



# Joining Hands

FIGHTING HIV/AIDS



THE WORLD BANK  
IN South Asia

# Number of people infected with HIV\*

Afghanistan	250
Bangladesh	13,000
Bhutan	100
India	4,500,000
Maldives	< 100
Nepal	62,000
Pakistan	70,000
Sri Lanka	5,000

\*Numbers are approximate, based on UNAIDS estimates.

The battle against HIV/AIDS will not be won with money, though money is critical. It will not be won through political campaigns or moral tolerance, though both are fundamental. Our chances of victory are only as strong as the people who are actively working to prevent the spread of this merciless epidemic, and to support those whom it has already hit.

It is the hands that do the research and the testing and prescribe the medicine on a daily basis that are truly fighting the battle. It is the hands that hang the posters, distribute the leaflets, bang on the doors and write the stories. It is the hands that hold the babies, comfort the dying, and clasp the shoulders of those most at risk—people typically shunned by the rest of society.

It is to these courageous and compassionate people that we dedicate the following pages. We are humbled by their efforts, and we are grateful to be able to provide support, whether through financing or the sharing of knowledge and information.

HIV/AIDS is an epidemic which affects entire societies. It has already gained a foothold in South Asia, putting the region at risk of experiencing the devastating economic and social destruction of the kind seen elsewhere in the world. There is still time to prevent this, but it will require all available resources and cooperation from all of us in the fight. The people in this book are struggling to stay ahead of the game. They are working to protect not only those who are at high risk right now—but all of us who live and work in the region.

Their leadership gives us cause for hope.

## **Praful Patel**

Vice President, World Bank South Asia Region

“We must address rights  
if we want to prevent HIV/AIDS.”

“ I feel proud to work by the side of another woman, though she has missed all of life’s opportunities and has been marginalized at the brink of society. This job has given me an immense opportunity to do something for her.

As a frontline staff member of a sex worker intervention program and as a conscious citizen of Bangladesh, I have a significant role to play in preventing the transmission of HIV/AIDS. In particular, I believe that only by making people aware of their rights and empowering them, can we fight against the epidemic.

In Bangladesh the disease is still hidden. We have to work hard to create an enabling environment so that those who are living with HIV/AIDS are not afraid to seek care and support. Meaningful political commitment is essential if we are going to make any progress in reducing stigmatization and discrimination. ”



## Lucy Khanam Program Officer, CARE Bangladesh

Lucy Khanam works with people who are currently at the greatest risk for contracting HIV/AIDS, such as sex workers and injecting drug users. She helps raise awareness, conducts training of peer educators, and organizes and participates in HIV/AIDS advocacy at the local level. Her organization, CARE Bangladesh, is a primary partner in the HIV/AIDS surveillance work being undertaken by the Government of Bangladesh with financing from the World Bank, the British Department for International Development, and the United States Agency for International Development.

“I feel honored to be part of  
the second-generation HIV  
surveillance in Bangladesh.”



“ Being the coordinator of this project, I have the responsibility to ensure smooth running of all field activities including quality control of sampling, and supervision of a ten-member field team, and to maintain liaisons with a wide range of NGOs working in the field of HIV/AIDS in Bangladesh.

In the Southeast Asian region, Bangladesh is often noted for its strong and active HIV surveillance system, and we have provided technical support to many countries for strengthening their own systems.

It is heartening that the Government of Bangladesh has established the National AIDS/STD Program to take the lead role in combating HIV/AIDS in Bangladesh, and a lot of NGOs and community organizations are working on HIV awareness campaigns. However, a lot still needs to be done. ”

## Dr. Md. Shah Alam

Coordinator, HIV/AIDS serological surveillance project, Bangladesh

Dr. Alam works at the International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B) which is conducting the country's national HIV/AIDS sero-surveillance program. His work has produced critical information needed for Bangladesh to address the growing epidemic within its borders, including determining the HIV/AIDS prevalence for different demographic, occupational and behavioral groups, and tracking the knowledge and practices of these groups. Technical assistance for the surveillance work has come from the HIV/AIDS Research and Welfare Center and Family Health International. Funding was provided by the World Bank, the British Department for International Development and the United States Agency for International Development.

“Everyone in society has a  
genuine responsibility  
to play a role.”

“ As Buddhist monks, our main aim is to make humanity free from suffering. In addition we lead others to free themselves from suffering. And so we help patients without regard to the illness, whether that illness is AIDS or not. Infections and other diseases are not new to society. Thus people who are infected with HIV should not be discriminated against, despite the fact that the means of transmission is quite different from other ailments.



The Interfaith Consultation Program on HIV/AIDS was a significant event for us to apprehend the real threat and nature of the disease. This program drew the attention of participants towards the social impact of HIV/AIDS rather than its physical effects. This was an aspect we had previously ignored. ”

## Dr. Nambriththankadawara Gnanarathana Thero

Buddhist Monk, Sri Lanka

The Venerable Dr. Gnanarathana was among 19 religious leaders from Sri Lanka who participated in a week- long training program and seminar held in March, 2004 in Chiang Mai, Thailand. The event brought together leaders from the Hindu, Buddhist, Christian and Muslim faiths to learn about the role they could play in HIV/AIDS prevention and care.

The program was organized by Thailand’s Sangha Metta project, a Buddhist organization involved in HIV/AIDS activities. Sri Lanka and Thailand have similar religious demographics, with Theravada Buddhists making up the vast majority, but with other major religions also well-represented. Funding for the course came from the Sri Lanka National HIV/AIDS prevention project which is financed by the World Bank.

“I am proud and happy  
to be the face of the  
epidemic in India”

“ India is sitting on an HIV/AIDS time bomb. The situation is very alarming, but still the epidemic does not seem to be on anybody’s priority list. My role in the larger positive peoples’ network is very, very important because I am bringing the issues of the community right to the doorstep of the government and the policy makers who really don’t seem to be doing enough to control the epidemic. Unlike in other countries, the disease is still underground in India, thanks to the stigma that gets attached. Unfortunately there is not much information on living with HIV, and hence I am looked upon as a role model, which helps build the much needed trust and confidence in others that there is life even after the infection. ”



## Manoj Pardesi

Vice President, Indian Network of Positive People and President, Maharashtra Network of Positive People, India

Manoj Pardesi dedicates most of his waking hours to helping HIV-Positive people lead healthy, productive lives in India’s western state of Maharashtra. He supports programs that teach life skills to Positive people and support skills to their families. He manages a home-based care project and is working to establish a Positive speakers’ bureau. Manoj also works to raise awareness in women’s and youth groups.

Under his presidency, the Maharashtra Network of Positive People has received financial support from the Maharashtra State AIDS Control Society to develop district level networks of Positive people. Nine such networks have been established so far. The Society’s funds are provided by India’s National AIDS Control Organization, which is financed by the World Bank. Strengthening HIV/AIDS programs at the state level is an important part of India’s efforts to combat the epidemic.

“Through my own testimonial  
counseling I provide  
hope to people.”

“ People with HIV are not bad people, and unlike what most think, infected people are still productive. In spite of 17 years of infection I have been living a productive, happy family life. The Indian AIDS situation is very alarming and, without the full involvement of Positive people, prevention and control of the disease will just not occur. Since the AIDS vaccine remains a distant dream, behavioral change is the only solution.



For the last five years I have been fighting for the rights of infected people—to ensure that they are not discriminated against and that they get access to the best treatment. In the last few years, I think the situation has changed for the better in India but still a lot needs to be done for the greater involvement of people living with HIV/AIDS, if the epidemic is to be controlled. ”

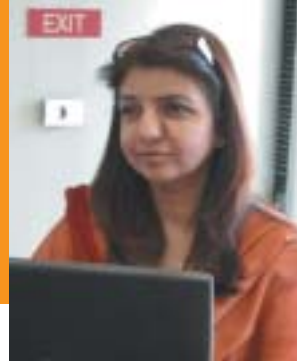
## Elango Ramachandran

Founder and Treasurer of Indian Network of Positive People, and President, Karnataka Network of Positive People, India

Elango Ramachandran is one of India’s strongest advocates for the rights of people who are HIV-Positive. He is a resource person on the issues of anti-retroviral drug therapy, and HIV/AIDS Information, Education and Communications activities. He works closely with the Karnataka State AIDS Control Society, which has provided his organization with grant money to run a drop-in and counseling center for vulnerable and Positive people. These activities will soon be expanded to six districts in the state. The Society’s funds are provided by India’s National AIDS Control Organization, which is financed by the World Bank.

“I know Pakistan cannot afford  
the burden of this pandemic”

“ Our region is characterized by gender inequality, taboos surrounding sex and sexuality...and a pervasive culture of silence. Writing about HIV/AIDS here is a rather daunting task, but I do so every chance I get, and I work hard to give my stories a human face. I feel that the more that is written about it, the more acceptance will be built in people. ”



## Huma Khawar

journalist / development consultant Pakistan

Huma Khawar was one of 55 journalists and health project leaders from South Asian countries who attended a World Bank-sponsored workshop, Fighting HIV/AIDS Through Information and Strategic Communication, held in March, 2003 in Colombo, Sri Lanka. The participants learned how to use communication to help prevent the spread of HIV/AIDS and also to discourage the social stigma faced by those already infected.

Their trainers included medical specialists, international journalists and HIV-positive advocates. According to Huma, the workshop was “a resounding success” and she and her colleagues managed to initiate a Yahoo group that is still alive, with members posting stories and keeping everyone informed of the latest news and events. In order to share the lessons of the workshop with others, they also organized an inter-active training event for the print and electronic media.

The workshop was part of the AIDS Leadership Program of the World Bank Institute and participant expenses were covered by the Sri Lankan Government, UNICEF, UNFP, UNDP, and the Commonwealth Broadcasting Association. The World Bank sponsored Huma and other South Asian journalists to attend the XV International Aids Conference in Bangkok, Thailand.

# “World Bank staff and their family members are not AIDS-proof”

“ Our staff members tend to think ‘We are OK. We know how to protect ourselves’. But our HIV/AIDS workshop taught most of them things they didn’t know. Afterwards, they said they liked the fact that we spoke frankly—because their children were sitting beside them, and this is not a subject many of them feel comfortable discussing at home.



HIV/AIDS is certainly capable of advancing and becoming the number one cause of death amongst the young population in Nepal. And that will devastate our country. This is not just a health problem that affects some people—it is a problem for every one of us. And we all have to fight it together at every level. ”

## Tirtha Rana

Senior Health Specialist  
The World Bank, Nepal

Tirtha Rana believes that nobody should be ignorant of HIV/AIDS. As the World Bank’s resident health specialist in Nepal, she recently organized a workshop entitled HIV/AIDS at the Workplace for the staff of the World Bank Kathmandu office and their family members. She told them how they could seek confidential testing and counseling. She brought them speakers from the local UN clinic so they could learn the medical facts, and she brought them speakers who were HIV-Positive so they could learn how to relate to the issue on a personal level.

At the macro level, Tirtha is working with the government and other donors to encourage a unified, sector-wide approach to improving Nepal’s health system—the most effective way the country can fight the HIV/AIDS epidemic.

“Women need to be educated  
and empowered—not just made  
aware of preventative measures.”

“ We asked women we were working with what their dream was in terms of the help we could provide, and most of them said “better reproductive health”, and some of them came up with “Combating HIV/AIDS” as, even if it is not yet a major problem here, the threat is growing and they thought HIV/AIDS education would help them and their community to be safe. ”



## Usha Jha

Chief Executive Officer, PACT (Samjhauta) , Nepal

Usha Jha was working for the Women’s Empowerment Program in Nepal when she found a way to marry HIV/AIDS education with literacy work. The program had been helping women mobilize, establish savings and loan groups, start small businesses—and learn to read. When a group of these women asked for reproductive health and HIV/AIDS education, Usha and her colleagues developed a proposal for the World Bank Development Marketplace which provides grant funding for innovative development ideas. Usha’s proposal was among the winners, and she was able to deliver HIV/AIDS education to 2500 women. The learning was made more effective by the fact that Usha had already taught the women to read, and they were eager for new knowledge.

The women are now creating an environment where they are able to negotiate safe sex and where there is a support structure to help identify HIV/AIDS cases and assist with medical referrals. Some groups have created emergency support funds for family members of the infected and have encouraged them not to pull their girls out of school—typically the first impact of an unexpected economic burden on a poor family.

Usha is looking for funding to expand her pilot project.

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