The World Bank and HIV/AIDS: Increasing Access and Equity

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Private Sector Partnerships

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People Living with HIV/AIDS, Globally
1992-2004

People Infected (millions)

Sources: Mann, Tarantola, & Netter, 1992; UNAIDS, December 2004

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Adults and Children Newly Infected with HIV during 2004

- Sub-Saharan Africa: 3.1 million
- Eastern Europe & Central Asia: 210,000
- North Africa & Middle East: 92,000
- Caribbean: 53,000
- Latin America: 240,000
- South & South-East Asia: 890,000
- East Asia: 290,000
- Western & Central Europe: 21,000
- North America: 44,000
- Oceania: 5,000

Total: 4.9 million

Sources: UNAIDS, December 2004
HIV/AIDS Affects All Stakeholders

**Macroeconomy**
- ↓ investment
- ↓ return on investment
- ↓ growth
- ↑ poverty & inequality

**Public sector**
- ↑↑ health spending
- ↓ human capacity
- ↓ fiscal capacity

**Private sector**
- ↑ costs and benefits
- ↓ productivity
- ↓ average experience

**Households/Cmty**
- loss of labor/assets
- loss of savings/income
- ↓ investment in kids
- ↑ number of orphans
- loss of social capital

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The World Bank
# HIV/AIDS Affects All Sectors

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<thead>
<tr>
<th>HEALTH</th>
<th>AGRICULTURE</th>
<th>PRIVATE SECTOR</th>
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<tbody>
<tr>
<td>Stretched due to rising AIDS cases TB, death of personnel etc.</td>
<td>Death of farm workers decrease in agricultural output.</td>
<td>Increased costs in training, insurance, benefits, turnover, Absenteeism. Decreased revenues.</td>
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<tr>
<th>EDUCATION</th>
<th>INFRASTRUCTURE, TRANSPORT &amp; MINING</th>
<th>ECONOMIC IMPACT</th>
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Multi-Country HIV/AIDS Program (MAP) for Africa

- US$1.5 billion committed to National AIDS Coordinating Authorities (NACs)
- Strengthen national mechanisms
  - 38 countries have National Councils & procedures
- Stimulate action by public sector
  - Malawi: Comprehensive treatment program for HIV/AIDS and TB
  - Eritrea: sex by students down from 9% to 2%
- 30,000 civil society subprojects funded
  - Large share at community level
World Bank Programs

- Africa and Caribbean MAP
  - Africa: $1.1 Billion, 29 Countries, 3 Subregional Programs
  - Caribbean: $118 Million, 9 Countries, 1 Regional Program

- Other Regional HIV/AIDS work
  - East Asia & Pacific: 4 countries, $43.7 Million
  - Eastern Europe & Central Asia: 4 countries, $190.7 Million
  - Middle East & North Africa: 1 country, $6 Million
  - Latin America: 4 countries, $126.8 Million
  - South Asia: 5 countries, $274.7 Million
World Bank Regional
HIV/AIDS Work

• East Asia & Pacific
  – China Health IX
  – China Disease Prevention
  – China TB Control
  – Vietnam Blood Transfusion
  – Cambodia Health Sector
  – Indonesia Safe Motherhood
  – Thailand Social Investment
  – Eastern Europe & Central Asia
  – Moldova
  – Bulgaria Health Sector Reform, Ukraine TB, HIV Control
  – Russian Fed. TB, HIV Control
  – Middle East & North Africa
  – Djibouti

• Latin America
  – Brazil AIDS/STD Control
  – Honduras Health Systems Reform
  – Mexico Basic Health
  – Venezuela Caracas Metropolitan Health Services

• South Asia
  – Bangladesh Health & Population
  – Bangladesh AIDS Prevention
  – India Maharashtra Health System
  – India AIDS Prevention
  – India UP Health Systems
  – Sri Lanka Nat’l AIDS Program
  – Pakistan HIV Prevention

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World Bank/Private Sector:

At the global and regional level:

- Designing mechanisms within NACs to engage private sector in national agenda
- Providing institutional support for building business coalitions
- Forging partnerships with global corporations to scale up treatment
- Identifying good practices and promoting replication in other companies and countries (Unilever, AngloAmerican, BP, Coke, etc.)
The Wake-up Call

- Heineken in Rwanda
- Anglo American in South Africa
- DaimlerChrysler in South Africa
- Electric Company SNELS - in Congo
Public/Private Projects (funded through MAP)

Ethiopia – 55 awareness raising sessions conducted with 11,460 people and 14,000 employees of SMEs supported for VCT

Kenya – over 200 companies and 3000 employees participated in peer education programs

Cameroon – 33 of the largest companies have received grants to implement comprehensive programs including education, advocacy, testing, treatment and care

Malawi – prevalence surveys and education programs were supported in several global companies

Ghana – 36 companies received funding to work in partnership with NGOs to implement HIV/AIDS programs
## The Treatment Challenge

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<tr>
<th>Region</th>
<th>Need Treatment</th>
<th>Receiving Treatment</th>
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<td>L. Amer.</td>
<td>370,000</td>
<td>247,000 (67%)</td>
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<tr>
<td>Mid. East</td>
<td>7,000</td>
<td>3,000 (43%)</td>
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<tr>
<td>Eur/Asia</td>
<td>80,000</td>
<td>7,000 (8.7%)</td>
</tr>
<tr>
<td>E. Asia</td>
<td>1,000,000</td>
<td>43,000 (4.3%)</td>
</tr>
<tr>
<td>Africa</td>
<td>4,100,000</td>
<td>100,000 (2.4%)</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>5,557,000</strong></td>
<td><strong>409,000 (7.4%)</strong></td>
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Estimated Resource Needs versus Estimated Resources Available

Source: UNAIDS, 2004
AIDS has become a multimillion dollar business

- PEPFAR (Bush Fund, USAID/CDC)
- European Union
- Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM)
- World Bank (MAP, TAP)
- Clinton Foundation
- Bilateral Aid
- Multilateral Aid
Is AIDS a good proxy?

• Is the global debate on health and pharmaceuticals reflected in the challenges of HIV and treatment? (Nigeria)
  – 5% of Nigerians are HIV-positive
  – Target of 200,000 people on treatment by 12/05 – currently 15,000 only
  – 100 VCT counselors currently working
  – To meet target, must test 35,000/day each
  – 25 health centers treating up to 15,000 each
Comprehensive Package of Care and Support

Socioeconomic Support
- Micro-credit
- Nutritional support
- Orphan support
- Home-based care

Medical Care
- STI management
- PMTCT
- TB case finding
- Prophylaxis & treatment of Other OIs
- ARV treatment
- Palliative care

Psychosocial Support
- VCT
- Follow-up counseling

People and Families Affected by HIV/AIDS

Adapted from FHI
Major Challenges to Drug Access (today and in the future)

- Cost of treatment
- Rational selection of drugs by health sector
- Inadequate health care infrastructure
- Distribution and Administration
- Rational drug use by providers & clients
- Political Commitment
- Ethical considerations about rationing scarce drugs
What about tomorrow?

- What is sustainable in terms of contributions from communities and the private sector?
- Role of activism, ethics, governance, investments?
- Artificial to divide developed and developing world (Iowa or Vietnam) – people who can’t afford drugs.
Is AIDS a good proxy?

- AIDS is not a “normal” health issue.
  - 11% immunization rate in Nigeria
- Are ethics and governance issues common within disease groups?
- What about impact on research?
- Is it a good model for global health system reform?
The future is not pre-ordained...it depends on how we respond to the HIV/AIDS epidemic.

The world’s tomorrow depends on what we, together, do about HIV/AIDS today.

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