Weaving the social fabric

THREE STRANDS OF AN INTEGRATED HEALTH-COMMUNITY RESPONSE TO HIV/AIDS

The WHO HIV/AIDS Programme
A continuing threat to the social fabric

Despite the efforts of dedicated individuals and organizations, the HIV/AIDS pandemic has become a human, social and economic disaster, with far-reaching implications for individuals and communities. Already HIV/AIDS is the leading cause of death in sub-Saharan Africa, and unless something is done now the pandemic will continue to over-run efforts to combat its spread. In Asia, more than 6 million people are infected – most of them in countries whose population size raises the spectre of suffering on a far worse scale than the world has witnessed hitherto. In Latin America and the Caribbean, high infection rates continue unabated, while the steepest increases are now occurring in some newly independent States and in eastern Europe. Today, more than 36 million people worldwide are infected with HIV, and another 22 million have already died.

In the most severely affected settings, HIV/AIDS is jeopardising human security, undermining economic development, and threatening to destroy the fabric of society. Historic improvements in life expectancy and child survival, painstakingly achieved over previous decades, are steadily being wiped out. Meanwhile, in more affluent settings, the fear of dying of AIDS has given way to a complacency that views HIV/AIDS as curable, or confined to specific groups. The threat of the emergence of highly drug-resistant strains of HIV as a result of the misuse of current combination therapies increases every day.

HIV/AIDS is not curable, but it is preventable and increasingly treatable. Tragically, people continue to be put at risk of HIV infection and of an untimely death from AIDS-related illness even though effective prevention and care interventions have been developed. The fact is, however, that in the face of crumbling health infrastructures and a lack of sufficient resources and coordination, the potential benefits of such interventions are not being delivered on a scale sufficient to contain – let alone reverse – the pandemic. No other disease has so dramatically highlighted the stark injustices and inequities in access to health care, economic opportunity, and the protection of basic human rights as HIV/AIDS.

Yet this is also a time of hope and possibility; hope because of the knowledge amassed through successful programmes, projects and research; possibility because of the unprecedented global political commitment to act decisively and mobilize substantial additional resources in order to do so. Failure to act now will come at a terrible cost – but we have a choice in this. A real opportunity is now available to redouble the global effort against this devastating pandemic, and to show what can be achieved by bold leadership and concerted action.

This brochure describes how WHO will contribute to the global effort against the pandemic by intensifying its own activities, and by providing support to national authorities as they seek to scale-up their responses to the HIV/AIDS challenge.
Stepping up the response

The WHO HIV/AIDS Programme

The face of the HIV/AIDS pandemic is changing. Every day brings increasing evidence that prevention efforts can and do work to halt transmission; that real advances in treatment offer opportunities for longer and better lives to those already infected; and that health systems and communities both have critical roles to play in prevention, care and support.

All these developments have important implications for WHO because its comparative advantages lie in the areas of scientific knowledge and technical expertise, and in its role in health-systems development. WHO is therefore intensifying its efforts, with particular attention being given to strengthening the health-sector response – as called for by governments at the World Health Assembly in 2000. WHO's newly established HIV/AIDS Department – part of the WHO Family and Community Health Cluster (FCH) – will spearhead and expand upon all HIV/AIDS-related activities throughout the Organization.

Three core principles that have long guided the global response to HIV/AIDS will remain central; namely, the need to respect human rights, address poverty, and improve the status of women. These principles are increasingly recognized as vital, especially as awareness grows both of the scale and impact of the pandemic, and of the interventions that are required to address it.

No comprehensive approach to prevention and care can succeed in the absence of well-functioning and well-resourced health systems. Equally important is the involvement of communities in reducing vulnerability and risk, identifying what works locally, supporting healthy behaviours, and providing care and support to all those in need, including the ever-growing numbers of orphans. WHO seeks to enhance the capacity of health systems and communities to deliver real change. However, the health sector cannot act alone in scaling-up the response to HIV/AIDS, and coordination and collaboration across sectors and between agencies and organizations will be a pre-requisite for success.

As a cosponsor of UNAIDS, WHO already works with a broad range of partners including United Nations agencies, Member States, and other organizations. The focus of WHO's activities within these partnerships is on providing normative guidance and supporting countries in three broad areas:

- knowledge about the scale and nature of the pandemic, and research on effective interventions to address it
- prevention of new infections
- provision of care and support to all those in need.

The weaving together of these three themes – which can be summarized as Improving Knowledge, Preventing Infection, and Providing Care and Support – represents a coordinated and integrated public-health response to HIV/AIDS, bringing together health systems and communities to halt the damage done to the social fabric.
Knowledge is vital: Surveillance of HIV/AIDS trends helps guide an effective response

Although HIV/AIDS is widely recognized as the fastest growing threat to human health and development, the task of accurately tracking the course of the pandemic is notoriously complex. Surveillance of the changing patterns of disease spread and of related behaviours is essential for programme development, implementation and monitoring. Without such knowledge, it becomes very difficult to identify the nature and dimensions of problems and their determinants, and to properly evaluate what works and at what cost in different settings. WHO provides technical and financial support to countries to improve the quality and completeness of data on HIV/AIDS, sexually transmitted infections, and related risk behaviours.

Knowledge brings hope: Quality research brings new approaches, new impetus and new hope

Research on new technologies and approaches to the prevention and treatment of HIV/AIDS has the potential to radically change the whole course of the pandemic. WHO provides direction and leadership for high-quality research and development in areas such as:

- Discovering effective ways of reaching young people with the information and services they need to protect themselves and others.
- Identifying the social and epidemiological factors that influence the success or failure of interventions.
- Improving and simplifying treatments based upon the current and next generation of antiretroviral compounds (ARVs) to increase their accessibility and affordability and bring maximum benefits to everyone.
- Creating and refining effective and affordable women-controlled barrier methods of protection against HIV/AIDS.
- Developing microbicides of proven efficacy against HIV and other infectious agents.
- Building upon the activities of the joint WHO and UNAIDS HIV-vaccine initiative, which offers guidance for ethical international vaccine development and recommends approaches that best serve the needs of developing countries.
- Developing and improving HIV/AIDS diagnostic tests.
Preventing the transmission of HIV must lie at the heart of any meaningful response to the pandemic. To achieve real success, prevention efforts must be targeted towards those whose age, lifestyle, or social and economic situation render them vulnerable to HIV infection. This requires meaningful partnerships between health and other sectors, and collaboration with civil society – including nongovernmental organizations, community-based groups, religious bodies, young people, people living with HIV/AIDS, and the media. WHO is strengthening its efforts in the following priority areas:

- Promoting and protecting the sexual and reproductive health of young people – WHO supports Member States in efforts to provide young people with the knowledge, life skills and services they need to protect themselves and others.
- Promoting safer and more responsible sexual behaviour (including the use of male and female condoms) remains the core prevention strategy for reducing the transmission of HIV and other sexually transmitted infections.
- Accelerating access to high-quality and affordable services for people with sexually transmitted infections, especially young people.
- Preventing mother-to-infant transmission of HIV – WHO sets standards in this area, and supports the implementing of safe and effective interventions for women and their infants.
- Preventing HIV infections resulting from injecting drug use is a growing priority in many parts of the world, particularly in central and eastern Europe, the newly independent States, and South-East and East Asia.
- Ensuring safe injection and surgical practices in the health-care setting.

Well-targeted, low-cost prevention strategies in all these areas are known to work. When vocal and innovative leadership is combined with strong community involvement real success is possible – and has already been demonstrated (Figure 1).

Reducing HIV infection among young people aged 15 to 24 is a key indicator of success. By 2005 prevalence in this age group must be reduced globally, and by 25% in the most affected countries; by 2010 prevalence in this age group must be reduced globally by 25%.
Improving quality of life:
Care and support reduce suffering and stigma and strengthen prevention efforts

Prevention, care and support are inseparable. The provision of good-quality care and support prolongs and improves the quality of life, and provides opportunities for HIV-prevention efforts. When HIV-positive people are treated with compassion and respect, not only are they more likely to act responsibly towards those around them, but they can also become powerful and credible advocates of HIV prevention. On the other hand, when the provision of care is undermined, or those affected by HIV/AIDS are stigmatized, the chances of success of preventive approaches recede.

In many parts of the world however, the absence of affordable drugs to treat HIV infection and AIDS-related conditions has resulted in enormous strains being placed upon health-care infrastructures. WHO therefore supports activities in the following priority areas:

- Providing voluntary counselling and testing (VCT). This is sometimes the only opportunity to reach out to those most likely to be affected by HIV/AIDS and should be totally voluntary and confidential. Offering VCT services in a broad range of health-care and other settings (for example maternal and child health facilities, STI treatment clinics, or community-based groups) increases the likelihood of them being used.

- Increasing care and support to those most directly affected by HIV/AIDS. This is best achieved through appropriate referral, and the provision of an effective continuum of care between home and the hospital. Such comprehensive care must include efforts to manage opportunistic infections in people living with HIV/AIDS; the treatment of associated conditions (such as tuberculosis); palliative care; and psychosocial support.

- Standardizing and simplifying the use of antiretroviral compounds (ARVs) to treat HIV infection, especially in resource-poor settings. Such advances are increasingly being viewed as an essential element of care and support.

The potential availability of treatments for HIV infection and for the opportunistic infections associated with HIV/AIDS brings into sharp relief issues of access to new technologies, the fair and equitable distribution of resources, and associated ethical and human-rights concerns. Whereas in some settings a new generation of drugs is fundamentally changing the ways in which the treatment of HIV infection is approached, elsewhere even the most basic physical and psychosocial support is lacking.

But it does not have to be this way. Empowering people through providing them with the knowledge of their own serostatus, reducing stigma, and involving and mobilizing those most directly affected by HIV/AIDS do not necessarily require great technological sophistication. Equally, providing effective and affordable services will also immeasurably improve quality of life for those living with HIV/AIDS, while contributing to a powerful and credible impetus for prevention efforts.
Twenty years into the HIV/AIDS pandemic, there are today grounds for hope. Prevention and care interventions have now been identified that have the potential to significantly alter the course of the pandemic. Although many such interventions have already been successful in a range of settings, all too often they have been isolated efforts, focused on single issues, and not replicated on a sufficiently large scale due to weak health systems and resource constraints. What has been lacking is a truly sustained effort to unify what is known into a coherent strategy at country level, while simultaneously boosting the capabilities of health-care systems to deliver change.

To address these issues, WHO has developed a comprehensive package of interventions which experience and research have shown could significantly reduce the incidence and impact of HIV/AIDS. This Essential Package of Prevention and Care (Box 1) is not intended as a blueprint, but as a guide to prioritization, which can be adapted to different settings and to a range of human, financial and other resource constraints. The aim is to start with what is feasible and to gradually build upon success, generating momentum for the implementation of more ambitious interventions. In this way the package of interventions can be tailored to meet the diversity of situations in countries with different social and economic climates and at different stages of the pandemic.

Elements of the Essential Package have the potential to bring about enormous benefits — especially when implemented in parallel with efforts to increase the capacity of the health sector. In addition, communities themselves must be meaningfully engaged in programme development, implementation and monitoring. WHO is therefore intensifying its technical support to countries, becoming more vocal in its advocacy for health-sector resources, strengthening existing partnerships and entering into new ones in order to guide a scaled-up and integrated health-sector response to HIV/AIDS (Box 2).

**BOX 1** An Essential Package of Prevention and Care

- Address the sexual and reproductive health needs of young people
- Promote safer and more responsible sexual behaviour
- Diagnose and treat sexually transmitted infections
- Provide voluntary counselling and testing (VCT)
- Prevent mother-to-infant transmission of HIV
- Promote interventions targeted at those particularly vulnerable to HIV infection, such as intravenous drug users and sex workers
- Ensure safe injection and surgical practices in the health-care setting
- Reduce the risk of HIV infection in health-care workers
- Ensure the supply of safe blood and blood products
- Treat opportunistic and concurrent infections
- Increase access to antiretroviral therapies

**BOX 2** Scaling-up the response to HIV/AIDS

In many of the hardest hit countries, addressing HIV/AIDS will require sustained increases in external support through poverty-reduction strategies, bilateral projects, sector-wide approaches and, where appropriate, emergency assistance. In support of this, WHO will intensify collaboration with its many partners, both within the international health and development network and within civil society. WHO will focus upon four strategic approaches in intensifying its actions globally and in support of country efforts:

- **High-level advocacy and strengthened partnerships at global, regional and country levels**, in collaboration with international development agencies and with the private sector to ensure that health is prioritized within the development agenda, using HIV/AIDS as an entry point for strengthening health systems and health-sector reform.
- **Identifying and disseminating guidance on effective interventions for prevention and care and their implementation in diverse settings.**
- **Strengthening the technical capabilities of WHO regional and country teams and mobilizing human and financial resources within countries in order to scale-up the health-system response and increase capacity for delivering essential prevention and care interventions.**
- **Promoting community involvement and building upon the skills and capacities of people affected by HIV/AIDS in order to reduce vulnerability and risk, identify what works locally, support healthy behaviours, and provide care and support to all those in need.**

In all of these endeavours, sustainability and success will depend critically upon the involvement of people living with HIV/AIDS, and upon the support given to communities in finding their own solutions to their own problems. We know what needs to be done. We know what works. As the real scale of the threat posed by the HIV/AIDS pandemic becomes ever more clear, the challenge we face is to turn that knowledge into action.