



# MDG 6

## MILLENNIUM DEVELOPMENT GOAL

Combat HIV/AIDS, Malaria and other diseases

### TARGETS

- Have halted by 2015 and begun to reverse the spread of HIV/AIDS.
- Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it.
- Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases



## CURRENT GLOBAL STATUS<sup>1</sup>

- New HIV infections and AIDS deaths have peaked but more people than ever before are living with the virus, with an estimated 33.4million at the end of 2008 worldwide, 67% of those in Sub Saharan Africa. Sub-Saharan Africa also accounted for 68% of new HIV infections among adults and 91% of new HIV infections among children, and 72% of the world's AIDS-related deaths in 2008.
- Efforts to provide treatment for those living with HIV continue to expand and today 5.2 million people in Low and Middle Income Countries have access to HIV treatment<sup>2</sup>, up from almost none in 2000.
- Prevention efforts are not keeping pace with treatment efforts. For every 2 persons starting treatment 5 new people are infected.
- Women account for half the people living with HIV worldwide and 60% in Sub Saharan Africa. Gender inequalities continue to impact women's decision making and risk-taking behaviour and vulnerability to HIV infection is often beyond a woman's individual control.
- Sub-Saharan Africa has made remarkable strides in expanding access to services to prevent mother-to-child HIV transmission. In 2008, 45% of HIV-infected pregnant women received antiretroviral drugs to prevent transmission to their newborns, compared with 9% in 2004. Moreover, coverage is much higher in eastern and southern Africa (64%), where Irish Aid focus lies, than in western and central Africa (27%).
- By the end of 2007 national plans of action specifically for children orphaned by AIDS and other vulnerable children had been developed in 32 countries, including 29 in sub Saharan Africa but the number children orphaned and vulnerable due to AIDS is estimated to reach over 15 million (80% of whom live in Sub-Saharan Africa) by the end of 2010.
- Malaria caused 863,000 deaths in 2008, mostly among African children. In Africa a child dies every 45 seconds of malaria, and the disease accounts for 20% of all childhood deaths. Malaria can decrease gross domestic product by as much as 1.3% in countries with high disease rates<sup>3</sup>. Major progress has been made especially by countries that have reached high coverage in two or more interventions (combination treatment; insecticide treated bed nets; and spraying) seeing a decline of 50% in deaths.
- TB prevalence and mortality rates are falling but not fast enough to meet global targets. An estimated 1.8m people died from TB in 2008. The highest number of deaths was in the South-East Asia Region, while the highest incidence rate with over 350 cases per 100 000 population and the highest mortality per capita was in sub-Saharan Africa<sup>4</sup>.

<sup>1</sup>All data, unless otherwise indicated, is taken from the 2010 UNDP MDG Progress Report and the UNAIDS AIDS Epidemic Update 2009.

<sup>2</sup>International AIDS Conference, Vienna, 2010

<sup>3</sup><http://www.who.int/mediacentre/factsheets/fs094/en/index.html>

<sup>4</sup><http://www.who.int/mediacentre/factsheets/fs104/en/index.html>

# IRELAND'S POLICY POSITION & RESPONSE

- Ireland has prioritised HIV and AIDS as central to poverty reduction in developing countries as outlined in its White Paper on Irish Aid (2006).
- Irish Aid promotes a rights based approach to addressing HIV and AIDS and other communicable diseases. It ensures that policy and programme interventions are pro-poor and address the key determinants of health and the underlying structural causes of HIV risk and vulnerability, in particular poverty, gender inequality and social exclusion.
- The focus of support is on strengthening countries capacity to prevent the further transmission of HIV and other diseases and to mitigate the impact of these diseases.
- Irish Aid promotes and supports an equitable, integrated and balanced approach to HIV prevention, treatment, care and support while recognising the centrality of HIV prevention to interrupting the further transmission of HIV.

In contributing to the realisation of MDG 6, Irish Aid mainstreams HIV and AIDS as well as supporting specific programmes that address HIV. Irish Aid:

- Engages in political and policy dialogue on HIV and AIDS in key areas related to health systems strengthening, HIV related stigma and discrimination; gender inequality; children infected and affected by HIV; and hunger and HIV.
- Allocates significant financial resources for HIV and AIDS and other diseases. From an investment of about €5 million in 2001, Irish Aid currently allocates over €100 million annually to HIV and other communicable diseases.
- Supports programmes that address the needs of households affected by HIV and AIDS, that ensure children remain free of HIV, and that assist families and communities to care for children who have lost their parents to AIDS.
- Places particular emphasis on prevention and the drivers of the epidemic, and the development and use of effective prevention tools and models and invests in bio-medical research for new HIV prevention technologies.
- Adopts a systems strengthening approach ensuring the integration of HIV prevention and treatment services with other health care delivery services in particular TB and sexual and reproductive health, and addressing the obstacles inhibiting the expansion of HIV service delivery.
- Provides support to home based care and support groups especially strengthening their capacity to provide services, address the burden of care on women, and integrate into local and national structures.
- Puts a strong emphasis on research to inform policy and programme development while also disseminating the lessons learned from own experience.
- Promotes the rights of people living with HIV and vulnerable populations at risk of HIV infection – e.g. youth and especially young girls, sex workers, prisoners, migrants, refugees and internally displaced people.
- Works to address the gender dimensions of the HIV pandemic including research, developing guidance for country stakeholders; and supporting specific initiatives to protect women and young girls from gender-based violence.

## EXAMPLES OF IRISH AID PROGRAMME INTERVENTIONS IN SUPPORT OF MDG 6



### NATURE OF INTERVENTION

#### ADDRESSING HIV, TB AND MALARIA THROUGH GLOBAL INITIATIVES

### SPECIFIC EXAMPLE OF IRISH AID RESPONSE

Ireland has been funding the Global Fund to fight AIDS, TB and Malaria (GFATM) since its establishment in 2002. Ireland has provided approx. 0.8% of the total US\$ 19.2 billion provided to the Global Fund to date and advocating for better aid effectiveness at country level. Irish influence strengthened as Ireland became vice-chair of constituency and alternate member of the Board in 2009.

### RESULTS

- Significant GFATM achievements: 3,600 lives are being saved every day; 2.5 million people accessing HIV treatment; 6 million people received TB treatment and 104 million malaria bednets were distributed in 2009 alone.
- Ireland has been influential in securing significant improvements in GFATM alignment with national programmes.

NATURE OF INTERVENTION	SPECIFIC EXAMPLE OF IRISH AID RESPONSE	RESULTS
<p><b>ADDRESSING HIV AND MALARIA AT REGIONAL LEVEL</b></p>	<p>Ireland has been supporting a Regional HIV and AIDS Programme in Southern and Eastern Africa since 2002.</p> <p>Ireland has been supporting a regional Malaria Programme in sub-Saharan Africa for the past three years</p>	<ul style="list-style-type: none"> <li>• Government-led Prevention Working Groups created in almost all Southern and Eastern African countries</li> <li>• Increased ownership in countries in Southern Africa of the Southern African Development Community's HIV and AIDS Strategy as shown by 35% of its annual budget provided by Member States</li> <li>• Strengthened leadership and more effective management of health services, including the establishment of standardised, up-to-date approaches to diagnosis, case management and drug use for malaria.</li> </ul>
<p><b>DEVELOPMENT OF NEW PRODUCTS FOR MAJOR DISEASES (HIV, TB AND MALARIA)</b></p>	<p>Since 2001/2 Ireland has been investing in a range of product development partnerships focusing on HIV vaccine and microbicide<sup>5</sup> research and development; development and trials of new TB drugs; new malaria drugs and a malaria vaccine</p>	<ul style="list-style-type: none"> <li>• Breakthrough in AIDS vaccine development with the discovery of a partially effective vaccine. Numerous broadly neutralising antibodies discovered which promise to form key parts of future improved vaccines.</li> <li>• First safe and partially effective microbicide developed.</li> </ul>
<p><b>HEALTH, HIV AND AIDS RESEARCH</b></p>	<p>In the last three years Ireland has increased its funding provided for building the evidence base in key areas including the impact of HIV and AIDS on children; HIV and Women; the Impact of global HIV Initiatives on country health systems; HIV, food security and rural livelihoods; Adolescent HIV, sexual and reproductive health and PMTCT; Health Systems and Blood borne virus research</p>	<ul style="list-style-type: none"> <li>• The results of the Joint Learning Initiative on Children and HIV influencing the adoption of family-centred approaches to support children; and the expansion of social protection mechanisms to tackle child poverty in the context of HIV and AIDS.</li> <li>• Multiple peer reviewed publications on HIV and Nutrition influencing policy and protocols</li> <li>• Construction and equipping of the Ireland-Vietnam Blood-Borne Virus Initiative facility completed.</li> </ul>
<p><b>INCREASING HIV PREVENTION, TREATMENT AND CARE SERVICES FOR THOSE MOST IN NEED</b></p>	<p>Ireland is working in partnership with the Governments of Mozambique and Lesotho along with the Clinton Foundation HIV and AIDS Initiative to deliver quality HIV services over the period 2003-2010. There is an emphasis on adequate investment in basic health systems so that these countries can deliver adequate prevention, treatment and care services.</p>	<ul style="list-style-type: none"> <li>• In Mozambique: 173,000 people accessing HIV treatment, up from less than 2,000 people at the end of 2002. 63% of these are women and about 8% are children.</li> <li>• There are 220 sites offering anti-retroviral treatment (up from 38 in 2005) and over 119 sites providing paediatric treatment. There are 832 clinics now offering HIV drugs for pregnant women to prevent HIV transmission to their new-born infants, up from 83 in 2005. 45% of women needing this service are now accessing it.</li> <li>• In Lesotho, Irish support has led directly to: the construction and refurbishment of 7 health facilities in rural mountainous sites and the employment of 150 nurses to work in 77 clinics across the country. Over 85 out of the 190 facilities in the country and over 300 local healthcare professionals have benefited from the clinical mentorship programme, facilitating the opening of 34 new HIV treatment sites.</li> <li>• Over 62000 people are now accessing HIV treatment in Lesotho. National coverage has increased from 25% in 2007 to 51% in 2009. Nutritional support is being provided for all patients.</li> </ul>

<sup>5</sup>A microbicide is a gel or foam applied by a woman prior to sex to prevent infection by HIV. It empowers women to protect themselves.

NATURE OF INTERVENTION	SPECIFIC EXAMPLE OF IRISH AID RESPONSE	RESULTS
ADDRESSING THE NEEDS OF MOST AT RISK YOUTH	Ireland has supported a regional programme focusing on youth who are most at risk of HIV infection in 7 countries in Eastern Europe	Programmes for vulnerable youths are now implemented in all 7 countries, and most national Governments have replicated these successful programmes as part of their services they provide.

# LESOTHO CASE STUDY



*Matšoanelo Khasipe working in her keyhole garden.*

## Support for combating HIV and AIDS

Lesotho is a rugged, beautiful country where many people live in remote areas, especially the mountainous highlands, where droughts are common, food supplies insecure and roughly one-quarter of the population is living with HIV and AIDS.

Matšoanelo Khasipe from Nohana in Mohale's Hoek District, lost her husband some years ago as a result of an AIDS-related illness. Since then, the 37-year-old has struggled to keep herself and two daughters, aged five and eleven, happy and healthy.

"My husband was a carpenter. After he died, I tried to take over the business but I was not skilled enough and could not make it work. I had some savings which I used to buy food, but we couldn't eat as much as we did before. I became ill and I was worried for my children."

Fortunately, through a project by Catholic Relief Services (CRS), supported by Irish Aid, Matšoanelo was provided with seeds, fertiliser, homestead farming techniques and a 'keyhole garden' - a specially designed vegetable bed, raised high to ensure easy access, particularly for the elderly and those living with HIV and AIDS. "Now I have vegetables throughout the year, even in winter. The garden produces so much; I have even been able to sell food to buy other things for the family, like chickens, which I keep in the yard."

Matšoanelo, who is HIV positive, also benefits from the nearby mountain clinic, where she and others can access free medical care, medication and counselling services daily. This is one of seven clinics, built through a partnership with the Ministry of Health and Social Welfare, the Clinton Foundation and Irish Aid, to bring high quality medical treatment to vulnerable mountain communities.

Patients must be well nourished to benefit from AIDS antiretroviral treatment, and the CRS projects and partnership clinics are located near each other, so that improved food security and nutrition will assist those living with AIDS to live longer, better lives.

"I'm much happier and healthier now," says Matšoanelo. "As a single parent, I did not know how to cope with raising my children and doing household work, but with the help I get from CRS and the clinic, I feel much stronger - I can live like other people in the village."



Ireland's commitment to a world without poverty and hunger

**FOR MORE INFORMATION VISIT [WWW.IRISHAID.IE](http://WWW.IRISHAID.IE)**