



# HIV/AIDS and Human Development

Oxford Human Development Course  
15 September 2006

Håkan Björkman



# Presentation in 3 parts

- Part 1: Overview of the HIV/AIDS epidemic
- Part 2: Human development ↔ HIV/AIDS
- Part 3: Responding to HIV/AIDS: Case of Thailand



# HIV = a nasty piece of work!

---

- A virus that attacks the immune system, causes opportunistic diseases, and death.
- Transmitted only by blood, semen and vaginal fluids:
  - Unprotected sex
  - Blood transfusions
  - Dirty needles
  - Mother to child at childbirth
- 5-12 years delay between infection and symptoms/death
- No cure, no vaccine
- Highly Active Antiretroviral Treatment (HAART) = keeps virus in check indefinitely (?)



# Global estimates for adults and children, 2005

---

- **People living with HIV** 38.6 million [33.4 – 46.0 million]
- **New HIV infections in 2005** 4.1 million [3.4 – 6.2 million]
- **Deaths due to AIDS in 2005** 2.8 million [2.4 – 3.3 million]

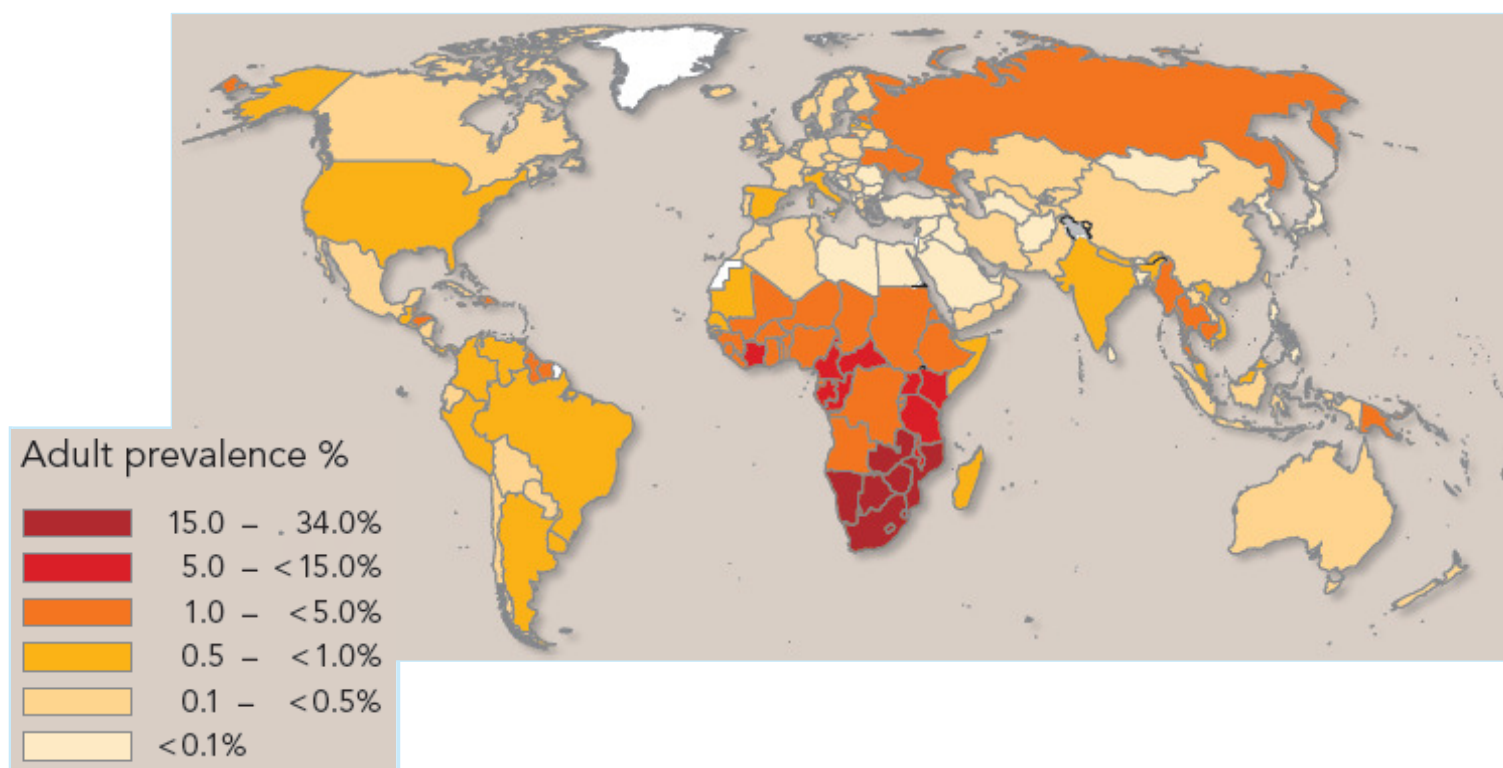
## Over 11 000 new HIV infections a day in 2005

---

- More than 95% are in low and middle income countries
- About 1500 are in children under 15 years of age
- About 10 000 are in adults aged **15 - 49 years**, of whom:
  - almost 50% are among women
  - over 40% are among young people (15-24)

## A global view of HIV infection

38.6 million people [33.4–46.0 million] living with HIV, 2005

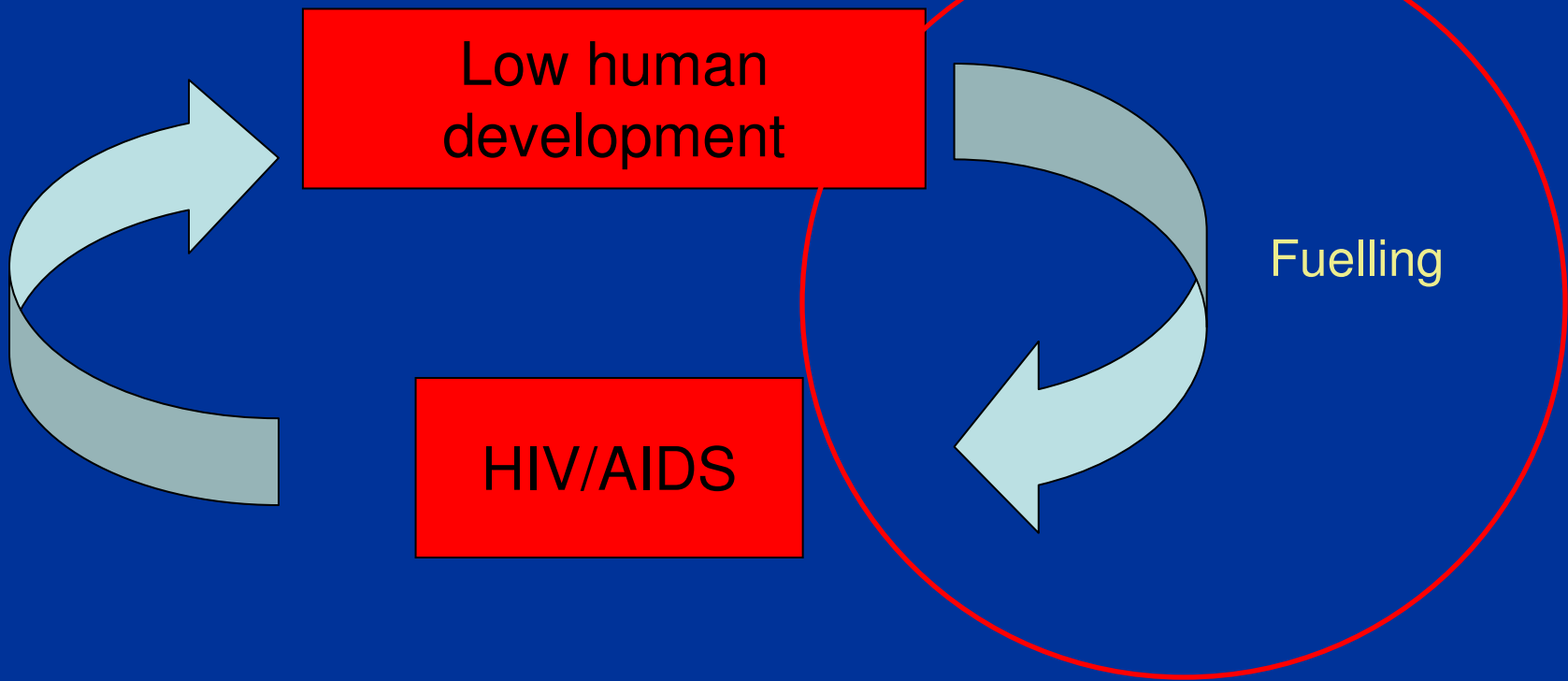




# Part 2

HIV/AIDS ↔ Human Development

Impacting

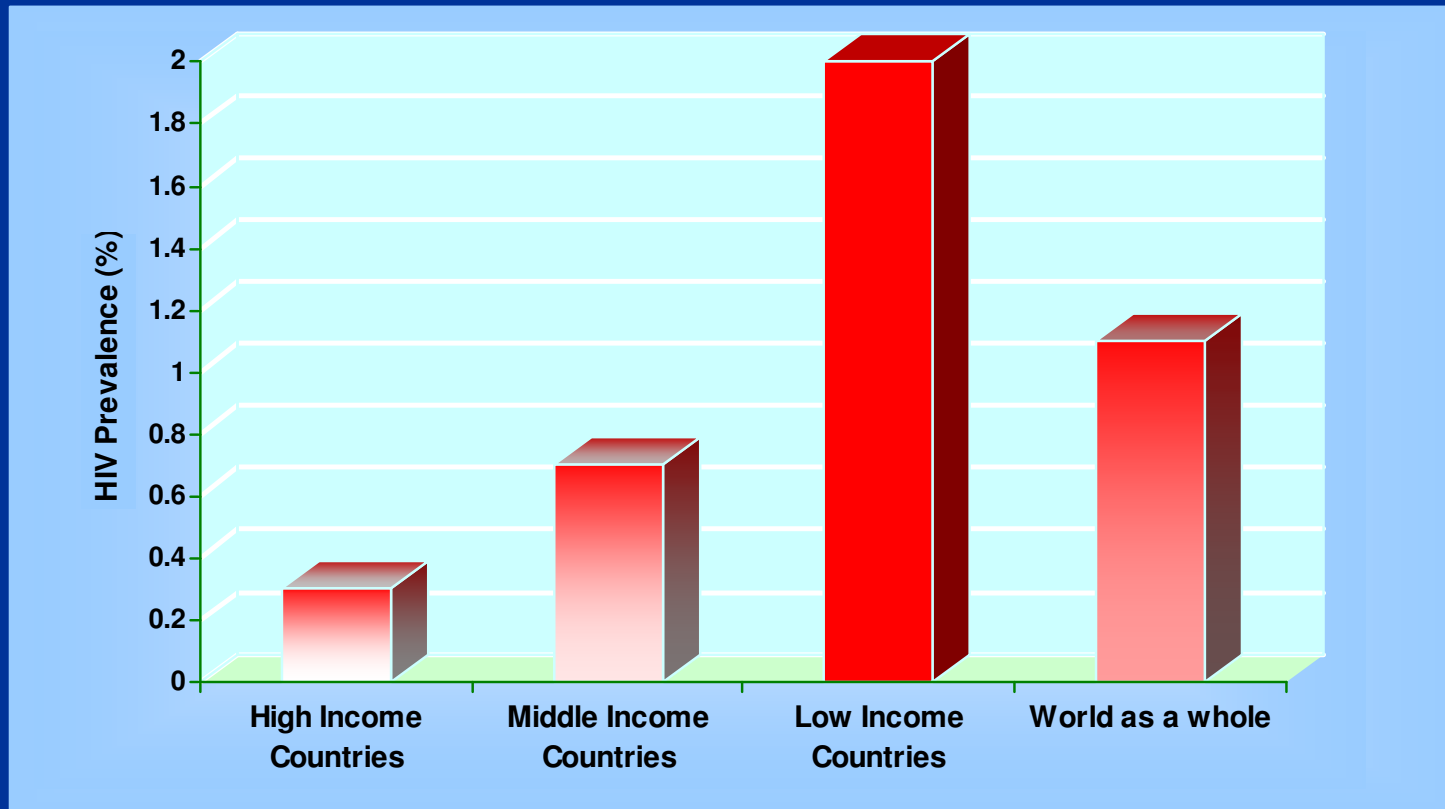


Fuelling

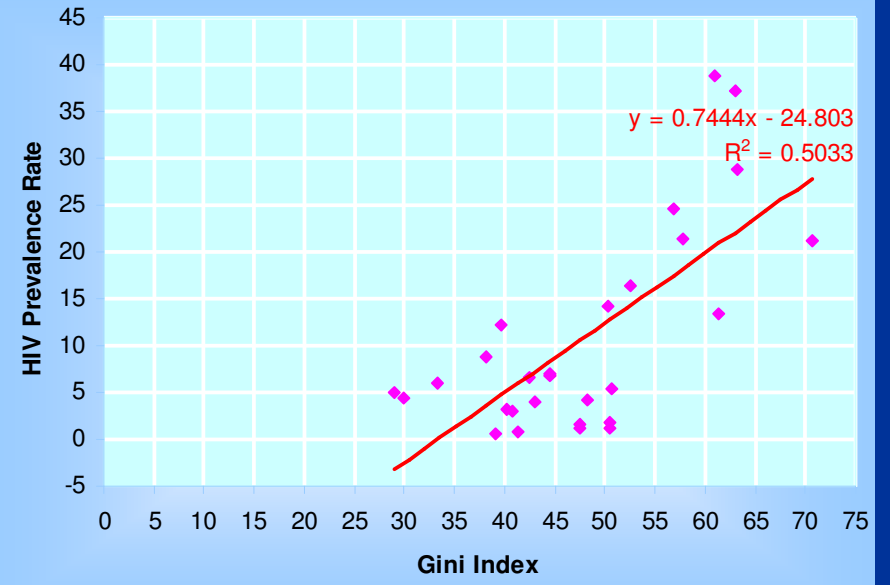
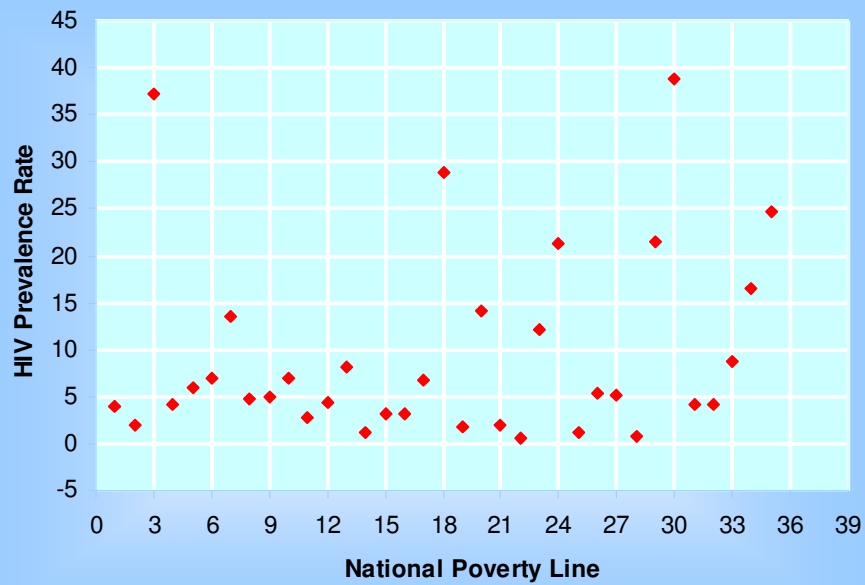
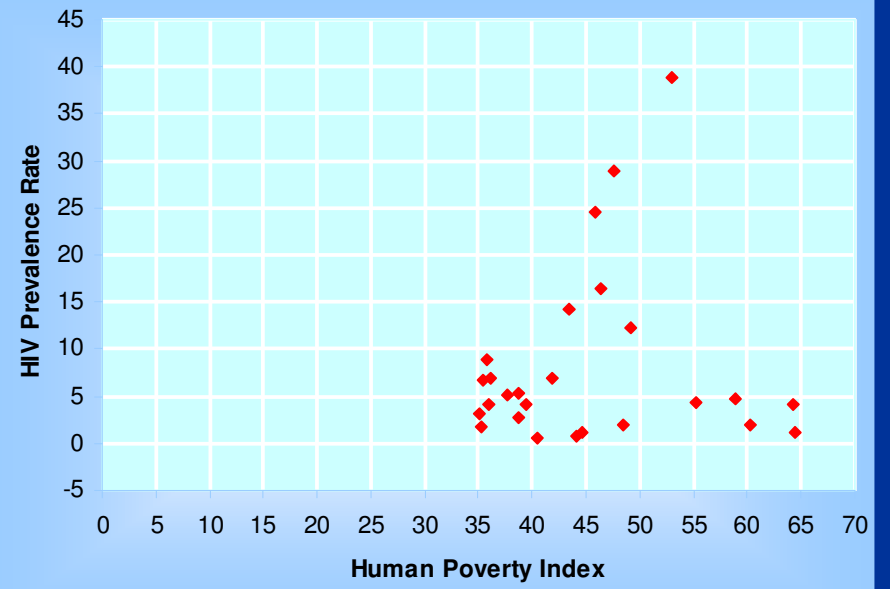
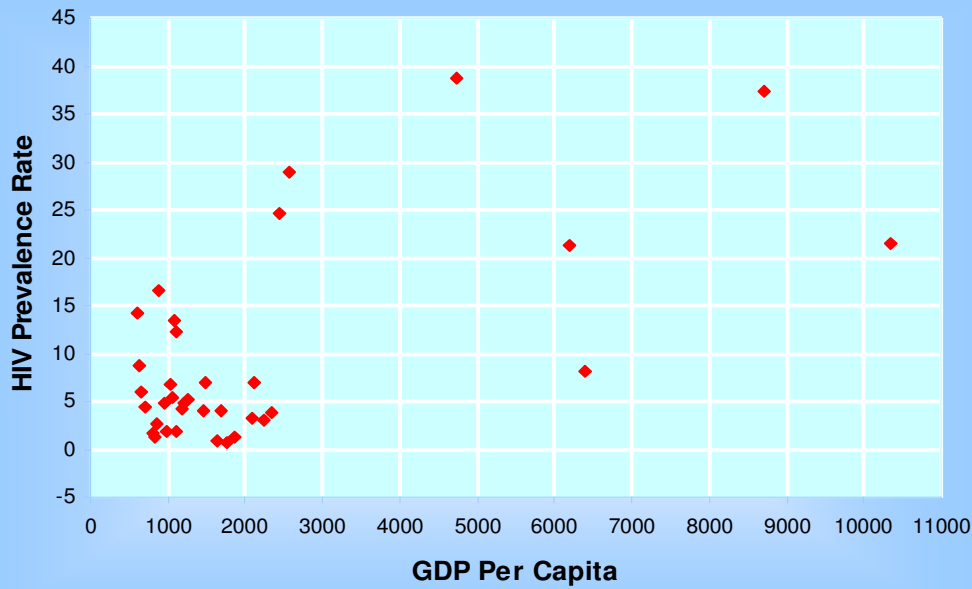
Low human  
development

HIV/AIDS

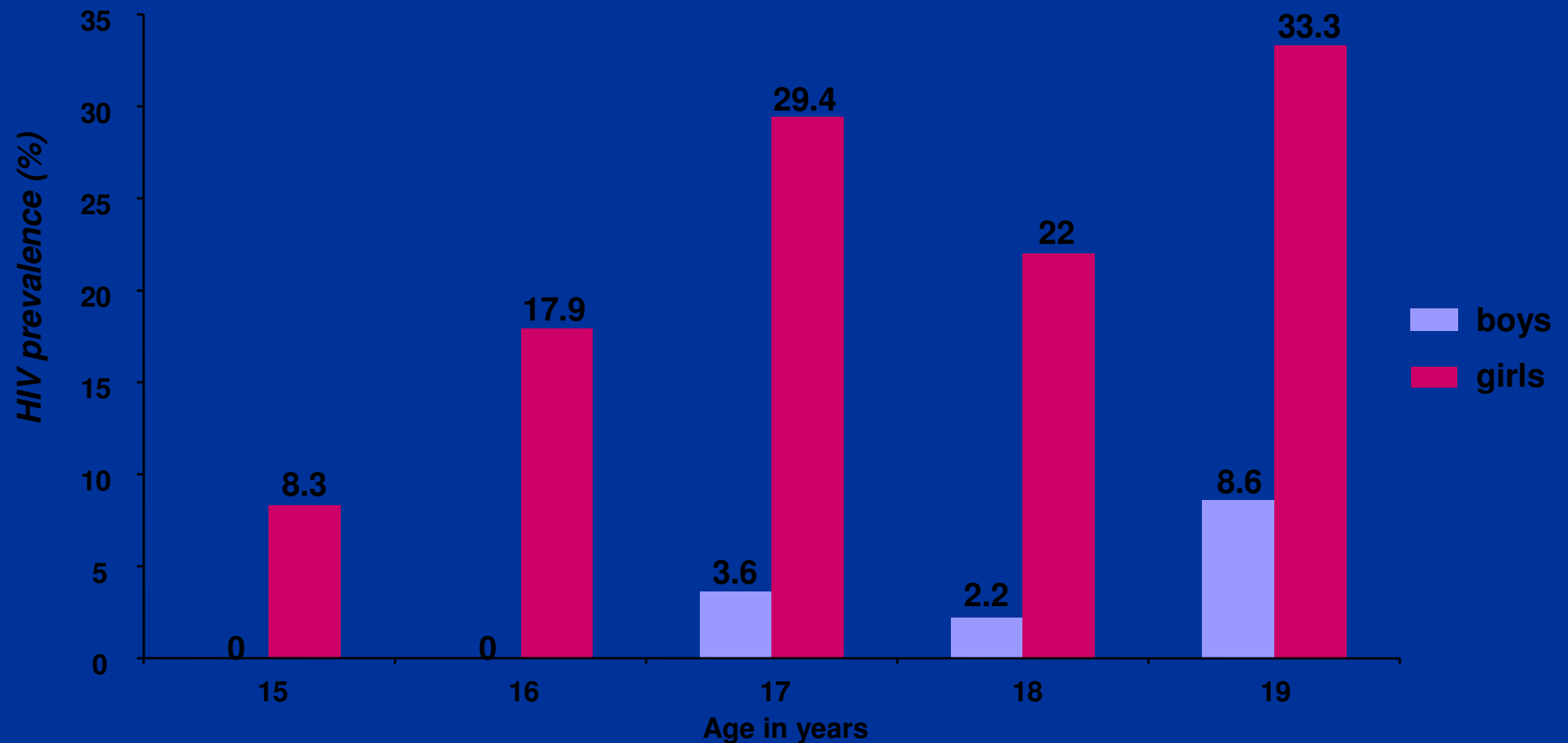
# HIV ↔ low development



Dependent Variable	Independent Variable	Value of $r^2$
HIV Prevalence ↑	Human Devt. Index ↑	0.15 <input type="checkbox"/>
HIV Prevalence ↑	GDP Per Capita ↑	0.39 <input type="checkbox"/>
HIV Prevalence ↑	National Poverty Line ↓	0.00 <input type="checkbox"/>
HIV Prevalence ↓	Human Poverty Index ↓	0.01 <input type="checkbox"/>
PLWHA ↑	Migration ↑	0.19 <input type="checkbox"/>
HIV Prevalence ↓	Foreign Investment ↑	0.00 <input type="checkbox"/>
HIV Prevalence ↑	Male Enrolment ↑	0.20 <input type="checkbox"/>
HIV Prevalence ↑	Female Enrolment ↑	0.35 <input type="checkbox"/>
HIV Prevalence ↓	Gini Index ↓	0.50 <input checked="" type="checkbox"/>



# Poverty- and inequality-driven intergenerational sex



HIV prevalence rate among teenagers in Kisumu, Kenya, by age



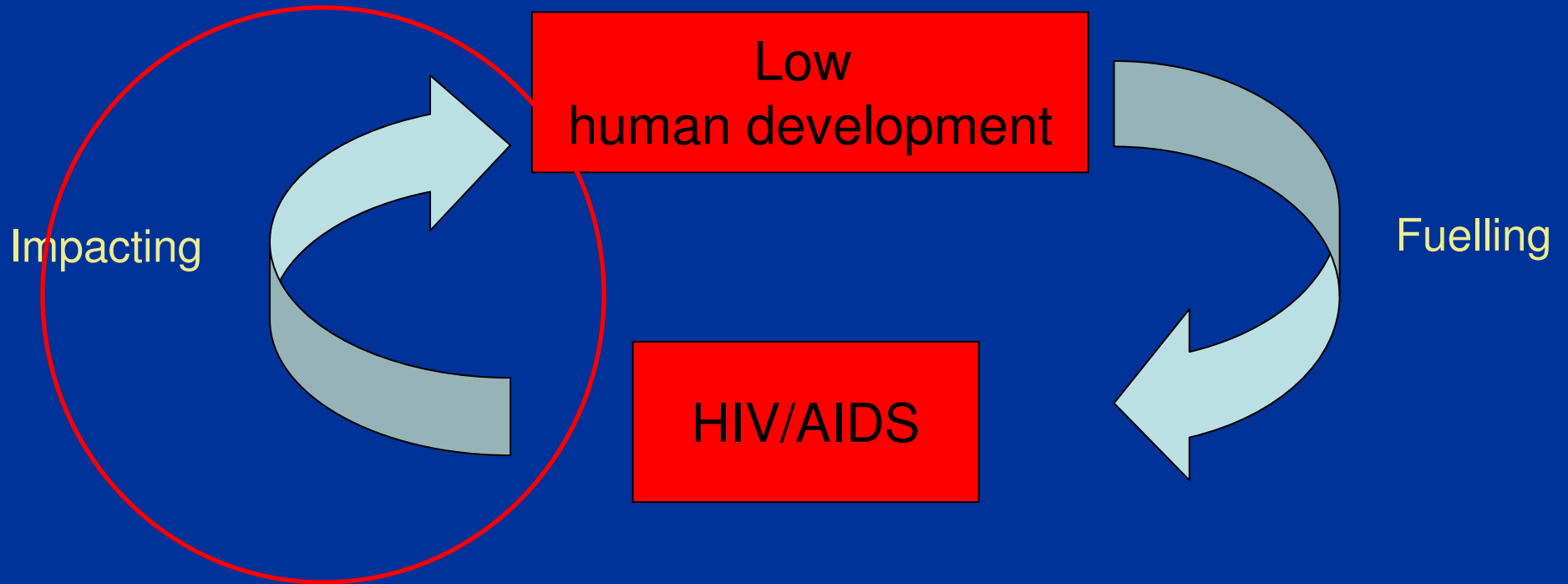
# Lack of human development => HIV/AIDS

## Main “drivers” of the epidemic:

- Poverty and income inequalities = more sex
- Gender inequalities, male behaviour
- Poor health (high levels of Sexually Transmitted disease)
- Migration, mobility
- Stigma, discrimination and violations of human rights
- Lack of access to quality social services
- Weak governance, political instability, conflict (?)

⇒ Fuels the spread of HIV/AIDS

⇒ Cripples the national response

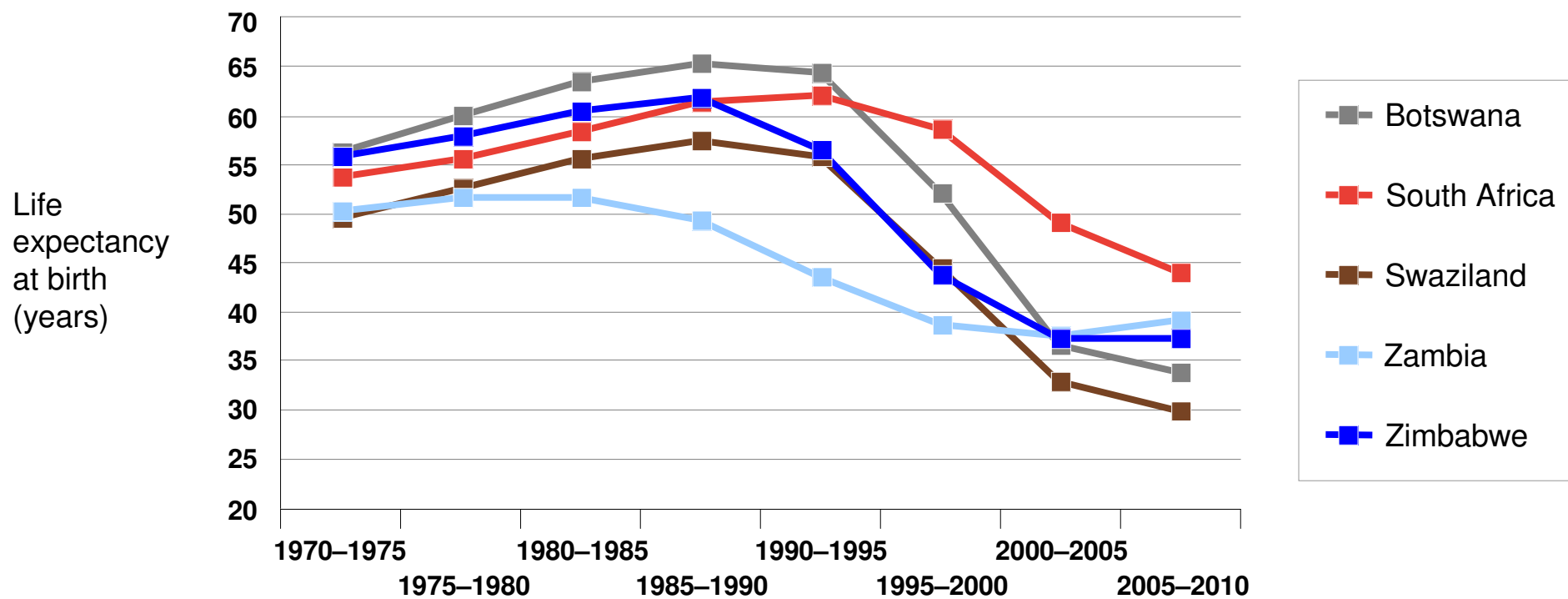


# HIV/AIDS => impact on human development

- Kills young adults in their most productive years of their lives
- 40 million orphans by 2010
- Poverty spreads and deepens
- Essential public services affected
- Health and education achievements reversed

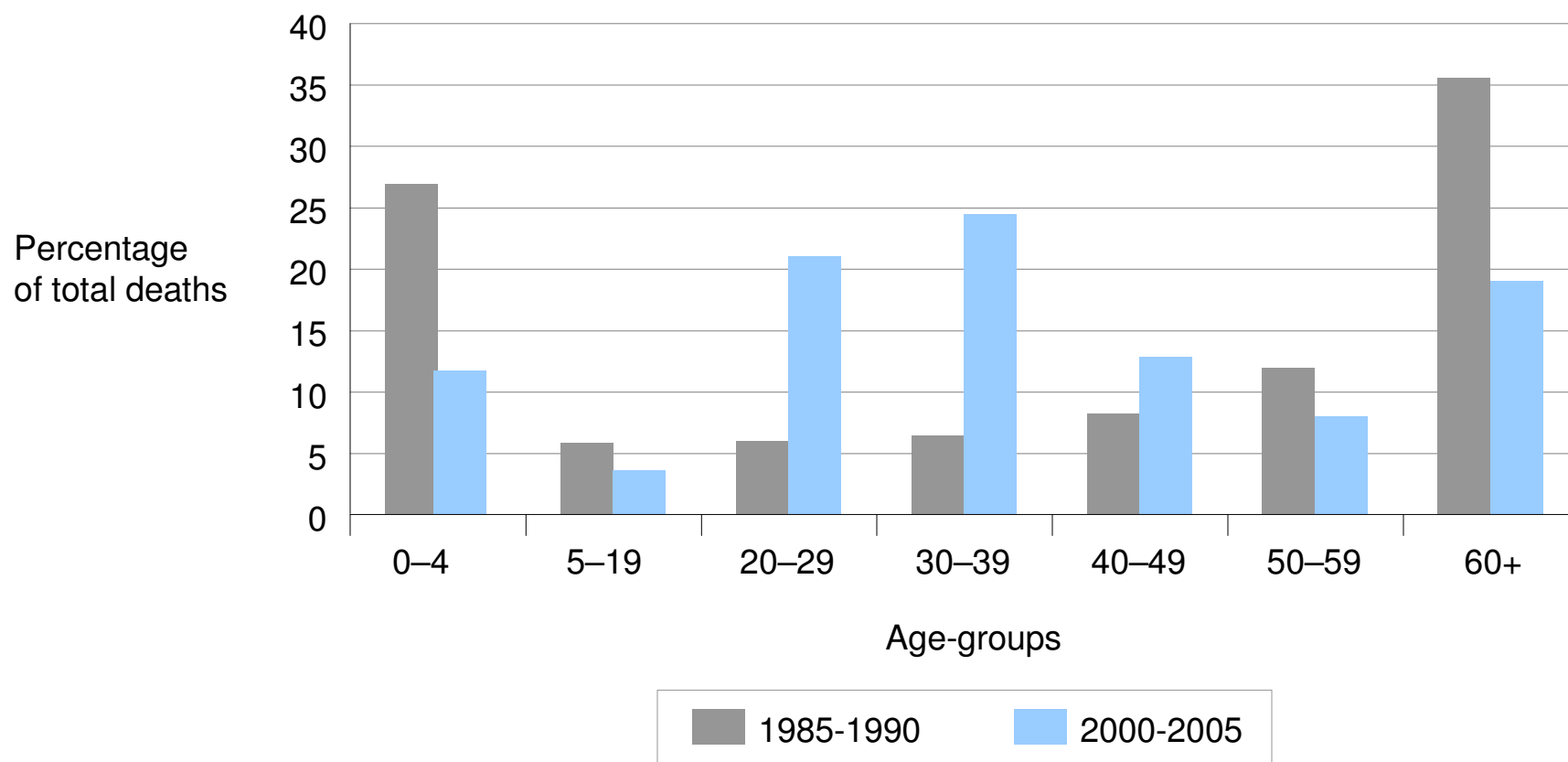


## Impact of AIDS on life expectancy in five African countries, 1970–2010



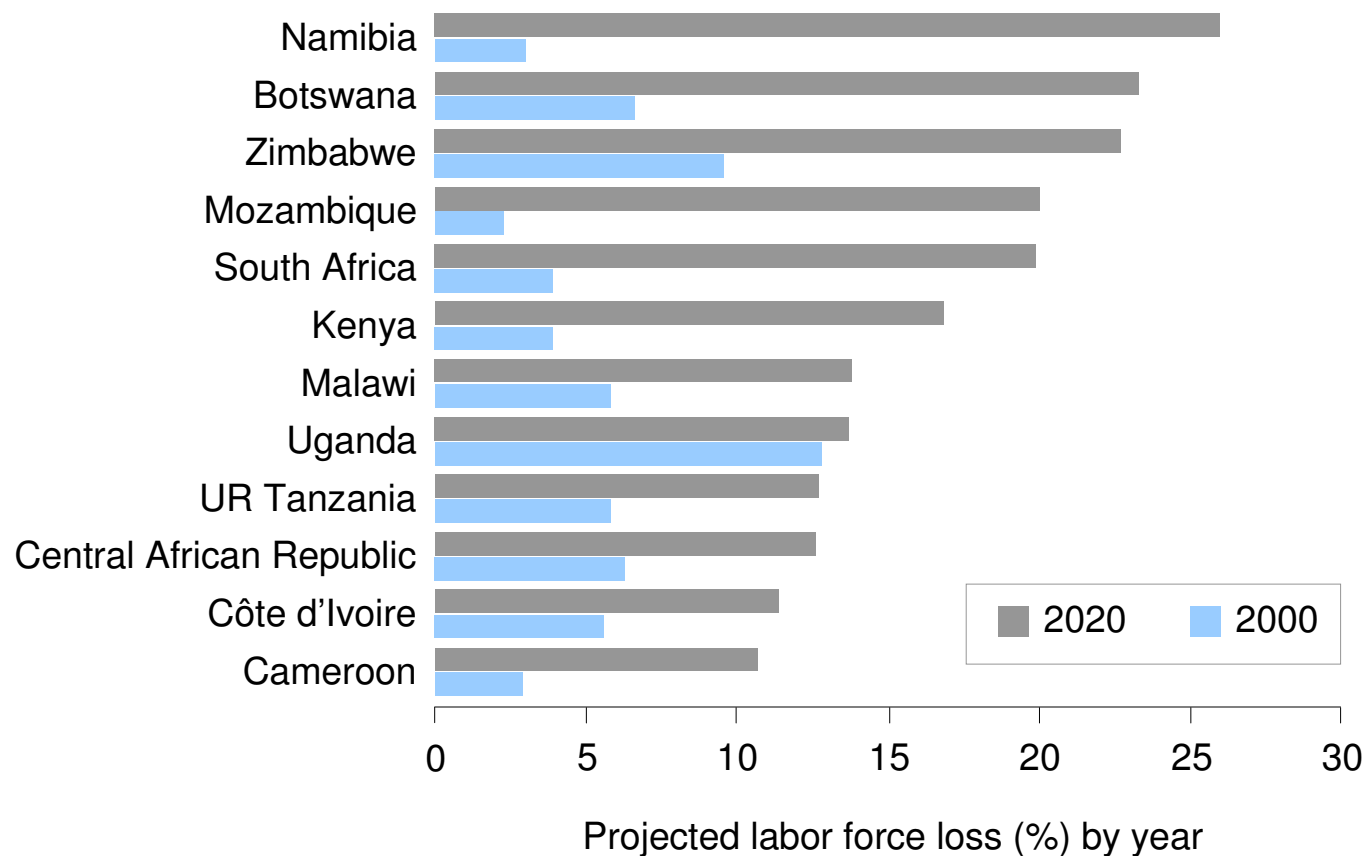
Source: United Nations Population Division (2004). World Population Prospects: The 2004 Revision, database.

## Percentage of distribution of deaths by age in southern Africa, 1985–1990 and 2000–2005



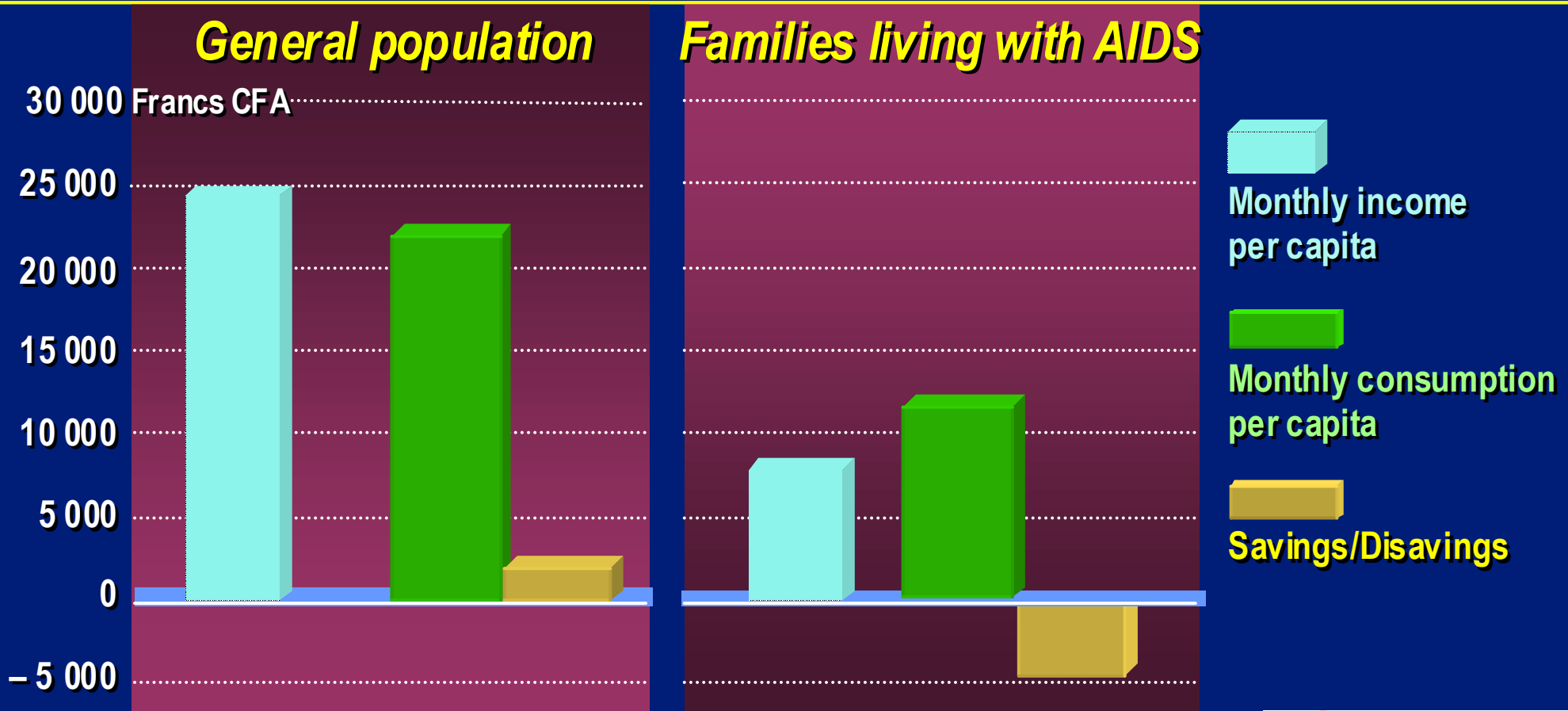
Source: Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat (2005). World Population Prospects: The 2004 Revision. Highlights. New York: United Nations.

## Projected reduction in African agricultural labour force due to HIV and AIDS by 2020

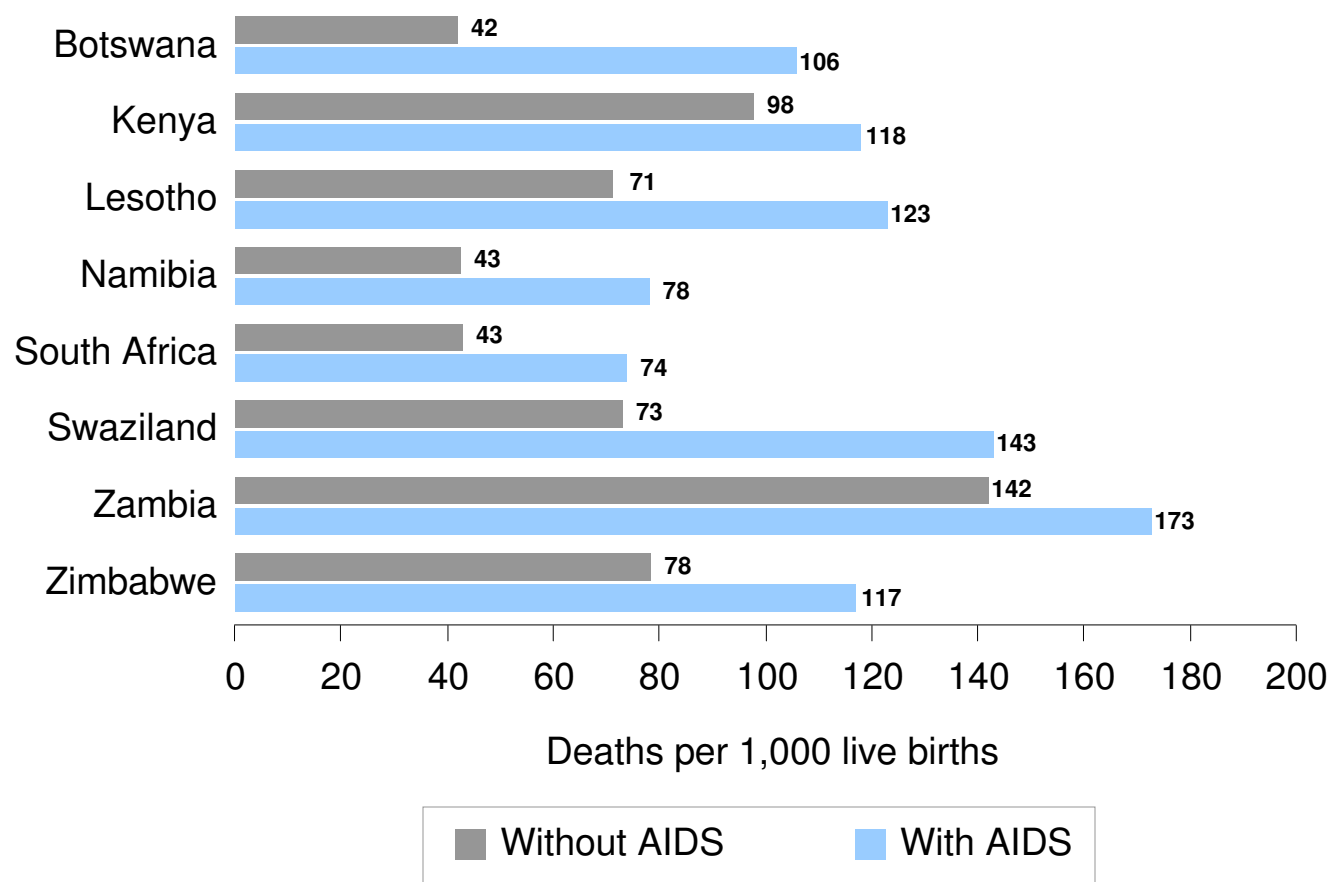


Sources: ILO (2004). HIV/AIDS and work: global estimates, impact and responses

# Impact of HIV/AIDS on urban households, Côte d'Ivoire



## Estimated impact of AIDS on under-five mortality rates 2002–2005, selected countries in sub-Saharan Africa



Sources: UNICEF (2005); United Nations Population Division, World Population Prospects: The 2004 Revision, database.



# Impact on governance

---

- Collapse of institutions and government services
- Public revenues reduced and resources diverted
- Social fabric undone
- Democracy under threat
- Source of conflict



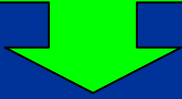
# A source of global insecurity?

---

## CIA on AIDS:

- *“ . . . is a strong risk factor for revolutionary wars, ethnic wars, genocide and disruptive regime transitions.”*
- *“ . . . will produce a huge and impoverished orphan cohort unable to cope and vulnerable to exploitation and radicalization.”*

Policy Implications

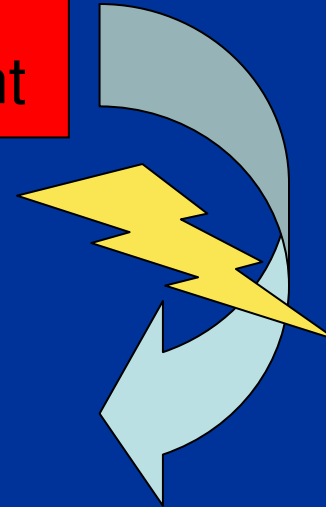


- Urgency of treatment
- Support to PLWHA
- Addressing HIV impact in PRSs
- Mitigate impact on social services
- Business contingencies



Low human development

HIV/AIDS



Policy Implications



- Reducing inequality & poverty
- Empowering women and addressing male behaviour
- Targeting vulnerabilities
- Addressing human rights



# Part 3

## Responding to HIV/AIDS

# National responses --- 3 core objectives

---



1. Reversing the spread of the epidemic – prevention and reducing vulnerability
2. Treatment, care and support for people living with HIV and AIDS
3. Action to address the devastating socio-economic impact

# Thailand's amazing success



Source: Thai Working Group on HIV/AIDS Projections, 2001

\_\_\_\_\_ (2005), "Expanding Access to Anti-Retroviral Treatment in Thailand", Thailand Ministry of Public Health and The World Bank.



# Factors of success – Thailand

## Prevention:

1. Early top-level political leadership
2. Multi-sectoral response
3. High level of public spending on AIDS
4. Massive public awareness campaign
5. Aggressive & targeted condom promotion
6. Strong role of NGO sector



# Factors of Success – Thailand

## Treatment:

1. Strong health care system
2. Adequate resources
3. HIV treatment = covered by universal health care scheme = health as a human right
4. Access to affordable generic drugs
5. Civil society activism and involvement

# ...but, all is not well in paradise

---



- Success => complacency
- Leadership gone
- At-risk populations abandoned
- National prevention campaign fizzled out
- Prudishness in the schools
- Stigma and discrimination
- Access to drugs under threat by US-Thai FTA and TRIPS-Plus

Thank you!

