A Region at Risk

More than 6 million people in South Asia are living with HIV/AIDS. Four of every five of those infected live in India. High-risk behaviors and infection rates are growing across the region. Unless vigorous and timely action is taken, some South Asian 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, and all countries will have large vulnerable populations affected. There is still a window of opportunity to act to prevent this situation in South Asia.

In India around 5.1 million people are infected with HIV. Although the rate in the population at large is still low, in absolute numbers India has one of the largest HIV-positive populations in the world. The epidemic has already advanced into the generalized state (prevalence rate of higher than 1 percent among women attending ante-natal clinics in 1993) in seven of India’s 28 states.

Other countries in the region, such as Bangladesh, Pakistan, and Nepal, are characterized by a low prevalence among the general population, but have significantly higher rates among subpopulations that are engaging in high-risk behaviors, such as injecting drugs with contaminated needles and engaging in the selling and buying of sex. Furthermore, the size of subpopulations engaged in high-risk behaviors is extensive, increasing the threat of a rapid spread of infection.

The South Asia Regional Response

To enhance the response and more effectively meet regional HIV/AIDS challenges, a regional action plan was agreed on in October, 2004. The action plan aims to draw fully on the Bank’s comparative advantages—the Bank’s convening power, multi-sector engagement with client countries, linkages with health reform and health systems development, strategic economic and analytical work, and experiences with implementation and institutional arrangements. A regional multisectoral HIV/AIDS team has been established.

The World Bank in South Asia’s sectoral teams are preparing specific contributions to the enhanced regional agenda for HIV/AIDS, and
identifying ways in which different sectors can coordinate more closely. The main thrust of the South Asia regional response is to:

- focus on high-impact preventive services targeting people at high risk
- influence the multi-sector determinants to create an enabling environment, facilitate and reinforce safe practices, and de-stigmatize HIV/AIDS; and
- support country specific approaches, taking into account the dynamics of the epidemic in each country and the high level of risk and vulnerability throughout the region.

The World Bank’s Strategy for South Asia

The World Bank's Strategy for South Asia through 2006 has three essential elements. First, the Bank aims to mobilize countries to improve and accelerate the response to HIV/AIDS. Second, the Bank supports countries in their efforts to slow the spread of the disease. Finally, countries receive Bank support for the treatment and care for those already living with HIV/AIDS. The Bank works with countries in a variety of ways—through lending, advice and analysis assistance, as well as help with capacity building.

The World Bank is assisting national programs which are working to prevent the further spread of HIV/AIDS among highly vulnerable subpopulations, as well as among youth and the general population in South Asia. The Bank encourages promotion of political and societal commitment at all levels to generate a supportive environment and actions for effective HIV/AIDS responses. Assistance is utilized by government agencies; civil society organizations, including nongovernmental organizations (NGOs) and community-based organizations (CBOs); and the private sector. The Bank supports community mobilization and community-based interventions that enable open discussions about HIV/AIDS, reduce stigma, and help prevent discrimination. It also supports the government and private organizations, such as NGOs, by providing training, supporting better management of HIV/AIDS programs, and helping them prioritize prevention and care efforts.

In addition to country-level support, the Bank also engages the South Asian countries at the regional level by facilitating dialogue between countries to share lessons learned and good practices of intervention and research strategies and by supporting cross-country collaboration to tackle issues such as migration and trafficking.

There are significant structural and socioeconomic factors which put South Asia at risk for a full-blown AIDS epidemic.

- More than 35 percent of the population lives below the poverty line;
- Low levels of literacy;
- Porous borders;
- Rural to urban and intrastate migration of male populations;
- Trafficking of women and girls into prostitution;
- High stigma related to sex and sexuality;
- Structured commercial sex and casual sex with non-regular partners;
- Male resistance to condom use;
- High prevalence of sexually transmitted diseases (STDs);
- Low status of women, leading to an inability to negotiate safe sex.

HIV/AIDS is a challenge that goes beyond the health sector. What is needed is the strategic involvement of all sectors—poverty reduction, education, transport and roads, urban and rural sectors, gender, social development and public health.

learn more at www.worldbank.org/saraids
To date, World Bank financing for national HIV/AIDS control programs and projects in South Asia amounts to a total of about US$380 million.

**World Bank Support for National HIV/AIDS Prevention Programs**

**The main components of the projects include:**
- Focused prevention for highly vulnerable subpopulations, through service delivery and community mobilization and empowerment;
- Interventions aimed at increasing knowledge and reducing stigma among the general population;
- Management and prevention of sexually transmitted infections;
- Strengthening surveillance systems and monitoring and evaluation;
- Improving blood safety;
- Care and support to people living with HIV/AIDS, including treatment of opportunistic infections;
- Promoting and sustaining political and societal commitment and leadership to fighting HIV/AIDS;
- Strengthening public and private institutions for a multisectoral response.

**Capacity Building and Other Support**

In collaboration with the World Bank Institute's AIDS Leadership Program, the South Asia Human Development Unit in the World Bank initiated a learning program specifically designed for individual countries and the South Asia region.

- Fighting HIV/AIDS through Strategic Communications, Regional Workshop for journalists and HIV/AIDS practitioners, Colombo, Sri Lanka, March 2003

Other non-lending activities in South Asia largely involve policy and strategy dialogue, technical and economic advice, and advocacy to spur countries to act promptly and effectively against the threat of HIV. The Bank has assisted countries in developing strategies for tackling HIV and has mobilized technical advisory services, which focus on capacity building and training, sharing of knowledge, best practices, and lessons learned. Major analytical work and technical notes include:

**The World Bank fights HIV/AIDS**

World Bank HIV/AIDS Portfolio
- Africa Multi-Country HIV/AIDS Program (MAP): 30 active projects with a total commitment of US$1 billion
- Caribbean Multi-Country HIV/AIDS Program (MAP): 8 active projects with a total commitment of US$ 155 million
- Non-MAP HIV/AIDS Projects and HIV/AIDS Components: 34 active projects with a total commitment of US$ 620 million

**South Asia**
- In 1992, the World Bank has committed US$380 million to support national HIV/AIDS control programs in South Asia
- Five active projects in Bangladesh, Bhutan, India, Pakistan, and Sri Lanka

**Main Project Components:**
- Focused prevention for highly vulnerable subpopulations, through service delivery and community mobilization and empowerment
- Interventions aimed at increasing knowledge and reducing stigma among the general population;
- Management and prevention of sexually transmitted infections
World Bank HIV/AIDS Programs and Projects

<table>
<thead>
<tr>
<th>Country</th>
<th>Project</th>
<th>Year</th>
<th>US$ (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bangladesh</td>
<td>Health and Population Program</td>
<td>1998-2003</td>
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<tr>
<td>Bangladesh</td>
<td>HIV/AIDS Prevention Project</td>
<td>2001-2005</td>
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<tr>
<td>India</td>
<td>First AIDS Control Project</td>
<td>1992-1999</td>
<td>84</td>
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<tr>
<td>India</td>
<td>Second HIV/AIDS Control Project</td>
<td>1999-2004</td>
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<tr>
<td>Pakistan</td>
<td>Social Action Program II</td>
<td>1998-2003</td>
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<tr>
<td>Pakistan</td>
<td>HIV/AIDS Prevention Project</td>
<td>2003-2007</td>
<td>36</td>
</tr>
<tr>
<td>Sri Lanka</td>
<td>Health Services Project</td>
<td>1996-2002</td>
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<tr>
<td>Sri Lanka</td>
<td>HIV/AIDS Prevention Project</td>
<td>2002-2006</td>
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<td>Bhutan</td>
<td>HIV/AIDS and STI Prevention Project</td>
<td>2004-2009</td>
<td>6</td>
</tr>
</tbody>
</table>

*100% Grant, **25% Grant

- Strengthening surveillance systems and monitoring and evaluation
- Blood safety
- Care and treatment for people living with HIV/AIDS
- Promoting and sustaining political and societal commitment and leadership to fighting HIV/AIDS
- Strengthening public and private institutions for a multisectoral response

World Bank’s Comparative Advantage

- Convening power across high level policy makers in different sectors and regional levels
- Mobilizing resources
- Linking HIV/AIDS prevention and care to health sector reforms and health systems development
- Linking HIV/AIDS into Bank support for sectors other than health through lending operations (roads, education, poverty reduction and economic management, and rural development)
- Conducting strategic economic and analytic work
- Strengthening management of the national programs and other existing institutions
- Helping clients move from strategy to implementation
- Bringing world wide experience to assist clients in implementing and understanding effective interventions

<table>
<thead>
<tr>
<th>Country</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
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