, and beliefs made by humans and are regarded as a fluid setoff practices.

"Sex" refers to the biological division between male and female, and "gender" to the parallel and socially unequal division between femininity and masculinity. Gender draws attention, therefore, to the socially constructed aspects of differences between women and men. But the term gender has since become extended to refer not only to individual identity and personality but also, at the symbolic level, to cultural ideals and stereotypes of masculinity and femininity (Scott and Marshall, 2009: 240).

Gender is not a synonym for sex. It refers to the widely shared expectations and norms within a society regarding appropriate male and female behavior, characteristics, and roles. It is a social and cultural construction that differentiates women from men and defines the ways in which women and men interact with each other (Gupta, 2000: 1), while sex refers to biological differences between women and men as mentioned above.

Given that gender is a culture-specific construction Gupta (2000:2) argues "that there are significant differences in what women and men can or cannot do in one culture" as compared to another. Nevertheless, "what is fairly consistent across cultures is that there is always a distinct difference between women's and men's roles, access to productive resources, and decision-making authority" (Gupta, 2000:2). Typically, men are seen as being responsible for the productive activities outside the home while women are expected to be responsible for reproductive and productive activities within the home. Thus gender differences also have something to do with power in a given society.

5.3.   Power

Power refers to someone's ability to get others to do his/her will, regardless of whether or not they want to. "Power means to command order, enforce coercive or hard power on the others, to induce cooperation, to legitimize to inspire persuasive or soft power" (Maill at el., 2001:10). Power given to individuals willingly by others, is called authority, while force or the threat of force, is called coercion. Hard power has always been important in violent conflict; Kenneth (1989) calls the former threat power "Do what I want or I will do what you don't want" (Mail, et al, 2001:10).

Gender theorists have argued that power is gender – related in several distinctive forms. Firstly, (Squires, 1999:39) claimed that

> Men and women do not have the same access to resources associated with power, and that men have power over women. Secondly, it is held that men and women tend to understand power differently. Thirdly, it is maintained that power relation constitute gender identities themselves.

5.3.1. Sexuality

The realm of sexuality also has its own internal politics, inequities, and modes of oppression. As with other aspects of human behavior, the concrete institutional forms of sexuality at any given time and place are products of human activity. They are imbued with conflicts of interest and political maneuver, both deliberate and incidental. In that sense, sex is always political. But there are also historical periods in which sexuality is more sharply contested and more overtly politicized. In such periods, the domain of erotic life is, in effect, renegotiated (Rubin, 1998: 143).

The term sexuality refers to "the ways in which we experience and express ourselves as sexual beings, that is, in the awareness of being female/male, as well as in the capacity one has for erotic experiences and responses" (Rathus et al, 1997: 5). It seems very simple when we see definitions of sexuality such as this one, yet sexuality is far from simple. Giddens (1992) makes this apparent in indicating that sexuality is a significant feature of one's identity connecting the body, identity and norms of society. Sexuality on the other hand is defined by who the individual has sexual relations with, in what ways, why and under what circumstances. Power is central to the construction and expression of sexuality and also gender, affecting individual autonomy and sense of self, the experience of sex and the opportunities open to women and men.

Sexuality is a term that is often associated with sexual acts and biological rootedness. In many cases, biology has highly dominated how sexuality is viewed in aspects of sexual

practices, sexual acts among others. Despite this, it should be noted that without culture, human society would not have realized biological sexuality.

As regards relational sexuality, the content of sexuality is determined by human social relations: "The particular interrelations and activities which exist at any moment in a specific society create sexual and other categories which ultimately determine the broad range of modes of behavior available to individuals who are born within that society" (Padug, 1998:21). Hence, there are different ways of talking about sexuality or different ways of viewing sexuality some of which will be mentioned here.

5.3.2. Power from different perspectives

Different authors define power in different ways. Bourdieu (n.d cited in Lane, 2000: online)[2] suggests that power involves domination and/or differential distribution. Dominant groups always possess some form of power. Bourdieu (n.d in Lane, 2000 online) states that in modern societies there are two distinct systems of social hierarchization, "the first is economic; in which position and power are determined by money and property, the capital one commands. The second system is cultural or symbolic. In this one's status is determined by how much cultural or symbolic capital one possesses."

The key terms in Bourdieu's sociological thought are social field, capital, and habitus. He sees capital simply as a form of power which "entails the capacity to exercise control over one's own future and that of others" (Bourdieu's, n.d:254). Further Bourdieu (2002, online) argues that "individuals, institutions, and other agents try to distinguish themselves from others, and acquire capital which is useful or valuable" Subsequently, according to Bourdieu (2002, online) all human actions take place within social fields, which are arenas for the struggle of resources. Bourdieu (2002, on line) sees symbolic capital (e.g. prestige, honor, the right to be listened to) as crucial sources of power.

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[2] Some information I use is taken from online articles where there are no page numbers thus I use the word online to show this.

Butler (1997: 2) argues that "people are used to thinking of power as what presses on the subject from the outside, as what subordinates set underneath and relegates to a lower order". Of course, this is what power does. Butler (1997) is concentrating on the process of how the self is shaped, she is looking more on the inter-relationship with me (I) and myself (the self) leading up to social action. But if following Foucault, "we understand power as forming a subject as well as providing the very condition of its existence and the trajectory of its desire" (Butler,1997: 2). Then according to Butler (1997)

> Power is not simply what we oppose but also, in strong sense, what we depend on for our existence and what we harbor and preserve in the being that we are. Power imposes itself on us, and, weakened by it force, we come to internalize or accept its terms. What such as account fails to note, however, is that the "we" who accept such terms for "our" existence (Butler 1997:2).

Foucault proposes that "power is everywhere" (Segal, 2002:210). To understand how power works, it is important to understand discourse. (Segal, 2002) states that we must locate ourselves in the position from which the discourse makes most sense, and thus become its 'subjects' by 'subjecting' ourselves to its meanings, power and regulation.

The model of power in Althussers "account attributes per formative power to the authoritative voice, the voice of sanction, and hence to nation of language figured as speech" (Butler 1997:6).

Moreover Gidden (2006:117) states that "the discourse is a way of talking and thinking about a particular subject that is united by common assumptions" and as such the way we speak about power can also have an effect.

Discourse and power limit an individual's choices in relation to sex, e.g. social practices, a woman's submission to man. People submit to sex because they are not conscious of the internal power that they have, but they look to the external power. Thus I agree that power is fundamental to both sexuality and gender. The unequal power balance in gender relations that favors men translates into an unequal power balance in heterosexual interactions, in which men have greater control than women over when, where, and how

sex takes place. Thus power is not merely physical force, but it works through language in discourse (manipulation of text and talk).

In the following section I will discuss and analyze discourses of gender, as these are central in shaping our interpretations of HIV&AIDS. Our conceptions of gender have been constructed through discourses which I will focus on next.

5.4. Gender and violence

"We pay for being born a girl" Ntozake Shange (1979:28).

Sexual harassment, female genital mutilation, rape and murder; all these forms illustrate that the violence against women and girls cannot be considered as a problem of individual men, but it must be analyzed as a system in which men control and dominate women. The central pillar to this system is the way in which violence and victimization are entwined with traditional notions of masculinity and femininity (Ballet and McDanil, 2002:287), women are thus regarded as victims accordingly.

Rape is part of the pattern of war behaviors as Francis (2004:5) states "a horrible emblem of domination and the brutalization of human beings. The wholesale rape of women and girls because they are seen as belonging to a particular group is not uncommon, signifying male/female domination". Ballet and McDanil (2002:303) explain the victimization and suffering of women in war by saying "men who have committed acts of violence against females must be understood in the context of attitudes about women."

On the other hand Beauvoir who developed the framework of sex/gender distinction claims that "one is not born, one becomes a woman" (Butler, 2003:61). She stresses the role of tradition and culture in conditioning women to adopt inferior roles: "A woman, she argues, is not natural, she is a product elaborated by civilization" (1999: 55).

Beauvoir argues that "man defines a woman not in herself but as relative to him … he is the subject, he is the Absolute – she is the other" (Alcoff and mendietea 2003:150). Otherness argues that it is fundamental category of human thought: "no group ever sets itself up as the one without at once setting up the other over against itself" (Alcoff and mendietea 2003:150). A woman is defined not by biology, or not even by material structures based on this biology, but by otherness to men.

5.4.1. Women and rape

Women are seen as victims of domination and violence, but only at the hands of other nationalities. A woman who has been raped is considered as contemptible and signals defeat for the man who falls short in his responsibility as protector. Raping the others' women is a breach of territorial integrity, a sign for war, a means of establishing power, authority and takeover (Mostov, n.d:3). Rape at once pollutes and occupies the territory of the nation, transgresses its boundaries, defeats its protectors, degrading the nation's symbol of fertility and purity, it physically blocks its continuity and threatens its existence. It, thus, promises to "cleanse" the territory whose borders spread through the "birth of an enemy son" (Mostov, 2009 in Ballet and McDanil, 2002: 329).

The most significant motivation behind female rape is humiliating their men. Men would not return to the place where their women were raped and humiliated (Mostov, 2009 in Ballet and McDanil, 2002) and continue saying that "the terrain of women's bodies is seen as a battlefield over which the identities of the other can be destroyed" (Mostov, 2009 in McDanil 2002:329). Furthermore, Pettman (1996: 49) states that "men who cannot defend their women/nation against rape have lost their 'claim' to that body and that land. Hence, 'rape' becomes a metaphor of national or state humiliation".

Given the traditional notion recuperated in warrior mythology which views the male as the bearer of the generic mechanism of the nation and the female as property and a vessel in which sons and daughters of the nation grow, men become owners of the territory/womb as well as owners of the children women carry (Mostov, 2009 in Ballet

and McDanil 2002). This is could be expressed in the words that you have an enemy child in your womb. One day my child will kill you.

5.5.   Gender and HIV/AIDS

It has been stressed that HIV/AIDS is a highly gendered pandemic which affects girls and women disproportionately, making gender issues an area which demands further attention (Rivers and Aggleton, 1999; Boler *et al*., 2003; UNAIDS). A report of the Expert Group Meeting (UN, 2000:8) states that "in many countries, women and girls are bearing a heavier burden than men in terms of the rate of HIV infection, the stigmatization that results from their being blamed for HIV/AIDS, and the burden of family support and care". Women find themselves also at special risk of HIV infection because of gender inequality and domination of men. What are often overlooked at are gender inequalities in socio-economic status, and cultural ideology around sexual practices such as abstinence, monogamy and condom use. Thus women in general can find themselves vulnerable to HIV/AIDS because they lack the power to determine where, when and how sex takes place (UNAIDS, 2000).

5.6.   Conflict theory

The main points that the social conflict theory discusses are that "society is a system of accommodations among competing interest groups. Social systems are unstable and are likely to change rapidly. Social life involves conflict because of differing goals" (Tischler, 2002:21).

According to Tischler conflict theory sees "society as constantly changing in response to social inequality and social conflict" (2002:20). He continues to say that "the conflict theorists are concerned with issue of who benefits from particular social arrangements and how those in power maintain their positions and continue to reap the benefits from this power (2002:20). In addition, competition over scarce resources is at the heart of all social relationships. Competition rather than consensus is characteristic of human

relationships. Inequalities in power and reward are built into all social structures (Brinkerhoff, et al, 2008). Brinkerhoff continue arguing that "individuals and groups that benefit from any particular structure strive to see it maintained. Change occurs as a result of conflict between competing interests rather than through adaptation" (Brinkerhoff, et al, 2008:13). In the next section I will discuss the theories of vulnerabilities.

5.7. Theory of vulnerability

HIV is a biological entity that is responsive to medical interventions, but the epidemic has continued to expand largely due to the failure to tackle societal conditions that increase HIV risk and vulnerability (UNAIDS, 2008).

Before the 1980s, the study of risks and disasters was mainly focused on the description and types of hazard and the impact of disasters. The natural factors (geophysical, hydro meteorological or biological) are the root causes for the natural disasters. Historically, social sciences for studying disasters were first introduced by Samuel Prince in the year 1920. Following World War II, disaster studies examined the psychological reaction of disasters and for more than 60 years those studies concentrated on studying disaster more than risk. The move towards the study of pre- disasters is now widely acknowledged and understood through the concept of vulnerability (Nathan, 2005).

Vulnerability is derived from the Latin word 'vulnerare' (to be wounded) and describes the potential to be harmed physically and/or emotionally. Some languages do not have a word for "vulnerability", so the concept sometimes becomes difficult to explain without looking and understanding the cultural context (Weichser, 2001). Many vulnerability situations are impermanent and tend to change as life stages do (childhood, teenage, old age) or with changes in career (Balikie, et al, 2004).

While the broad definition of vulnerability infers to the possibility of loss, it never indicates what type of loss and who losses what, but generally there is personal or individual potential for loss or social vulnerability which includes the sensitivity of a social group or society to a potential loss from hazard and disaster .

Due to the increase of disasters in the last 50 years, vulnerability becomes more well-known in areas of global change, environment and development studies. Many discrepancies in the meaning of vulnerability comes from different "epistemological orientation (political, human ecology, physical science) or following subsequence methodological practice. Cutter (1996) also arguing that it meaning depends also on the hazard itself (famine, flood, drought) and on the region chosen (development, developing countries). Fundamental concept differences exist as well on the visions, i.e., the research's focus on risk or scientific social research or both (Cutter, 1996).

Due to these differences, there are three main views on vulnerability; the identification of environment that makes persons or places vulnerable to natural events, an assumption that vulnerability is a social state; a measure of societal resistance or resilience to hazards and the "integration of potential exposures and societal resilience with a specific focus on particular places or regions" (Cutter, 1996:243).

Cannon and Balikie (2004) belong to the social vulnerability approach, which deals with stressors, shocks and natural hazards. This approach is trying to understand the social conditions that transform a natural hazard (e.g. flood, earthquake, mass movements etc.) into a social disaster (Gary, 2006).

Cannon defines vulnerability as a condition of people that derives from their political-economic position (Cannon, 2000). Cannon arguing that "vulnerability can be considered in terms of five components: Initial well-being, self-protection, Social protection, livelihood resilience and Social capital" (Cannon, 2000:8).

Blaikie et al. (2004:11) define vulnerability as "characteristics of a person or a group and their situation that influence their capacity to anticipate, cope with, resist and recovery from the impact of a natural hazard, an extreme natural event or process" (Blaikie et al, 2004:11). This definition of vulnerability involves a mixture of factors that determine the degree to which some one's life, livelihood, belongings and assets are at danger by a disaster, this definition of vulnerability has also a time dimension. Blaikie et al (2004:12) states that "vulnerability can be measured in terms of damage to future livelihoods and not just as what happens to life and property at the time of the hazard event". Cannon and

Blaikie (2004) define vulnerable groups as those who are facing difficulties to rebuild their livelihood after disaster which makes them more vulnerable to hazard, and the word "livelihood" is important in their definition of vulnerability. By this, they mean "the command an individual, family or other social group has over an income and/or bundles of resources that can be used or exchanged to satisfy their needs" (Blaikie et al., 2004:9). This can involve information, skills, legal rights as well as equipments, land or other physical resources.

(Blaikie et al.2004) argue that most vulnerable people experience a hazard and suffer shortage of food, damage in their social services or lack in entailment in a way that some time recovery, rehabilitation and coping will be difficult without an external or internal intervention.

Thus in order to understand risk hazard in terms of vulnerability Cannon and Blaikie (2004) developed two models. The Pressure and Release Model (PAR): a simple tool which understands disaster causes by explaining how the social system operates to create disasters by making people vulnerable, and the Access Model which uses more factors and goes in more detail to explain how a condition needs to be changed in order to reduce vulnerability. In the next two sections I will discuss these modules in more details.

5.7.1. The Pressure and Release Model (PAR)

This model is analyzing human vulnerability and exposure to physical hazard by addressing the factor and the impacts of natural event on people and their responses. The Pressure and Release Model shows the underlying factors which give rise to the dynamic pressures that create a disaster. The basis for the PAR idea is that a "disaster is the intersection of two opposing forces; those processes generating vulnerability on one side, and the natural hazard event (or sometimes a slowly unfolding natural process) on the other" (Blaikie, et al., 2004:50). Vulnerability and hazard were interacting together and generating risk.

According to Blaikie, et al (2004), this model is as a result of a transfer process from some root causes into unsafe conditions through dynamic pressures within the framework

of models of development. Root causes reflect the implementation and sharing of power in a society which affect the distribution of resources among different groups of people. They are a function of economic, social, and political structures, and also legal definitions and enforcement of rights, gender relations and other elements of the ideological order. The most important root causes (and which reproduce vulnerability over time) are economic, demographic and political processes.

Moreover, Blaikie and Brookfield (1987) state that the root causes are also connected with the function (or dysfunction) of the state, and ultimately the nature of the control exercised by the police and military, and with good governance, the rule of law and the capabilities of the administration. Current wars will appear as a 'dynamic pressure'. For examples in Sudan where long drawn-out war and famine have coincided, often exacerbated by an extreme natural event such as drought, has undermined the ability of the central or local governments to prevent or mitigate hazard as events. These events can also erode the trust between government and citizens that is required for prevention and mitigation to be effective. Root causes reflect also the exercise and distribution of power in a society. People who are economically marginalized tend also to be of marginal importance to those who hold economic and political power.

The release idea refers to the possibility of risk reduction to address not only unsafe conditions but also dynamic pressures and root causes. For example, dynamic pressures are those which determine the basic health and nutritional status of a population, as well as its access to education and job opportunities. The increase of poverty, inequality and the environmental degradation can increase the vulnerability of social conditions and livelihoods leading to risk, because of low income, limited access to resources and weak local institutions. All these contribute to creating unsafe conditions in terms of weak physical environment in which natural hazards can cause disasters (Blaikie, 1994).

The great value of this framework is that it recognizes the root cause factors. It also explains vulnerability as a process that develops through time

Although PAR is organizing framework for outlining a hierarchy of causal factors that together make up the precondition for a disaster, the model does not indicate the link

between surrounding and society 'pressure point' and the background of disaster, for example where and when the disaster starts (Blaikie et al., 2004).

5.7.2. The Access model

The Access Model explores the "barriers and channels" that affect the family's access to key assets and resources through the time which can result in the increase or shortage of goods and services. Access involves the capacity of a person, family, group, or community to make use of resources which are directly needed to be used in securing livelihood before the time of disaster, and their ability to settle in the new situations (Blaikie et al., 2004). The access model is a more magnified analysis of how vulnerability is originally generated by economic, social and political processes in time of disaster.

According to (Blaikie et al., 2004) in this model, assets are classified into several types:

1. **Human assets**: indicate number of workers available and their ability to do the work; number of family members and their skills and education.
2. **Productive family assets**: House, land, tools, animals, domestic utensils.
3. **Community productive assets**: Access to community assets like land and water.
4. **Reserves**: like saving money, storing food or other items.

Access to such assets is always based on social and economic relations, including the social relations of (for example, production, gender, ethnicity) economy (e.g. precise, deterministic).

Nathan (2005.online) defines the model as "the ability to use resources which are directly required to secure a livelihood". So there are many factors that influence the level of the vulnerability of a family or a household towards a determined hazard like inability to change raw resources into assets and dependence on one source of income. The model emphasizes the existence of different levels of family vulnerability inside the same community, even through the same hazard. For example, in case of earthquakes, the

indicator of vulnerability will concern housing materials, income level and available spare time and skill, but in case of drought the concern will be food and market price (Blaikie, 1994).

The model shows families without assets, available resources or reserves and with little access to community productive assets or redistributive processes have little ability or capacity to manage the impact of a threat and recovery from it although the model helps us integrate between natural and hazard impacts. Haghebaert (2001; 2002) has made some criticisms against the model:

1. The model is focusing more on addressing general livelihood processes than looking at specific disaster related processes.

2. Non-tangible assets such as creativity, experience are not accounted for.

3. The framework does not integrate between political and socio-economic processes.

As we can understand from the model, access to resources is essential to maintain livelihoods and that less access means an increased vulnerability. Although the model takes into account some social structures, it is too economically-driven to understand all the determinants of risks and vulnerability at household level (Nathan, 2005).

5.8. Perception of vulnerability

There is a general consensus within the social science community on some of the major factors that influence social vulnerability, these include: not having access to resources, limited access to political authority and representation, social capital and type, and density of infrastructure and lifelines (Cutter, 2001).

> Although both Hewitt and Blaikie agreed on the statements that the key differentiating factors are found in the conditions of "exclusion and structural" social and economic difficulty for the mass populations in both urban and rural settings. This creates the human conditions of weakness,

lack of protection and of resilience, these conditions involve vulnerability which leads to disasters much more than normal environmental events (Blaikie, 1994 in Narváez, 2003:9)

Vulnerability, for Cutter et al, 1996: 243)"is most often described by using the individual characteristics of people (age, race, health, income, type of dwelling unit, employment)". Blaiki focuses on the social, economic and political processes that make people vulnerable and which are mostly ignored in after-disaster cost/loss estimation reports due to the difficulty in quantifying them (Cutter, 2001). These social factors create the conditions that affect the ability of communities or countries to respond to the damaging effects after disaster. Also these situations can lead the disaster event to contribute to this situation to exist even after disaster (Blaikie, 1994). For (Cuny,1983 in Heijmans,2001:2) "reducing the vulnerability of the poor is a development question and such a question must be answered politically".

(Hewitt ,1997 in Narváez, 2003:9)"explains that the exposure to dangerous environments is the basis of all disasters", and there are several forms in which vulnerability arises:

1. Weaknesses: of persons, buildings, assets, communities or activities to greater harm.
2. Lack of Protection: against dangerous agents and for weaker persons and items.
3. Disadvantage: lack of the resources and attributes to influence risks or react to danger
4. Lack of resilience: limited or no capability to avoid, resist and recover from disaster.
5. Powerlessness: inability to influence safety conditions, or acquire means of protection and relief.

Hewit (1997) identifies "vulnerability as a long term process," arguing that vulnerable people suffer from the impacts of disaster because they are not capable to guarantee safety conditions for themselves.

5.8.1. Vulnerability and entitlement approach

Since the 1980s, academic literature on the explanation of disasters has shifted from giving recognition to natural events towards an emphasis on social and economic

processes. This shift involved in many cases, reducing vulnerability which is about dealing with the "awkward" issue of poverty in society which is a part of the development process itself (the improvement of peoples' livelihoods, welfare and opportunities).

Entitlements have been defined by Sen (1998:497) as "the set of alternative commodity bundles that a person can command in a society using the totality of rights and opportunities that he or she faces". This definition is built on three basic theoretical categories, namely; endowment set, entitlement-mapping (or E-mapping, for short) and entitlement set. "The entitlement set is defined as the set of all possible combinations of goods and services that a person can legally obtain by using the resources of his endowment set and entitlements set contends resources may be used in many different ways to obtain the final goods and services" (Osmani, 1993:3).

In Sen (1998) vulnerability is defined as a shortage of access to assets, including intangible ones and social capital. However, access to assets is not a guarantee that those assets will be used in an effective way to reduce vulnerability.

Osmani (1993) defines Entitlement approach as the production and distribution system in a community which influences the political, social, legal and administrative system existing in that community. This system includes assets to rights or access to resources, system of market or market arrangements or an influence over authority that has the power to create market arrangements. This system sometimes is created by people who own more (have more access to resources) and is a detriment to those who have less leaving them vulnerable (Osmani, 1993).

This vulnerability will also undermine the entitlement approach itself, for example, those who have more will always predate over those who have less without discriminating, losing his ownership bundle. Examples of these cases are unfair labor wage practices, trade monopolies, influence peddling to gain exemptions from fair regulations, land usurpation (Bagadiong ,2009:online), Bagadiong continues to say postulates in his "concept of entitlement theory an approach that provides more a comprehensive account of a person's ability to command commodities in general and food in particular within the

ambit of the political, administrative, legal and social factors or structures in effect around him" (Bagadiong ,2009:online).

The entitlement approach also effectively challenges the common thinking that poverty can be solved exclusively by economics as usually preferred in economics-as-the-bottom-line approach. It enlarges the issue of poverty, not only restricted to the economic market, the law of supply and demand, level of income but it also now encompasses, or at least encourages the involvement of political and social economy.

Vulnerability theory suggests that adverse life circumstances such as hunger and disease do not affect social groups uniformly. For example, while all humans are biologically susceptible to HIV infection, certain social and economic factors place some individuals and social groups in situations of increased vulnerability (Parker, 1996). Economic needs may drive vulnerable groups to risky survival activities such as commercial sex that make them 'a population at risk, (In fact behavioral intervention based on solely information and reasoned persuasions are insufficient to produce risk – reducing behavior change among vulnerable social groups (Parker, 1996). The geographical distribution of such vulnerable populations and their social interaction patterns may suggest the geography of HIV /AIDS infections. AIDS as a global problem has unequal local expressions that reflect the spatial distribution and social networks of vulnerable social groups. Consequentially, unraveling the factors responsible for vulnerability to HIV/AIDS for different social groups is crucial if prevention and control programs are to be effective.

5.9.   Women and girls' Vulnerability to HIV/AIDS

In many societies there is a silence that relates to sex. It dictates that "good" women are meant to be ignorant about sex and passive in sexual interactions. This makes it difficult for women to acquire knowledge about the risk. The traditional norm of virginity for unmarried girls which prevails in many societies, paradoxically, increases young women's risk of infection because it seriously limits their ability to ask for information about sex out of fear that they will be thought to be sexually active (Gupta, 2000).

Moreover, women's economic reliance on men could gravely compromise their ability to negotiate protection and leave risky relationships.

"Gender norms of masculinity-on the other hand- encourage men to seek multiple partners and participate in risk-related sexual activity"(Gupta, 2000:6). In addition, deep seated historical and cultural processes result in some forms of sexuality being more highly valued and accepted than others.

Although physiology affects women's greater risk of transmission, it is women's and girls' relative lack of power over their bodies and sexual lives, supported and reinforced by their social and economic inequality, that renders them vulnerable to contracting HIV and coping with HIV/AIDS. Some cultural and religious practices, sex-trafficking and poverty among other factors increase young women's special vulnerability to infection.

5.10.   Conclusion

Vulnerability is an essential part of hazards and risk and refers to the vulnerable people, communities and not just buildings or economic aspects. For example, in Sudan socio-economic and political situations, the environmental problems resulting from the climatic change play a great role in Darfur conflict and in turn make people more vulnerable to disaster. Vulnerability to disasters is a matter of perception; in most aid agencies' perceptions, the view of local people is missing. Most agencies tend to think on behalf of the victims, not realizing that disaster-prone communities might take and understand their circumstances differently (Heijmans, 2001). In the structure of social development, the entitlement approach postulated by Sen (1998) plays a big role in the analysis and conceptualization of development and vulnerability reduction both as a state of well being and choice.

Now that the conceptual framework and other relevant concerns related to initiating and completing this study have been addressed, the chapter that follows is about the data presentation, analysis, interpretation and discussion of the findings.

6. Chapter 6: Discussion and analysis of the findings

6.1. Introduction

The purpose of this chapter is to present and analyze the interviews and observation data that I obtained during the field-work in Darfur in order to answer the following research questions:

What are the conditions that contribute to the spread of HIV/AIDS among IDPs girls in the Darfur conflict?

A. What are the factors influencing girls vulnerability to HIV?
B. What experiences did girls go through during the conflict?

While conducting the research on HIV/ AIDS in Darfur, there were guiding topics formulated to address different issues involving HIV/AIDS spread. The issues included: knowledge, attitudes and behavior, conflict and experiences of the girls, and finally intervention.

Each section in this chapter addresses many issues in depth and can be looked at separately:

1. **Knowledge**: Here, the goal was in finding out about the nature of the disease and the modes of transmission. It explains the ways of preventing the disease and the relationship between STIs' and HIV's. Here I try to give a general view of education on HIV/AIDS.

2. **Attitudes and Behavior**: This section talks about the stigma, the feeling and attitudes people have towards people living with HIV/ AIDS. It also presents the perceptions and behavior the community has towards the prevention of HIV infection and detailing the factors facilitating/ contributing to the engagement in unprotected sex.

3. **Conflict and Experiences of the Girls**: In this section, the research explains the precipitation of risk and the factors that increase the vulnerability of girls.

4. **Interventions**: Here, the section discusses how important the information received about HIV/ AIDS is to change the situation.

A total of 28 semi-structured interviews were conducted with IDP girls in-school, out-of-school and in a literacy center and 4 interviews were conducted with other key informants: the head of health committee in the camp, the headmaster of one the IDP schools, a health promoter working on HIV/AIDS and the lab technician in the hospital. I will now focus on the issues that came out of the data analysis.

6.2.   Knowledge about HIV/AIDS

Most of the participants mentioned that they have very little knowledge about HIV/AIDS in other words; they heard about HIV/AIDS but they don't have much information about it.

> *I have no idea about it. I just heard of it- I met some girls at the market and when one of them left they said that she was infected with AIDS, the girl was very thin* **RESP** 27 (6/11/2008):.

For this girl, AIDS is something she has only heard about in passing. For her also, AIDS might be linked to the way someone looks, healthy or unhealthy (thin). A different respondent had some knowledge about what not to do.

> *We were told not to pick up razors, needles, or scissors thrown along the street to avoid diseases* **RESP** 1 (12/10/2008).

For this girl, however, information about AIDS is lumped together with protecting herself from diseases in general. The apparently low prevalence of HIV/AIDS contributes to the perception that HIV/AIDS is not a threat to the people in the camp, as one of the respondent mentioned.

> *No, I don't think they will be infected with AIDS because there is no one affected and AIDS is a contagious disease as you know,* **RESP** 10(20/10/2008).

Many of the respondents reported that they are not at risk since they are not having sex with boys.

> *This could not happen to me; if you behave yourself nothing will come to you* **RESP** 4 (14/10/2008).

Awareness of the existence of HIV/AIDS (although hearing about the existence of disease does not mean having comprehensive knowledge about it) was high amongst all respondents. This showed that the people who had heard about HIV/AIDS are on an increase which could be attributed to the increase of information about HIV/ AIDS. As a result, more people will be aware or have more knowledge about HIV/ AIDs and be able to prevent the risk of being affected.

Another factor that should be taken into consideration is the level of literacy among target groups; the age range of the participants in this study was 15 – 17, most of whom were primary school students.

In concentrated epidemic settings, the significance of risk increases in HIV prevalence due to conflict being low. A few evaluations have been carried out on HIV vulnerability in mid/low prevalence settings such as Sri Lanka, Nepal and Colombia, a significant presence of risk factors was highlighted: low condom use, low coverage of HIV interventions especially in commercial sex settings, high internal and external mobility and very low levels of HIV/AIDS awareness particularly among IDPs in these North-Eastern conflict-affected countries (Health policy research associates, 2006). These examples are very much related to the situation in Darfur where the risk factors of HIV

contraction are high; with low or no use of condom, high illiteracy rate and low coverage of HIV interventions and low levels of awareness.

The data reveals that there are married girls among the respondents most of whom are of 16 – 17 years of age. In some parts of Sudan, arranged marriages for very young girls are still fashionable. Such girls have no way to reject the imposed spouse. A daughter is simply ordered to marry a man the parents or other elders choose for her. This usually affects their rights to discuss their sex life and be able to protect themselves against HIV/ AIDS. This can be proved from the statements of one of the respondents in the interview as seen below:

> *My father and uncle held a meeting with us the three girls and advised us not to admire the outsiders because they might be infected with AIDS. They warned us because our niece in Khartoum got married to a man who had lived and worked in Saudi Arabia and was infected with this disease. After she married this man, she got infected and died soon after marriage. Because of what happened to our niece, I was married off to my cousin whom I do not know and did not like,* **RESP 9** (19/10/2008).

The married girls received more information in Tearfund mothers' clubs[3] about HIV/AIDS than the unmarried girls of the same age who received information in Tear fund children's clubs. The married women also got additional information in the heath centers. This affects the unmarried girls who don't get sufficient information about HIV/ AIDS and puts them at risk of being infected since they don't have all the required knowledge about the disease.

Among those who know some information about HIV/AIDS half of the participants knew that HIV/AIDS could be transmitted through the sharing of sharp objects (blood contaminated objects such as razors and needles) with an infected person. The married

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[3] This is a health club where the Tear fund organization introduces health messages for women while small children attend children clubs

girls indicated that the traditional midwife could transmit the infection by using contaminated objects such as those mentioned by respondent below:

> Yes, *may be by practicing illegal sex with men, circumcision or delivery without sterilization of scissors or been injected two or three persons with one needle without even the sterilization of these tools which is ignorance from people since the needle costs only 500 piaster which is very little, RE* **SP 3**:(14/10/2008).

In most rural areas, villages have some elderly women experienced in birth matters who act as midwives; however these traditional midwives don't have necessary equipment like gloves and disinfectants for safe and successful child delivery. This exposes the mother, the child and the midwife to the risk of contacting and spreading HIV.

Other of the female respondents reported sexual intercourse as a way that the disease can be transmitted. None of the participants mentioned mother-to-child transmission during pregnancy, or breastfeeding as a way of transmitting the infection and very few participants knew about transmission by blood transfusion.

Some others mentioned traditional practices like Female Genital Mutilation (FGM) as possible ways for HIV transmission. Though most of the participants said that FGM no longer exists and is abandoned by the government, they still practice it secretly. FGM is considered a very important cultural practice as mentioned by one of the participants.

> *Yes girls are circumcised secretly, because the girls themselves ask for that."* *Though it is prohibited, female circumcision is one of the important cultural practices here. The fur tribe argues for example, that: "we will not eat the food cooked by the one who is not circumcised,* **RESP14** (22/10/2008).

FGM is a common cultural practice in Darfur. The government's step to discourage such harmful cultural practices that increase girls' vulnerability to HIV/ AIDS has pushed many people, who still believe in its practice, to carry it out informally and in unsafe

settings (in hiding/ secrecy). Although FGM is practiced by women themselves in Darfur - as the case in other regions of Sudan- still the FGM practice in Darfur cannot be fully blamed on women; it could easily seen the rationale behind it that it is something out of their hands and something they have to follow as required in their culture. Such culture is rooted from power imposed on them. Power is central to the construction and expression of gender and sexuality, affecting individual autonomy and sense of self, the experience of sex and the opportunities open.

Beauvoir who developed the framework of sex/gender distinction stresses the role of tradition and culture in conditioning women to adopt inferior roles: "A woman, she argues, is not natural, she is a product elaborated by civilization" (Beauvoir, 1999:55). Thus we can argue that FGM can be seen as imposed on women through their cultural conditioning.

FGM eradication advocacy raises issues of international human rights law, but as it is an embedded cultural norm, issues of stigma and discrimination have to be addressed to make elimination acceptable.

6.3. Common misconceptions about HIV/AIDS and methods of prevention

Misconceptions about HIV/AIDS exist throughout the world. These misconceptions are extremely dangerous because those who believe in them remain uninformed about actual prevention methods. The misconceptions related to HIV/ AIDS among the respondents is that AIDS can be transmitted by washing or wearing the infected person's clothes or sleeping in his or her bed. Despite a high level of awareness about the existence of HIV/AIDS, the presence of widespread misconceptions can allow us to conclude that the efforts exerted to provide information about the disease didn't contain messages especially designed to fight misconceptions. Participants responses towards their knowledge about HIV/ AIDS clearly indicated that most of the information they received about HIV/AIDS is limited, which may increase the level of misconceptions and adds possibilities for the development of new misconceptions. One of the examples mentioned:

No I don't even know how an infected person looks like, but I saw in a picture one who was very thin and his color got black and they said if the infected person died, he should be burned, is that right? **RESP 14**(22/10/2008)

Sexuality also has its own internal politics, inequities, and modes of oppression and can be defined as "the ways in which we experience and express ourselves as sexual beings that is in the awareness of being female/ male as well as in the capacity one has for erotic experiences and responses" (Rathus et al., 1997). It also involves who an individual has sexual relationships with, in what ways, why and under what circumstances which is contradictory to what actually happens in Darfur. The discussion of sex publically is completely a taboo in Darfur, which leaves no chance for the people to know how to take charge of their lives sexually. For example, being unaware of sexually transmitted diseases like HIV/ AIDS, syphilis, gonorrhea etc, how they are transmitted and how they can be controlled or prevented and hence the high level of misconceptions can be problematic in terms of people's ability to have power over their lives in terms of their sexuality.

When the respondents were asked about how they think HIV/ AIDS can be prevented some of them gave great emphasis on protecting themselves from contaminated sharp instruments, while some mentioned that the girls should stop going out to the field to collect firewood or farming in order to avoid being attacked or raped by outlaws who may be infected. Some examples of this kind of thinking are:

If *the girls go to collect firewood they will be abducted. Then a girl will be raped and gets the disease and comes back to spread it among the community. Therefore, these girls should not be sent to collect firewood. - Only boys should be sent,* **RESP 14**(22/10/2008).

Among the data received adultery is one of the factors that is seen as increasing the vulnerability of the girls to HIV/AIDS and some respondents state that 'women should stop adultery'.

Researcher *Do you think there are factors that increase the vulnerability of HIV/AIDS in your area and what are they?*

Yes, The poor girls who chase money are likely to get infected, because they Commit adultery with men for the sake of money, **RESP 8** (16/10/2008).

It is difficult to gauge whether this response demonstrates a gender bias, suggesting that women are the ones who bring HIV. At the same time the statement may be an indication of levels of promiscuity among the girls in the IDP camp. In cases where women engage in sexual activities in exchange for money, the spread of HIV/ AIDS is likely to be high. In Darfur, women who give sex for money especially in the IDP camps do so because of vulnerability. The war in Darfur has left many people in a vulnerable situation, Blaikie et al (2004) argue that most vulnerable people experience a hazard and suffer shortage of food, damage in their social services or lack in entailment in a way that some time recovery, rehabilitation and coping will be difficult without an external or internal intervention. Therefore, women as a group mainly become vulnerable in times of war and may often find themselves at a high risk of HIV/AIDS infection if they are forced to exchange sex for money or food in order to survive.

6.4. HIV/AIDS as a significant health problem

When asked if HIV/AIDS is considered to be a problem or challenge for youth in their areas, most of my respondents answered no. Most of the participants mentioned that the challenges facing youth ranged from common diseases like malaria and diarrhea and that they caused high mortality rates in the camp. The denial of HIV/AIDS as a challenge in their areas was mostly based on the fact that they never knew a person in their area with HIV/AIDS.

Denial of HIV/AIDS is probably linked with the fear of being stigmatized as a result of being infected with HIV/AIDS. This prevents many people from disclosing their HIV status. Some of the respondents' said that they can't figure out someone with HIV/AIDS because all people look healthy. This lack of knowledge was related to widespread misconceptions, healthy looking person can't be a source for infection**.**

6.5. Stigma

HIV stigma is based on ignorance and fears about the transmission and control of HIV/AIDS. In places with low awareness rates and low prevalence rates, HIV/AIDS stigma can be just as bad as and sometimes worse than places where the community is more affected by HIV/AIDS.

HIV/AIDS stigma among IDP girls is characterized by misconceptions about person with HIV/AIDS (People Living with HIV/AIDS) and goes hand in hand with the reluctance to address issues of sexuality. Also silence and stigma that surround the disease allow fear and denial which prevent people from getting good information and education about HIV/AIDS and, in turn, people will not be aware of risky behavior.

> *Researcher: Are you able to see if someone is infected with HIV virus or if someone has AIDS?*
>
> *No, I cannot. Even if there is one, nobody will tell. If we know how they change in color, we will never sit near them or talk to them but we do not know the symptoms,* **RESP 25(3/11/2008)**.

Most of the respondents have a belief that change in one's color is one of the symptoms of having HIV/ AIDS but they are not sure whether the color gets dark or light.

The UN report of 2007 states that in Darfur, rape is widespread and used as weapon of war. The psychological, emotional and spiritual damage brought about by rape, as well as the stigma and discrimination faced by the victims from partners, family and the community, cannot be underestimated. Such stigma and exclusion can further marginalize women who have been victims of sexual Gender Base Violence (SGBV), and can result in destitution, leading potentially to transactional sex and HIV infections. UNFPA (2006:9) reported "ironically, and sadly, women and girls who experienced sexual violence during conflict are probably the most vulnerable of all to further

exploitation in post-conflict settings. Some rape victims may be rejected by their families and communities for having lost their value." In Burundi, women who had been raped told researchers in 2003 that "they had been mocked, humiliated and rejected by women relatives, classmates, friends and neighbors because of the abuse they had suffered." (UNFPA, 2006:9).

6.6. Sources of information about HIV/AIDS

Among the mass media, radio and television were not mentioned as sources of information about HIV/AIDS, because the majority of the informants have neither radio nor TV sets and the few numbers of participants who have radio don't often listen to them, as the respondent mentioned below.

> *No. I am not a frequent listener to the radio. - I watch TV some times but didn't encounter such a programe,* **RES 27(5/11/2008)**.
>
> *We have no TV and I did not hear about it in the radio,* **RES 5(15/10/2008)**.

Other sources such as campaigns organized by NGOs in the health centers and schools were mentioned.

> *We were told at school by health workers who came in the past days. Some of them visited us for one day; they told us about the disease and promised to come back but they didn't; and also heard about it from my mother and sisters who going tear fund clubs,* **RES 24 (2/11/2008)**

Most of the respondents cited health workers as most important source of information about HIV/AIDS.

> *Health promoters and Tearfund organization telling us about this disease,* **RESP 20 (28/10/2008)**.

Health workers from different NGOs working in the health centers and in health clubs have responded that they have been given HIV/AIDS training. However, there is no consolidated record of what training was provided and what the content was. Some of the trainings have been carried out by agencies that have good knowledge of HIV, but if we look at the information that is provided about HIV/AIDS, it is very limited and describes mainly the nature of disease but gives insufficient information on risky behaviors, modes of transmission and prevention and this appeared in the respondents answers, their answers are similar.

> *Yes, razors and scissors are caused AIDS; if infected person cut himself with razor his blood will contagious others,* **RERP 2(12 /10/2008)**.

There are a number of myths in the IDP camp about the way HIV is transmitted. Most HIV/AIDS awareness activities carried out have focused on transmission issues carefully avoiding direct statements about sex, for example, identifying the use of unsafe sharp equipment as a major threat is popular.

From my observation, all facilitators and health promoters were aware that sex is the key transmission route, but they were not aware of how to address it and when introducing the HIV messages, they avoid speaking about sex. The culture in Sudan does not have open dialogue on sex and sexual matters are often seen as taboo and something to be concealed from the youth. As a result, people lack accurate information about sex and sexually transmitted diseases. This puts them at a risk of contracting HIV/AIDS. Regarding sex and sexuality, the implication of HIV/AIDS is that, in some societies there is a culture of silence that surrounds sex and it is expected that good women be ignorant about sex and passive in sexual interactions. This makes it difficult for women to be informed about risk reduction or even when informed still makes it difficult for them to discuss safer sex.

Discussion between parents and their children about sexuality and HIV/AIDS is difficult in many societies. One girl indicated that they do not communicate with their parents about sex, and topics such as HIV/AIDS. .....

> *No, No, No, (Laughing shyly). We do not say such thing in their presence; it is not our tradition, our way to talk about this. You just don't. You keep it to yourself and this is how our culture works, **RESP8** (18/10/2008).*

In particular, the health promoters mentioned that video and visual stuff will be more useful if the information is discussed by people with HIV/AIDS or tell their stories. This will help people who are carrying out HIV/ AIDS awareness to clearly deliver their messages without suppressing the culture of the people. The symptoms, knowledge and prevention methods are clearly mentioned and this is a very effective way of making awareness to a bigger number of people.

6.7. Lack of awareness of STIS and its relation to HIV

Lack of awareness of STIS was one of the most important behavioral contributing factors of vulnerability. Despite the link between STIS and HIV transmission, respondents failed to establish this relation. Participants were not able to mention some of the common STIS in their areas like syphilis.

> **Researcher**: *what do you know about Sexually Transmitted Diseases STIs- such as gonorrhea and syphilis which are caused by sexual intercourse?*
>
> *No, what are they?* **RESP7 (16/10/2008)**
>
> *No we never heard about them, **RESP12 (21/10/2008)**.*

The majority of the respondents do not have knowledge about the STIs. People with STIs are considered a group vulnerable to HIV, because STIS increase the level of physical risk of transmission. All the participants interviewed mentioned that they have no idea about sexually transmitted infections and have never even heard about Syphilis though it's very common in the area. This high rate of syphilis was confirmed by RESP29 (6/11/2008) (the lab technician) arguing that:

Syphilis is common here. We find two or three cases in every ten people.

Sexually transmitted diseases such as syphilis are common and infections with it could increase the infectiousness of HIV-positive men and women and the susceptibility of HIV-negative individuals to HIV infection. These effects increase the probability of HIV transmission during unprotected heterosexual sex, independent of risk behavior.

6.8. Factors and conditions increasing vulnerability of girls to HIV

One of the most risky conditions mentioned that exposed girls to rape and abduction were going out side for farming. One of the informants reported as follows when asked:

Researcher: *What happens to the girls when they go out for farming?*

Some girls are abducted and raped. *In the eastern direction of the camp, I know some of the girls who got pregnant, after they had been raped on their way to the farm, one of them delivered a baby girl and now she sells things near the school. Another one gave birth to a baby boy* RESP26.

Researcher*: Where did this happen to them?*

They went to the farm and got raped but told nobody and soon they appeared pregnant, **RESP26**(4/11/2008).

Another explains why they stopped going to the farm as follows:

Yes, we were planting in Monger but it is no longer safe. We have been driven away from it. The Arabs came and broke the water tank and the water pump. They started beating the people and we fled away. We left the crops and beans behind, **RESP25 (3/11/2008)**.

Researcher: *What happens to the girls?*

They are beaten and abducted. Some of them come back and others don't, **RESP25 (3/11/2008)**.

All participants agreed that there is no risk in collection of water since it is available for all people living in the camp. They get it easily from water taps that are distributed in the whole camp by NGOS working there who facilitate the availability of water for the IDPS. Thus, nobody goes out of the camp to fetch water.

As for firewood, a majority of the participants reported that there could be potential risk of sexual violence due to collecting firewood from the open areas although not in all directions but still there is serious risk as one of the girls mentioned that:

When the girls go out for firewood, the Arabs find and abduct them, they are assaulted and left in the moor land. Sometimes, if the girl is so beautiful they will never let her go home and she will be taken for ever, **RESP** 24 (2/11/2008).

Researcher: *What effect does this have on the girl?*

One year ago, some girls were found almost dead after being raped. They were taken to hospital and their families were told not to allow them go to collect firewood again. Some of them died, **RESP24**.

During the conflict time in Darfur, like most war areas, women suffer sexual violence acts like rape because it is viewed as a sign of defeat against the enemies. Rape is part of the pattern of war behaviors, a horrible emblem of domination and the brutalization of human beings. The wholesale rape of women and girls of a particular group is not uncommon. This signifies male domination of women. A woman who has been raped is devalued property and symbol of defeat for the man who fails fulfilling his part as protector. Rape at once pollutes and occupies the territory of the nation, transgresses its

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boundaries, defeats its protectors. Degrading the nation's symbol of fertility and purity, it physically blocks its continuity and threatens its existence. The most significant motivation behind female rape is humiliating their men. Men would not return to the place where their women were raped and humiliated. Mostov (2009 cited in Ballet and McDanil 2002:329) mentions that "the terrain of women's bodies is seen as a battlefield over which the identities of the other can be destroyed." This explains why raping of women is severe in war affected areas of the Darfur region.

According to the majority of respondents, rape and other forms of sexual violence are widespread since the Darfur conflict started in 2003, next to other forms of violence such as killing of civilians, enforced disappearances, destruction and burning of villages.

In Darfur like in most regions in Sudan and Africa, it is believed that a woman who has been raped is devalued property and signals defeat for the man who fails to succeed in fulfilling his role as protector. This is supported by (Mostov 2009 cited in Ballet and McDanil, 2002) "raping the others' women is a violation of territorial integrity, an act of war, a means of establishing jurisdiction and conquest". The property of the enemy males is violated and taken over through the "colonization" of female bodies. Girls are at the risk of rape while fleeing conflict. In fact, many rapes happen when the girls are executing daily activities such as farming, collecting water or collecting firewood. Rape has been a feature of all recent conflicts, including the ongoing one in the Darfur as well as in the former Yugoslavia, DRC, Rwanda, Sierra Leone, Liberia, Northern Uganda, and Chechnya. It is claimed that rape is often used as a weapon of war to denigrate the enemy, terrorize and humiliate civilian populations and as a means of soldier gratification" (Mills, et al. 2004).

The risk of HIV infection in Darfur as a consequence of rape might be limited because the prevalence rate of HIV/ AIDS there is low compared to other war affected areas. The situation is clearly different from Rwanda where it was already known that the HIV prevalence rates were relatively high in the population as a whole at the onset of the conflict. In the case of Rwanda, HIV/AIDS has even been identified according to Waal 2007.online).as a "weapon of war," which is transmitted to women intentionally by using

rape. Waal states "rape here was strategic in that it was part of the overall Hutu power strategy of eliminating the Tutsis" *(*Waal, 2007.online).

The risk of HIV infection for girls and women who are raped should be interpreted in the larger context of HIV/AIDS transmission in conflict settings, and women's vulnerability in these settings. Many of the factors that are contributing to the transmission of HIV/AIDS are prominent in conflict situations such as displacement and destruction of health and education systems infrastructure. In addition; the conflict has led to a widespread demolition of livelihoods and increased poverty. Conflict also affects the social structures that under normal circumstances provide a supportive and protective network for community members. Female-headed households are common especially in IDP camps and are generally considered to be more economically vulnerable. These women may also be at an increased risk of HIV infection, for example by resorting to high-risk livelihood strategies.

Despite wide-scale rape in many of the countries, there is insufficient evidence to show that rape increased prevalence of HIV infection at the population level. This is because; most findings showed that HIV prevalence in countries war-affected countries remained fairly low even though rape occurred on a wide scale. For example, HIV prevalence in Sierra Leone remained fairly low even though rape occurred on a wide scale, also in DRC, no significant difference between HIV prevalence in Western and Eastern regions was found, despite assertions that extensive rape in Eastern DRC fuelled the HIV epidemic in that region.

It is possible that low pre-conflict prevalence rates among local populations and combatants were insufficient to accelerate HIV infection, despite increased risk of transmission due to rape.

Additionally, there is some evidence that when initial low prevalence rates are combined with conflict-induced isolation over long periods of time, HIV progression at the population level may be considerably reduced. Evidence from DRC, south Sudan, Sierra Leone, and Somalia suggests that conflict began when the prevalence of HIV infection in those countries was low and it remained fairly low throughout the conflict compared to

peaceful neighboring countries (Spiegel, 2007). Spiegel continues to say that, a possible explanation is that low pre-conflict prevalence rates among local populations and combatants were insufficient to accelerate HIV infection, despite increased risk of transmission due to rape and other factors associated with vulnerability to HIV in conflict settings (Spiegel, 2007).

6.9.   Poverty

There are respondents who work as tea sellers and others as cleaners in houses in the town.

> *In search of food and basic human needs, girls go out to work in the city. Some go to serve in houses in which there are no women; and the need for money may make them bargain to sell their bodies and thus they may expose themselves to AIDS.* The head of the health committee RESP 30 (7/11/2008)

There are situations where the combination of gender and poverty confers risk. For example, food insecurity is associated with increased chances of risky sexual practices among women, including increased likelihood of selling sex for money or resources and engaging in unprotected or intergenerational sex (Weiser et al., 2007).

A participant's response in a dialogue is as follows:

> **Researche**r: *So you go to work (selling tea) to meet your family needs.*
>
> *That is it* **RESP 23**(2/11/2008).
>
> **Researcher**: *How is tea selling?*
>
> *Is it profitable? Sometimes it's Ok, otherwise not* **RESP 23**.
>
> **Researcher:** *Tea making is exposing girls to harassment?*
>
> *So many girls say so? Not every woman is as such; may be some of them, you know six of the girls that sell tea were pregnant without marriage including my cousin* **RESP23:**.

Researcher: *What kind of harassment*

You know what young men are; they talk such talk but I turn a deaf ear to what they say; it is only a talk so you leave it behind because you know well what made you come out of your house. As far as you are making money along the street that means your sole goal is selling tea. She added: you are a peddler what is said to you should not be taken seriously; you either ignore or object to it, however, there are others who keep talking as such and you are a poor helpless woman who earns her living from scratches, what can you do except tolerate such **RESP23.** .

Another serious condition that was mentioned by one of the respondents was "when the parents went for farming, leaving their girls alone, the result of their absence from the house was that some of girls were deceived by boys and misbehaved (had sexual affairs). But this behavior, as some of the respondents mentioned, depends on the individual; if you are well brought up and have good manners, you will know how to behave well and avoid risky behaviors".

This could not happen to me; if behave yourself nothing will come to you, **RESP 4(14/10/2008)**.

Researcher: *One of the things that I have noticed is, there are so many unmarried women and young girls who got pregnant, why is that and was this phenomenon prevalent when you were at your home land?*

No, no they were cheated by men and the need money as well. Also, many of them were sitting alone at home while their families were far away in the farm. They go astray and make love. However, girls are not equal, some of them are chaste, **RESP 22(30/10/2008)**.

6.9.1. HIV/ AIDS in curriculum

HIV is not one of the topics that are introduced in the national curriculum (all of Sudan) for the basic schools, so most of the basic school students are not aware of it. When I asked, "did you not learn about AIDS at school?" All the answers were: "No, it is not in the school's text-book."

Though there are some topics which are not in textbooks, they are considered to be very important topics for the IDPs. Such as Landmines Awareness and this is introduced to the students to be aware of. As mentioned by one of the interviewees:

At school they just brought some posters of land mines and tank shells and told us about it, **RESP6** (15/102008):

This clearly shows that HIV/ AIDS topic is not considered as a priority topic for IDPs to be aware of. Even in the national curriculum, it is considered very important.

Education plays a vital role in HIV prevention for young people. Education helps protect children, but in conflict situations, education systems have often been destroyed. The lack of access to education and health services in conflicts and post-conflict settings increases young people's vulnerability to HIV/AIDS. One remedy for such a dismal situation is ensuring that girls have access to education. UNICEF, the World Bank and others have argued that education is a "social vaccine", the only vaccine available to inoculate children and young people against HIV/AIDS.

6.10.   Forced Displacement during the conflict:

One distinguishing feature of the Darfur conflict is the large number of people that were displaced from their homes and communities.

All respondents were forced to displace their places and as result, most of them came directly and stayed in the (camp). There are few who stayed for one month and less in other places before coming to join others.

*-We escaped from war, some people attacked and burned Um Dhai, killed and robed some, we were told that the invaders were coming, therefore we ran for our lives.***RESP20(28/10/2008).**

The most difficult experience for many girls during the crisis, besides the loss of family members, was their mass exodus to the neighboring towns and countries. Hundreds of thousands of Darfurian girls were forced to leave their homes and walk or run to nearby towns or crossing the borders. On the way, many were harassed by Arabs, girls were raped, and mass killings took place. They lived in IDP camps for years, there was

enormous help from international agencies and NGOs, but uncertainty about the future traumatized many. Girls and Women had to take care of their families and children.

A dialogue with a participant below:

We are originally staying here in the town but by the time of war we were at the farm for one year to plant, **RESP26 (5/11/2008)**.

Researcher: *So you were originally from here and the agriculture made you go there and war broke while you were there*?

Yes, the whole vegetables were destroyed; we did not bring anything with us. The whole stay and effort of one year came to nothing. All was burnt, the groundnuts, the grains. So many people were killed by the air strike, and some of my close relatives were shot dead. They had gone to bring water from Elrahed[4] on the donkey's backs and as they carried their containers, some men on horse's backs came and ordered them to leave the water behind, when they refused to do so, they were killed one after another, **RESP26**.

Researcher: *Who are they among your relatives*?

They are my grandfather, my two uncles (My mother's brother and my father's cousin). Also, my cousin and his father were killed. At Elrahed, my cousin sister went to bring water and she got raped there, **RESP26.**

Researcher*: When did this happen?*

At the times of war, **RESP26**.

Researcher: *What happened*?

In fact she is engaged to someone in Khartoum and after the accident, he made a call phone for her to be sent to him to fulfill the wedding, **RESP26.**

Researcher: *What did she feel like?*

She is lying on bed crying and never speaks to any one if asked, **RESP26**.

Researcher: *When such a thing happens to a girl is she usually excused and kept secret?*

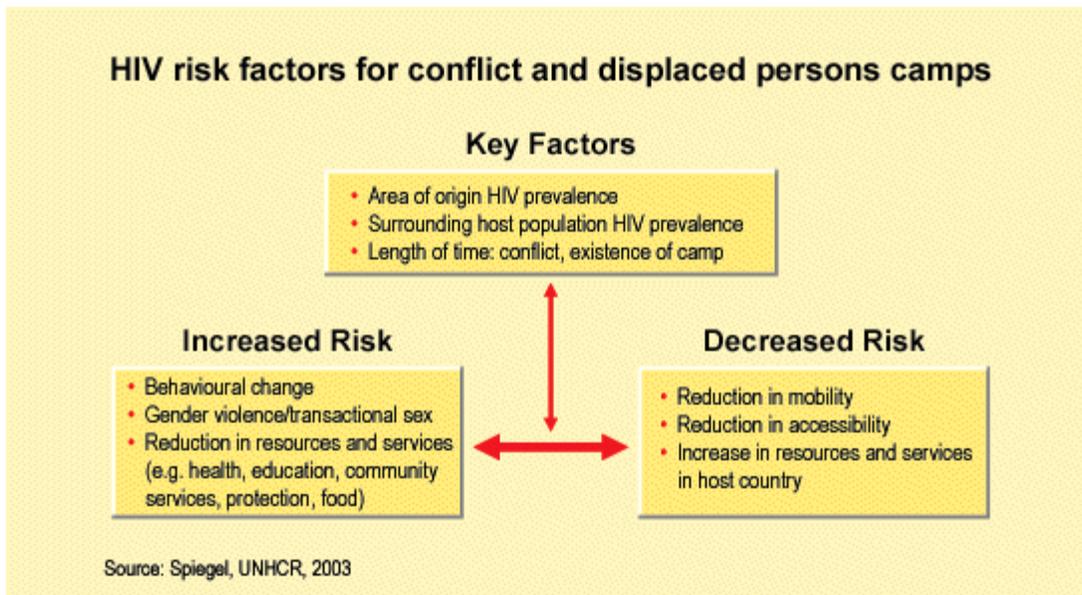*Some of them never tell till they appear pregnant*, **RESP26**

---

[4] Is a place like small river where they brought water from

Forced displacement may also subject more women than men to GBV, for example, the conditions prevailing in temporary camps and shelters set up for displaced people can increase the risks of sexual exploitation, abuse and consequently, HIV. Camps may not have well-protected women's quarters or may have inappropriate sanitary facilities. According to a reproductive health survey carried out among Sudanese refugees in Chad, services relating to the prevention of GBV left many of the protection needs of refugees unmet. Women and children, living in camps on the border were at risk of sexual violence from Janjaweed[5] militia, who regularly made incursions to the border area to steal livestock and other resources from refugees (Women's Commission/UNFPA, 2004). The report highlighted a need for preventative measures such as, the need for adequate light at night, security patrols and strategic location of basic services in such a way that this does not expose women and children to attack.

Moreover the specific social and economic environment of a camp is also a critical determinant; if the camp residents are free to move in and out of the camp, for example spending some days trading in a local town before returning to the camp, it is possible that their HIV risk will be higher than a population that is confined to a camp. However, in Northern Uganda, long-term encampment and limited mobility has limited IDPs access to cultivatable farmland, this has drastically reduced their food security, which could lead to increased risk of GBV (WFP, 2006a).

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[5] The Arab militia

HIV risk factors for conflict and displaced persons camps

Key Factors
- Area of origin HIV prevalence
- Surrounding host population HIV prevalence
- Length of time: conflict, existence of camp

Increased Risk
- Behavioural change
- Gender violence/transactional sex
- Reduction in resources and services (e.g. health, education, community services, protection, food)

Decreased Risk
- Reduction in mobility
- Reduction in accessibility
- Increase in resources and services in host country

Source: Spiegel, UNHCR, 2003

Majority of interviewee came from the Northern areas that were infected by conflict, but still there are few informants who joined the IDPs camp due to the expensive cost of renting houses in the town or because they were married from IDPs, which means that the camp is open; there is movement from and into the camp. Regarding HIV status, there are cases in the town that close with the camp and most of the IDP working in. In fact when I asked the lab technician RESP 29if there is any HIV/AIDS cases, the answer was:

> *Yes, two or three cases are usually found, but this year 2008 there are six cases; three of them were men and were in the last stage, they died soon after they reached the hospital, the other three were women who also died.* **RESP29 (6/11/2008)**
>
> **Researcher***: Are those cases from the town or from the IDPS camps*
>
> *They are from downtown.* **RESP29 (6/11/2008).**

Spiegel, (2006:11) introduced paper under title of HIV Epidemiology among Conflict-Affected and Displaced Populations in conference hosted by UNICEF and UNHCR

In presenting data from conflict-affected areas across Africa, Paul Spiegel challenged conventional thinking regarding a simple correlation between conflict and HIV

prevalence. Spiegel argued that there is no evidence that conflict leads to increased incidence of HIV prevalence at the population level. The relationship, Spiegel argued, is much more complex.

In his view, people speak somewhat glibly about refugees' increased risk of HIV/AIDS without considering in detail:

- Prevalence rates in the country of origin
- Prevalence rates in the host country
- Prevalence rates in communities immediately surrounding the refugee camp
- Degree of interaction between surrounding communities and refugee populations

A key but often overlooked determinant is HIV prevalence in communities that immediately surround refugee camps. Contrary to popular belief, researchers have consistently found that refugee populations have similar or lower prevalence than surrounding communities.

He added that there is no evidence that conflict increases HIV prevalence at the population level, citing examples such as Northern Uganda where HIV prevalence has actually gone down. Much more, and better, data is needed, such as Behavioral Surveillance Surveys (BSS), which measure knowledge, attitudes and practices. Analysis should be site-specific. Good data can and should be used for advocacy and programming purposes, he argued. In closing, Spiegel asked participants to consider the possibility that in some cases, refugees in camps actually have advantages. International NGOs work with them, providing them with information and services. Per capita, more money is spent on them than on people in the surrounding communities.

The next chapter will introduce the summary of the study and recommendations

7. Chapter 7: Conclusion and Recommendation

7.1. Introduction

This chapter presents the summary of the major findings of the study, elucidating to what extent the questions of the research have been answered. The first section of this chapter deals with a summary of the key findings which is followed by the second section where I present some highlights on specific issues considered of particular importance encountered while conducting the research. The last section on the other hand, provides the recommendations of the study.

7.2. Summary of Findings

In looking at the findings it is important that I revisit my research questions. In particular the overall question was: What are the conditions that contribute to the spread of HIV/AIDS with a focus on IDPs girls in the Darfur conflict**?**

With the sub-question being:

- What are the factors that most influence girls' vulnerability to HIV?
- What experiences did girls go through during the conflict?

In recognition that HIV/AIDS can create conditions conducive to conflict, conflict can affect the epidemiology of HIV/AIDS. "Conflict is generally understood to accelerate HIV transmission, but this view is simplistic and disregards complex interrelationships between factors that can inhibit and accelerate the spread of HIV in conflict and post conflict settings" (Mock et al., 2004:1). Also in recognition that HIV/AIDS is a highly gendered pandemic, this thesis has sought to explore the factors that increase the vulnerability of the girls to HIV in conflict area such as Darfur through a case study of girls in the IDP camp. The study has aimed to broaden understandings of how these context of conflict may contribute to heightening risk and vulnerability of HIV/AIDS for girls and to identify the factors that increase the vulnerability within this conflict zoon how gender culture and power plays great role to expose girls to the risk of HIV/AIDS,

the daily life activities such as collecting fire wood and farming and the traditional practices and the cultural expectations of the girls to be ignorant about sex. All these factors in addition to girl's limited economic options, and relative powerlessness, may force them into sex work in order to cope with household economic crisis. This exposes them to HIV infection. Young girls are particularly vulnerable to HIV infection, because of sexual violence, and limited access to information.

I have used the theories of gender and power, articulated by Gupta, 2000 and others which provide a useful tool for understanding how power operates on both a formal and informal level in gender relations and which may heighten risk and/or vulnerability of HIV/AIDS. And I also used the theories of vulnerability articulated by Bilcki and Connon (2004) in order to discuss the impact of Risk and vulnerability as the result of the conflict and to explain the conditions that exposed girls to Risk.

The study find that Darfur households and communities are in distress as a result of a combination of factors including poverty, and food insecurity households and communities are less likely to receive information and services that discourage the transmission of HIV. They may be less aware of the risks and less inclined to focus on the long term as short-term survival is critical. In the last chapter I have attempted to highlight the ways in which girls are in every sense at greater risk, they are exposed to sexual violence during the daily activities such as collecting firewood and farming.

Also due to economic and social inequalities, e.g. lack of employment opportunities, poor access to information and limited control over resources, girls are more vulnerable to HIV infection. In Darfur girls are working as cleaner and tea sellers and when faced with limited livelihood opportunities, many women and girls are forced to turn to commercial and transactional sex. Moreover the people who are economically and politically marginalized are more likely to stop trusting their own methods for self-protection, and to lose confidence in their own local knowledge.

7.2.1. Loss of livelihood

The conflict has destroyed livelihoods of Darfur communities, particularly their farms; due to conflict they lost their animals and houses. Most of the people moved to nearby towns or crossed the border into neighboring countries. Sometimes in such cases the women, girls and small children have been left behind in the rehabilitation shelters.

Also socially and culturally girls in Darfur are more at risk; the certain cultural norms heighten young women's overall vulnerability, such as those encouraging or forcing women into early marriage. Early marriage also decreases the ability of a young girl to negotiate condom use (e.g. Clark, 2004; Glynn et al. 2001).

Forced sex, or rape, can make HIV transmission more likely, since it may result in more trauma and tissue tearing (Jewkes and Abraham, 2002). In conflict situations where (multiple) rape is widespread, such as in Darfur, this kind of vulnerability increases, alongside the assumption that attackers are unlikely to use condoms. The psychological, emotional and spiritual damage wrought by rape, as well as the stigma and discrimination faced by the victims from partners, family and the community cannot be underestimated. Such stigma and exclusion can further marginalize women, who have been victims of SGBV, and can result in destitution, leading potentially to transactional sex and HIV infections. Many women and girls who have been raped do not report such attacks for fear of stigmatization.

While the data do not support the conflict is likely to increase overall HIV prevalence, it is generally recognized that girls in IDP in Darfur as conflict-affected populations are made more vulnerable to HIV infection by widespread human rights abuses, displacement, food insecurity, sexual and gender-based violence and the incapacitation of health systems and other social services, including HIV prevention programs.

The next section I will present the recommendations of this study.

7.3. Recommendations

FGM eradication activities should be linked to HIV/AIDS awareness activities as this link should build greater support for each issue through the FGM eradication and HIV/AIDS awareness messages.

While it is clear that many local leaders, NGOs and health workers have an interest in promoting awareness about HIV/AIDS there is a threat that without communication strategy support, HIV/AIDS awareness activities and tools produced at the local level may promote misconceptions, utilize poor approaches, or increase stigmatization.

The right messages about the transmission of HIV/AIDS should be clear, concise, and consistent, and should identify unprotected sex as the greatest threat. The other transmission routes through blood transfusions and the use of unsterilized equipment, for instance, in the clinic, among traditional healers, when being circumcised, when a razor is used at the barbershop, should be indicated along with this message but should be given more minor importance, while needle sharing is among the main risk factors for HIV transmission.

Curriculum and issues surrounding HIV/AIDS can be addressed in civics, social studies, and religious education. Research has proven that life skills building programs promote abstinence and help youth to delay their sexual debut, thereby disproving assumptions that promiscuity and immorality is promoted through such education.

HIV/AIDS should be integrated into these formal and non-formal education avenues through the provision of HIV/AIDS curriculum and training of teachers and facilitators. Curriculum targeting youth, should be provided to youth groups so as to reach youth members and be used in the literacy programs that youth groups commonly support. At the same time, non-formal education should be designed for women and girls engaged in literacy programs.

The link between STIs and HIV should be made public in advocacy campaigns in order to address the increased risk of transmission, in attempt to decrease the stigma associated with HIV and to increase the health seeking behavior among persons who suspect they

have an STI. STI and HIV messages should be integrated into STI health center and STI awareness programs so that important STI information can also be provided.

7.4. Conclusion

Women who have been raped during conflict are likely to be at an increased risk of being infected with HIV/AIDS. This risk depends amongst other things on the HIV prevalence in the region and specifically amongst perpetrators (armed forces), on physiological factors, and on the impact of sexual violence on women's lives and vulnerability to HIV/AIDS in conflict and post-conflict settings. So far, too little is known about these factors to draw any firm conclusions; much more solid empirical research is needed in this area. This knowledge can be used to determine the relative importance of different approaches to HIV prevention amongst rape survivors; aimed at preventing direct transmission or long term vulnerability. A better understanding of the relation between sexual violence and the risk of HIV infection can also contribute to the improved integration of HIV and gender-based violence interventions within humanitarian settings. Ultimately this will save women, already traumatized by the sexual violence inflicted on them, from the death sentence of HIV/AIDS.

Appendix A: Biographical Data of Respondents

Respondent NO	Age	Marital statues	Education	Working
RESP 1	15	Single	abandoned school at the fifth level	I do not work
RESP 2	13	Single	I study in the seventh grade	No, I do not work
RESP 3	16	married	No. I did not go to school	No, I have No job
RESP 4	16	married	No, my father did not make me go to school	Yes, I work in the market, I make and sell tea and I have been doing this since my stay in Kalma[6]
RESP 5	12	single	I study at the secondary school;	No, I do not work
RESP 6	15	single	Yes, I am in the fourth grade	No, I have No job
RESP 7	17	married	Abandoned school at the sixth level, Because of this affair (she means her wedding).	No, I do not work

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[6] Is the biggest IDP camp in south Darfur

RESP 8	17	married	- I was a student but left school from the third grade	I do not work
RESP 9	17	married	- No, I only studied Qur'an at Abo el Zaki Khalwa[7]	I do not work
RESP 10	12	single	I study	No, I do not work
RESP 11	10	single	I study at the first level.	I do not work
RESP 12	16	single	There is no school in El Gouz; we only go to farm and Khalwa to study Qur'an	No
RESP 13	13	single	I am student in the third class	No
RESP 14	17	single	I am student in the fifth class	I work in the farm, if not ours I work for others
RESP 15	12	single	I am student in the school	No

[7] The place where students learn Quran

RESP 16	**14**	married	I go to school.	Yes, I work on Friday and Saturday as cleaner in the houses in town. On Sundays, I go to school.
RESP 17	**15**	single	I didn't go to school	No, but I was working in our farm in Al gazeera
RESP 18	**9**	single	**No**	I was farming but now I don't do any thing
RESP 19	**16**	single	I am in the school	I do not work
RESP 20-	**12**	single	I study	No
RESP 21	**12**	single	I entered the first year at school when we were in Myseriba, then we moved here.	I neither study nor work. I stay at home.
RESP 22	**16**	single	I study at school.	I do not work

RESP 23	**18**	single	I didn't go school	Yes, I have work. I make and sell tea in the market
RESP 24	**16**	single	Am student in grade 8	I do not work
RESP 25	**17**	single	I am student at grad six	In summer, Yes, I go collect ground nuts and frost and take it to elzeriba market.
RESP 26	**16**	single	I am student at grad six	No, I do not work
RESP 27	**17**	single	I am student at grad six	I do not work
RESP 28	**13**	single	I study at school	No I have No job

APPENDIX B: SEMI –STRUCTURED INTERVIEW GIUDE

Age

Marital statues

Literacy level (Education)

QUESTION 1:

 What risk do you face in displacement?

QUESTION 2:

Describe in details why did you leave your place and how you experience displacement? Are you displaced with your family only or there are others?

QUESTION 3:

Is health care provided for you?

QUESTION 4:

 What kind of health education do you receive?

QUESTION 5:

Who provides it?

QUESTION 6:

What do you know about HIV/AIDS?

QUESTION 7:

Where did you get information about HIV/AIDS?"

QUESTION 8:

 What do you know about Sexually Transmitted Diseases (STIs)- such as gonorrhea and syphilis ?

QUESTION 9:

 Do you have (What is) cultural practices that you think may make you vulnerable to HIV/AIDS FGM, Scars, and tattoo?

QUESTION 10:

Why do you think such practices may cause AIDS to girls?

QUESTION 11:

What are factors that increase the vulnerability of HIV/AIDs in your area?

QUESTION 12:

Is it possible that the people in your district be exposed to AIDS infection and WHY?

QUESTION 13:

Do you think you yourself may be vulnerable and exposed to AIDS?

QUESTION 14:

What is risk of collecting water?

QUESTION 15:

From where do you get firewood?

QUESTION 16:

What kind of risk do you face when you are collecting firewood from open areas?

QUESTION 17:

What is risk of going out side for farming?

QUESTION 18:

What are the common causes of mortality in the camp?

QUESTION 19:

Is HIV/AIDS is considered to be a problem or challenge in your area?

QUESTION 20:

Do you know any one who is affected with HIV/AIDS?

QUESTION 21:

Haven't you ever listened to a program about AIDS in a radio or TV?

QUESTION 22:

Do you think there might be many people who know something about AIDS here?

QUESTION 23:

Do you ever discuss this or ever talked to your parents about sexual affaires or diseases of such kind?

QUESTION 24:

How does the war change your life?

QUESTION 25:

Who is responsible for the house?

SEMI –STRUCTURED INTERVIEW GIUDE   FOR LAB TECHNICIAN:

QUESTION 1:

For blood transfusion and blood donation do you screen the blood for each case?

QUESTION 2:

Is there any cases of HIV/AIDS appears when you did the blood test

QUESTION 3:

Do people new that they are infected

QUESTION 4:

What are the other STIs in the area?

QUESTION 5:

What is the percentage of the STIs?

QUESTION 6:

Is there VCT in the area?

QUESTION 7:

Where do the injury solders treated.

Appendix C the tables

Table 1. Socio-demographic characteristics of study population

RES .No	Characteristics	Frequency	Percent
1.	**Age**		
	9-11	**2**	
	12-14	**9**	
	15-17	**16**	
	18-20	**1**	
2.	**Literacy status**		
	Literate	**22**	
	Illiterate	**6**	
3.	**Marital statues**		
	Married	**6**	
	Single	**22**	
4.	Work		
	Working	**5**	
	Have no work	**23**	
5.	**Residence**		
	Place of origin		
	IDP	**24**	
	Other	**4**	

What is your work?

Table 2: Work

No	Category	Freq
	Type of the work	
	Working in a farm	1
	Tea seller	2
	Selling in the market	1
	Cleaning houses in the town	1

What do you know about HIV/AIDS?

Table 3 Knowledge on HIV/ AIDS in the study target population

	Knoll wedge	**Freq**
1.	**General knowledge**	
	Heard about it but know nothing	**4**
	Didn't Heard of HIV/AIDS	**8**
	Know some information	16
2.	**Knowledge on transmission**	
	Having sex with men or boys	**8**
	Using razors, needles, or scissors	**8**

	thrown along the street	
	Unsafe blood transfusion	
	Mother to child transmission	0
	illegal midwives	2
3.	**Knowledge on prevention**	
	Abstinence	0
	Faithfulness	0
4.	**Use of condom**	0

Table 4:

Qu: what kind of health education do you receive? Have you received any health education /awareness?

Kind of health education	**Frequency**
Awareness about cleanness and disease	**15**
Awareness about cleanness only	**5**
Awareness about disease only	**7**
Not receive any health education	**1**

Where did you get information about HIV/AIDS?"

Table 5: Sources of information

Source of information	Frequency
Heath workers	11
Radio	2
TV	1
Friends	3
School	2
Others	1
Total	

Table 6: Risk conditions /factors contributing to vulnerability

What are they?

No	Factors	Frequency
1.	Practicing illegal and commercial sex because of poverty	
	Women should stop adultery	6
2.	Collecting firewood and farming in unsecure areas	
	Collecting firewood from open area and farming in unsecure land expose girls to Abduction and rape	12

	The factors and conditions	Freq	Risk	Not risky
1.				
	Water tap in the camp	**28**		✓
2.	Collecting fire wood			
	From open area	**12**	✓	
	Buy it from the market	**13**		
	Brought it from the farm	**3**		
3.	3-Farming	**19**	✓	
4.	Leaving girls behind in the camp and go for farming		✓	

Appendix D: Letter of consent to conduct research

Ministry Of Humanitarian Affairs
Humanitarian Aid Commission

وزارة الشئون الإنسانية
مفوضية العون الإنساني

الإدارة العامة للمنظمات
مجمع الاجراءات الموحد

التاريخ:2008/6/8م   النمرة / و ش ا / م 4031م

السيد/ المدير القطرى لمنظمة تيرفاند .

تحية طيبة

الموضوع : البحث التكميلى للماجستير للطالبة / ندى عبده حسن محمد

بالاشارة للموضوع أعلاه , فقد تقدمت لنا المذكورة بمنحها إذن لإجراء بعض الإستبيانات فى معسكرات النازحين فى منطقة الضعين وذلك لتكملة رسالة الماجستير من جامعة أوسلو بالنرويج نفيدكم بعدم ممانعتنا على ذلك بشرط :

1/ تمدنا المذكورة بنسخة من البحث بعد إكماله

2/ مدنا بصورة من الإستبان المعد لإجراء المقابلات قبل توزيعه .

ولكـــــــــم الشكر

معتصم أبو القاسم عباس
مدير الإدارة العامة للمنظمات الدولية

9 - JUN 2008

ـ صورة للسيد لمفوض الضعين

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