The HIV/AIDS Epidemic: The Roles of Parliamentarians and The World Bank

Debrework Zewdie
Director
Global HIV/AIDS Program
The World Bank

June 12, 2005
Vienna
Overview

- The epidemic shows no sign of abating
- Effective and early responses work
- World Bank response to the epidemic to date
- A new phase in the response to HIV/AIDS
- The Three Ones
- The Global HIV/AIDS Program of Action
- What can parliamentarians do?
HIV infection shows no sign of abating

- More than 60 million people infected to date
- More than 20 million people have died
- 40 million people are living with the virus
- More than 15 million children orphaned
- 5 million people were newly infected with HIV in 2004

Increased feminization of the epidemic
- Women constitute 60% of those infected in Sub-Saharan Africa and 50% globally
- Young women are three times as more likely to get infected than young men in Southern Africa
15 Million Children Orphaned by AIDS Globally

Source: Children on the Brink 2004, UNICEF, UNAIDS and USAID.
HIV/AIDS in South Africa and Thailand: widespread, evidence-based, early interventions work

Source: UNAIDS.
AIDS Mortality Rate Brazil, 1990-1999

ARV treatment begins

R² = 0.8156
Antiretroviral therapy coverage for adults

(\% of People)

World Bank Funding for HIV/AIDS:
$2.5 billion in total worldwide so far

- **Multi-Country HIV/AIDS Program (MAP) for Africa:**
  - Commitment of $1.2 billion
  - 29 countries and 4 sub-regional projects
  - Community funding: > 30,000 grassroots initiatives

- **MAP for the Caribbean:**
  - Commitment of $117 million
  - 9 countries and 1 regional project

- **Other HIV/AIDS Projects & Components**
  - Africa: 9 countries, $73 Million
  - East Asia & Pacific: 3 countries, $76.1 Million
  - Eastern Europe & Central Asia: 4 countries and one sub-regional project, $107.1 Million
  - Middle East & North Africa: 1 country, $12 Million
  - Latin America: 4 countries and one sub-regional project, $134.4 Million
  - South Asia: 5 countries, $274.6 Million
Other funding for HIV/AIDS

- **Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM)**
  - $1.7 billion committed over two years for HIV/AIDS
  - Projecting 1.6 million to receive antiretroviral treatment by 2007

- **President’s Emergency Plan for AIDS Relief (PEPFAR)**
  - Five year plan, $10 billion in new funding
  - 15 focus countries in Africa, Caribbean and S.E. Asia
  - Aims to treat 2 million people
A New Phase in HIV/AIDS Response

- More funding, political commitment, players but less coordination
- ARV prices down, more focus on treatment
- Rising expectations of PLWA and donors
- Shift from health sector to multisectoral focus
- Epidemiology: complex, varies across regions and countries
AIDS stakeholders and donors in one (fairly typical) African country
The Three Ones

- One agreed AIDS action framework that provides the basis for coordinating the work of all partners; NOT mere strategic plans

- One national AIDS authority, with a broad-based multisectoral mandate; NOT about only government control

- One agreed country-level monitoring and evaluation system; NOT merely reporting, but accountability
The World Bank’s new Program of Action: key lessons

- The Bank has failed actions to act/influence country HIV/AIDS response
- Country ownership, leadership and capacity are crucial to successful action (the “Three Ones”)
- HIV/AIDS needs to be integrated better into development planning and policy
- HIV/AIDS response must be evidence-based, with priorities matched to local epidemic conditions
- Government, private sector, civil society, NGOs, and communities ALL have important roles
- Monitoring & Evaluation: essential, but neglected
The guiding principles of the World Bank Global HIV/AIDS Program of Action

- Strengthening strategic, prioritized national planning
- Accelerating implementation
- Building monitoring and evaluation capacity and systems
- Increasing analytic work to improve HIV/AIDS knowledge and its use
- Working closely with partners for stronger, harmonized response and impact
Roles of parliamentarians

Leadership
- “Break the silence”
- Meet with PLWA
- Empower all constituents
- Be daring: work with youth & stigmatized
- Take the long view

Budget & planning
- Ensure AIDS in PRS’s
- Fund health and staff
- Donor harmonization

Gov’t oversight
- Hold accountable for implementation
Roles of parliamentarians (cont.)

Legislation

- Support new coordination structures
- Revisit labor laws and practices
- Ensure rights & confidentiality of PLHA
- Ensure rights of women, youth, migrants, disenfranchised
- Reform taxes on condoms & key inputs
Special role of donor parliaments

- Ensure aid supports the “Three Ones”
- No flag-planting; joint efforts vital now
- Don’t expect money to solve everything
- Don’t make short term enemy of long
The world can afford to give far more

Average daily cost of antiretroviral drugs: $1.25

Average daily subsidy per European cow: $2.50