



WORKING GROUP

On Population, Sustainable Development and Reproductive Health

Towards integrating HIV/AIDS into reproductive health programmes

HIV/AIDS: A set-back for development

There are now almost 34 million people world-wide infected with HIV. For every ten people living with HIV, nine are from a developing country of which six live in Sub-Saharan Africa. Given the scale of the pandemic, HIV/AIDS is no longer just a public health problem. It is a development crisis. In Zimbabwe, where one in four adults is infected, AIDS is expected to consume over 60 per cent of the health budget by 2005. With over seven million infections, Asia is now having to cope with the fastest growing HIV infection rate in the world putting enormous pressure on health finances and threatening to reverse economic growth.

In some of the hardest hit countries in Africa, HIV/AIDS has reversed almost 30 years of hard-won social progress. As a result, on the eve of the new millennium, a child born in Sub-Saharan Africa can expect, on average, to survive only to the age of 43, instead of 60 as would have been the case in the absence of AIDS.

The proportion of women infected with HIV is growing steadily, leading to what has been dubbed the 'feminisation of AIDS'. Of all HIV positive people world-wide, 40 per cent are women. Of these, 14 million are of childbearing age. Mother-to-child transmission is the largest source of HIV infection in children and has become the lead cause of child deaths around the world. In 1998 alone, 700 000 babies were born HIV positive. Over thirty per cent of them will die in their first year and the rest will die by their third year.

Sadly, young people between the ages of 10 and 24 constitute a third of all HIV positive cases in the world. The virus spreads faster in this age group, and where it is propagated predominantly through heterosexual sex, young women greatly

outnumber young men among those becoming infected. High rates of infection among young pregnant women make HIV/AIDS a serious threat to future generations.

HIV/AIDS: a key component of reproductive health

"Just as reproductive health and rights were correctly identified as being intrinsically tied to the global development process in Cairo, measures to reduce HIV/AIDS must figure prominently in all future plans for progress." Dr. Piot, Executive Director, UNAIDS

HIV/AIDS is internationally recognised as an integral part of sexual and reproductive health (International Conference on Population and Development – ICPD - Cairo, 1994, Fourth World Conference on Women – FWCW – Beijing 1995). The prevention of HIV/AIDS was highlighted as a priority during the recent ICPD + 5 process. The international community agreed on specific targets for the reduction of the spread of the virus calling on governments to ensure that, by 2005, at least 90 per cent of young men and women aged 15 to 24 'have access to the information, education and services necessary to develop the life skills required to reduce their vulnerability to HIV infection' (Key Actions for the Further Implementation of the ICPD Programme of Action).

As a sexually transmitted disease (STD), interventions to stem the spread of HIV world-wide necessarily hinge on changes in sexual and reproductive behaviour. Attaining sexual and reproductive rights is therefore a precondition for HIV/AIDS prevention.

Reproductive health programmes raise awareness of HIV/AIDS by providing information, education and counselling in critical issues such as sexuality, gender roles and power imbalances between women and men. With heterosexual intercourse now accounting for over 70 per cent of all transmissions, improving women's negotiating power vis-à-vis their partners is key to fostering safe and responsible sexual behaviour in couples. The promotion of condom use is crucial to both family planning and HIV/AIDS prevention.

Programmes targeted at men, in particular young men, aim to heighten male awareness and responsibility by combining sexual and reproductive education with a strong HIV/AIDS prevention element. Research by UNAIDS found that including these programmes in school curricula was fundamental in delaying the start of sexual activity, reducing the number of sexual partners and raising contraceptive use among those who became sexually active.

Providing access to high quality reproductive health care services, including HIV prevention, helps protect girls and women from HIV infection. This is the most effective way of preventing the scourge of mother-to-child transmission.

The diagnosis and treatment of STDs, other than HIV/AIDS, is another important component of reproductive health programmes. There are approximately 333 million new cases of STDs each year. Having an untreated STD can increase the risk of HIV infection tenfold. Programmes aimed at professional sex workers, accountable for a large proportion of HIV transmissions, have focused particularly on STD screening and treatment coupled with the promotion of condom use.

In line with the ICPD Programme of Action, more and more developing countries are opting to integrate family planning and mother and child health with STD/HIV/AIDS screening. This is a cost effective way of reaching the highest proportion of poor, sexually active women and their partners. Integrated reproductive health programmes also allow mutual referral systems. This is crucial if we consider there are an estimated 27 million people who do not know they are HIV positive.

"Governments should ensure that prevention of and services for sexually transmitted diseases and HIV/AIDS are an integral part of reproductive and sexual health programmes at the primary health-care level", Key Actions for the Further Implementation of the ICPD Programme of Action

THE ROLE OF THE EU

The EU HIV/AIDS Programme in Developing Countries

- The EU supports the fight against HIV/AIDS by channelling assistance through a number of partners, namely governments, EU Member States, international agencies, the United Nations, NGOs, and the private sector.
- Support has been mobilised through various financial instruments such as special budget lines B7-6211 (the fight against HIV/AIDS in developing countries) and B7-631 (population and reproductive health in developing countries), the NGO co-financing budget line, the EDF and technical and financial co-operation mechanisms with the ALA/MED countries.
- From 1987 to 1997 the EU committed almost € 200 million for HIV/AIDS related interventions in more than 90 developing countries, including prevention and treatment, education and awareness raising, support to the health sector in developing countries, technical assistance and research and training.
- The European Parliament has taken a significant step forward in advancing the ICPD by upholding the proposed merger of budget lines B7-6211 and B7-631 into a single new line entitled "Aid for Population and Reproductive Health Care, including HIV/AIDS". This will help to further consolidate the Commission's shared management of reproductive health and HIV/AIDS programmes allowing for greater coherence and efficiency in its interventions in this area.
- The merger also reflects the Commission's current policy focus on Health, HIV/AIDS and Population (HAP) aimed at integrating health and reproductive health in its development approach. This is part of the Commission's commitment to an integrated social and human development strategy which acknowledges health and reproductive health as vital preconditions for poverty eradication.

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