

# Ensuring Continued Access to Antiretroviral Treatment for Returning Refugees from Tanzania to Burundi

#### **Context**

The United Republic of Tanzania had previously hosted the largest refugee population in Africa for decades including Burundians, Congolese and Rwandans. Over the past 8 years, the vast majority of Burundian refugees have voluntary repatriated to Burundi; 362,000 Burundian refugees hosted in Tanzanian camps were assisted to return home since

2002, the majority of whom fled Burundi due to the 1993-1994 conflict.

United Republic of Tanzania
Kigoma area
As of January 2008

DATES INCREASE OF TANZANA

Repatriation is an important durable solution for UNHCR. UNHCR facilitates the return of refugees to their homes safely and with dignity. The Agency and its partners strive to ensure that the health and nutrition status of the returnees are not undermined in the process of repatriation, and promote continuation of the access to public health services in the areas of return.

## **Actions for Change**

In Tanzania, a significant number of refugees have access to antiretroviral treatment (ART). In line with its Antiretroviral Medication Policy<sup>1</sup>, UNHCR attempts to ensure continuation of ART for refugees returning to their home country.

For those HIV positive Burundian refugees on ART returning to their country of origin, UNHCR has established standard operating procedures for people living with HIV and AIDS (PLHIV) between the

Tanzania health programme and the Burundian health programme on the other side of the border.

## **Interventions and Positive Outcomes**

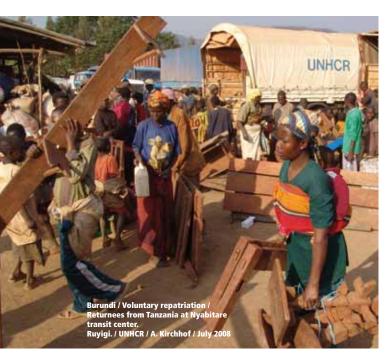
At the time of registration for return to Burundi, all returnees undergo a health and nutritional screening. PLHIV are given an appointment with their HIV counsellor to discuss their health condition and special considerations for their return to Burundi. People on ART are counseled on the need to continue with treatment and care in their areas of return, and are provided with detailed information on how to access services together with a list of appropriate contacts of organisations and Governemth services dealing with HIV in their return area. In addition, people receive their medical records in a confidential file.

<sup>1</sup> UNHCR, 2007 Antiretroviral Medication Policy for Refugees http://www.unhcr.org/45b479642.html

Criteria has been established for returnees living with HIV and AIDS. The following HIV positive persons are advised to postpone their return:

- HIV positive pregnant women under the Prevention of Mother-to-Child Transmission (PMTCT) programme if
  access to this service in their area of return is not provided or when they are in the last stage of pregnancy.
- PLHIV who have just begun ART for shorter than three months to allow monitoring of side effects and stabilization of their condition.
- Terminally ill persons on ART

However, the final decision for return is with the person and his/her family.



A day before departure, returnees undergo a final medical and nutritional screening. At the departure point, the health team records the health status of vulnerable persons on the health card and repatriation medical screening form to ensure proper medical handover and follow-up in Burundi; these are confidential documents that are given directly to the returnee. A confidential list of vulnerable individuals is also made for each convoy. PLHIV are listed as chronically ill cases, as is done for other medical cases; their diagnosis cannot be known from the list that is shared with the partners in Burundi. PLHIV are advised to use their confidential referral documents to reveal their status and the treatment(s) that they have been taking to the service providers/counselors of their choice in their areas of return.

Parents or care takers of infants in the PMTCT

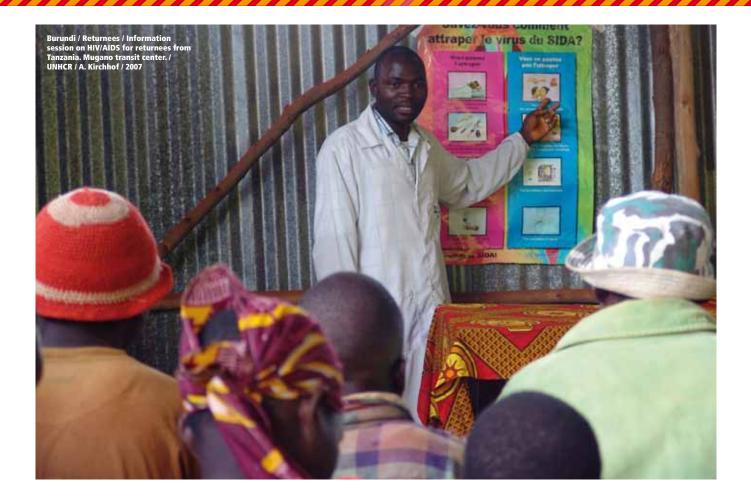
programme or children on ART are provided with all relevant infomration about the continuation of services in their areas of return, and confidential referral notes are provided to their parents/caretakers for submission to the relevant services in their areas of return.

PLHIV that are progressing well on ART are provided with the following:

- Appropriate information on where they can access ART in their areas of return.
- Three (3) months of ART.
- Confidential referral documents similar to those given to chronically ill individuals to provide to the receiving partner in Burundi.

The PLHIV that are not yet on ART and are returning to Burundi are provided with the following:

- Three (3) months supplies of medicine for prophylaxis of opportunistic infections.
- Advice on the need to have regular follow-up visits at the nearby care and treatment centre in their areas of return, and information regarding where they can access such services.
- Confidential referral documents with their medical history.



There is a health post in each of the reception areas in Burundi, where all refugees needing special medical attention can report upon arrival for follow-up support and linkages to the health system in their area of return.

The UNHCR health partner in Burundi supports the returnees to access the treatment services in Burundi.

### **Conclusion**

At the time of registration for return to Burundi, all returnees undergo a health and nutritional screening. PLHIV are given an appointment with their HIV counsellor to discuss their health condition and special considerations for their return to Burundi. People on ART are counseled on the need to continue with treatment and care in their areas of return, and are provided with detailed information on how to access services together with a list of appropriate contacts of organisations and Governemtn services dealing with HIV in their return area. In addition, people receive their medical records in a confidential file.

