



## ISSUE BRIEF HIV/AIDS



### South Asia Region (SAR) **Maldives**

The Maldives took action against HIV/AIDS before the first domestic case was reported in 1987 and, as a result, has so far kept the threat to a minimum. The country has seen a decrease in new infections. With few resources currently required for treatment, the Maldives has the opportunity to focus on better understanding risk factors, such as sexual practices and drug use and accessibility to health services, and translating this knowledge into improved action in the ongoing HIV/AIDS program.

#### HIV/AIDS in South Asia

Over 7.4 million people in Asia are living with HIV/AIDS, comprising nearly one fifth of the world's HIV infections, according to UNAIDS. Almost two thirds of those infected are living in India. However, high-risk behaviors and infection rates are growing in most other South Asian countries. Unless vigorous and timely action is taken, these countries run the risk of experiencing the devastating social and economic impacts of the kind of full-blown AIDS epidemics seen elsewhere in the world. There is still a window of opportunity to act to prevent this situation in South Asia.

#### STATE OF THE EPIDEMIC

The number of HIV/AIDS cases among Maldivian citizens and others living in the Maldives is less than 100, according to UNAIDS estimates. The major mode of HIV transmission in the country appears to be heterosexual sex.

#### RISK AND VULNERABILITY

- **Mobility:** Many Maldivian citizens go abroad for education and work and are away from their families for long periods of time. More information is needed on the risk behaviors that these citizens may engage in while they are away from the support of their families.
- **Sexual Practices:** High rates of divorce and remarriage in the Maldives create exposure to large sexual networks capable of transmitting HIV and other STDs. Since HIV symptoms often do not appear for many years, people who are unaware that they are infected may infect many of their serial spouses and casual sex partners.
- **Drug Use:** Drug-related arrests have increased 40 times from 1977 to 1995 in the Maldives, most likely paralleling an increase in drug use. Drug use is a risk factor for HIV/AIDS for two reasons: drug users who are unable to afford their daily doses may resort to selling sex to earn money, and injecting drug users may share contaminated needles (although injecting is not currently the main mode of taking drugs in the Maldives).
- **Dispersed Population:** Maldivians inhabit 200 of the 1,200 islands that make up their country. This dispersed population creates barriers to educating people on HIV/AIDS, distributing condoms, and treating people for STDs that increase

transmission of AIDS. A UN study in 2000 revealed that in the smaller islands 55 percent of the population have no radio, and 86 percent have no television in the home. Many small islands have no bookstore, and access to newspapers is irregular.

- **Tourism Employment:** The Maldivian tourist economy employs about 5,000 immigrant workers, mainly from India and Sri Lanka. These workers, far from their support systems, families, and usual sexual partners, are vulnerable to participating in high-risk behaviors such as sex without a condom and sex with commercial sex workers. More research is needed to better understand the risk behaviors of immigrant workers and to tailor existing HIV/AIDS programs to their needs without introducing stigma against foreigners.
- **External Tourism:** In 1998, almost 400,000 tourists visited the Maldives, one and a half times the entire population of the Maldives. Although sex tourism is not present in the Maldives, the great influx of people from all over the world represents a potential route of introduction of HIV and high-risk behaviors such as injecting drug use and unsafe sex.

### **NATIONAL RESPONSE TO HIV/AIDS**

**Government.** The Maldives started its AIDS Control Program in 1987, four years before the first domestic HIV case was reported. The Program is coordinated by the National AIDS Council, a multisectoral body with representatives from various ministries and NGOs. Activities include public education, peer education, awareness creation workshops, blood-product screening, and care of HIV/AIDS patients. Condoms are widely accessible on main islands, and nearly 99 percent of all households are aware of HIV/AIDS. The government carries out a high level of screening, including mandatory screening of all its citizens when they return from an overseas stay of more than a year.

**Nongovernmental Organizations (NGOs).** UNDP reports that there are few NGOs in the Maldives. Those that are active have provided educational services such as weekly radio programs, peer education, and seminars.

**Donors.** WHO and UNFPA have provided funding and technical assistance for HIV/AIDS awareness and prevention programs. The Government of Italy, through UNDP, is funding a drug abuse-prevention program. The UN Theme Group on HIV/AIDS carried out a situational analysis of the HIV/AIDS in the Maldives in order to increase the multisectoral response.

### **ISSUES AND CHALLENGES: PRIORITY AREAS**

- **Maintain Multisectoral Commitment.** The challenge for the Maldives will be to avoid the complacency that can often follow early success. The Maldives will need to maintain and further strengthen its multisectoral commitment to HIV/AIDS prevention, expanding it, for example, to include the tourism and shipping industries. Only by continuing to involve all sectors will activities sufficiently reach smaller islands.
- **Increased Research.** More research is needed to better understand risk factors such as drug use, serial monogamy, and the pattern of male-to-male sex. Once more is known about these behaviors, increasingly effective prevention programs can be developed.
- **“Travel Safe.”** The Maldives can help its citizens, tourists, and immigrant workers design personal plans to keep themselves safe from HIV and other STDs while away from their homes. The process of preparing a personal safety plan helps make the abstract concepts of the HIV/AIDS epidemic more concrete and of personal significance. These plans can help avoid the threats to physical and mental health that result from being away from support systems for long periods of time.

- **Decrease Crosscutting Vulnerabilities.** Vulnerable groups, such as poor people and women, have less access to health services. Tackling this broader problem will help the Maldives improve its overall health status as well as keep the number of HIV/AIDS cases in check.

#### **WORLD BANK RESPONSE**

The government of Maldives has not requested funding or technical assistance on the topic of HIV/AIDS from the World Bank.

All dollar figures are in US dollar equivalents.

**June 2004**

For more information on World Bank assistance to Maldives, please visit:  
<http://www.worldbank.org/mv>

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