

Goal 6: Combat HIV/AIDS, Malaria and Other Diseases

Progress and Challenges



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TARGET

Have halted by 2015 and begun to reverse the spread of HIV/AIDS

TARGET

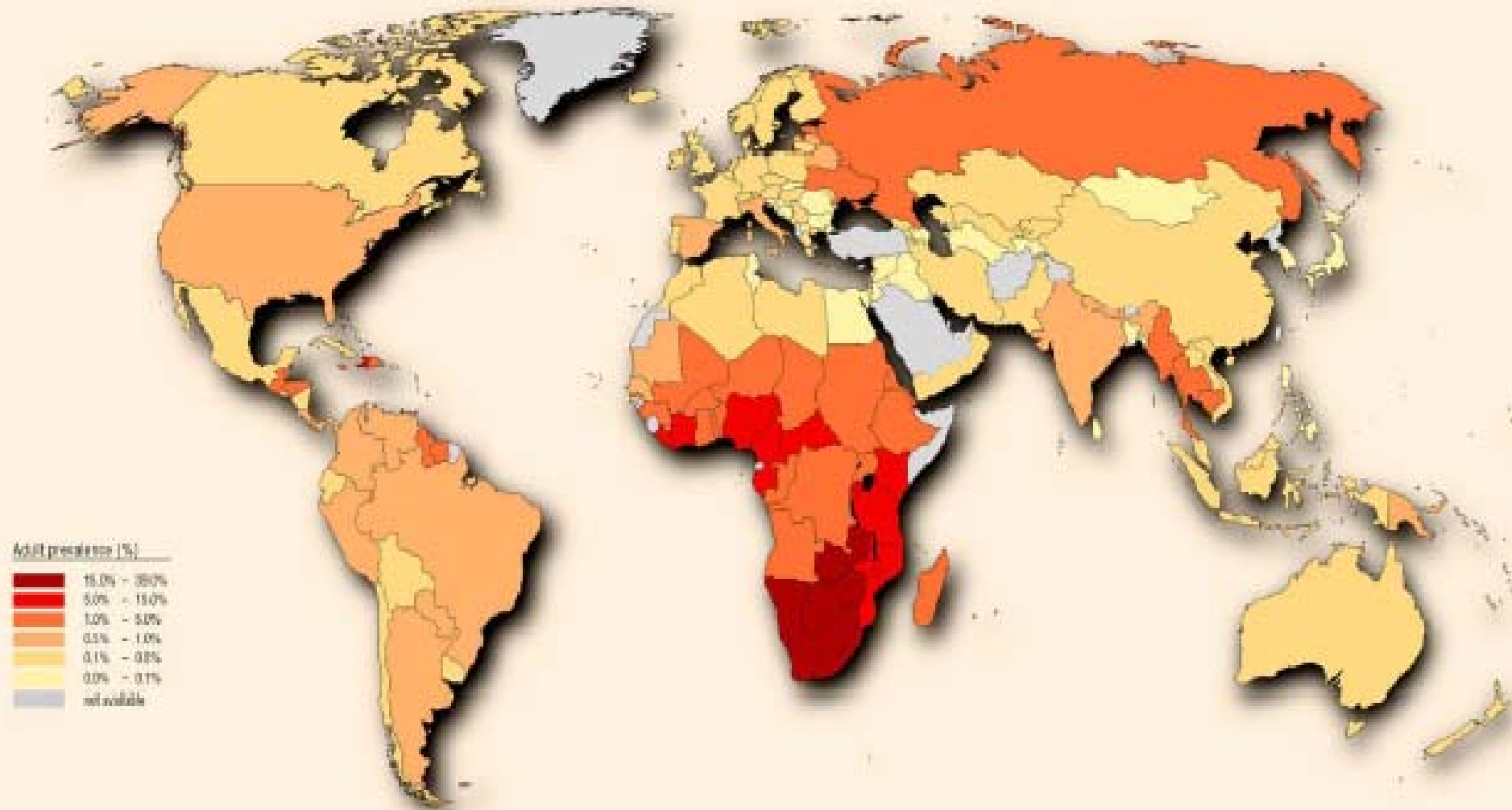
Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

Global HIV/AIDS estimates for adults and children end 2004 (Source: UNAIDS, 2004)

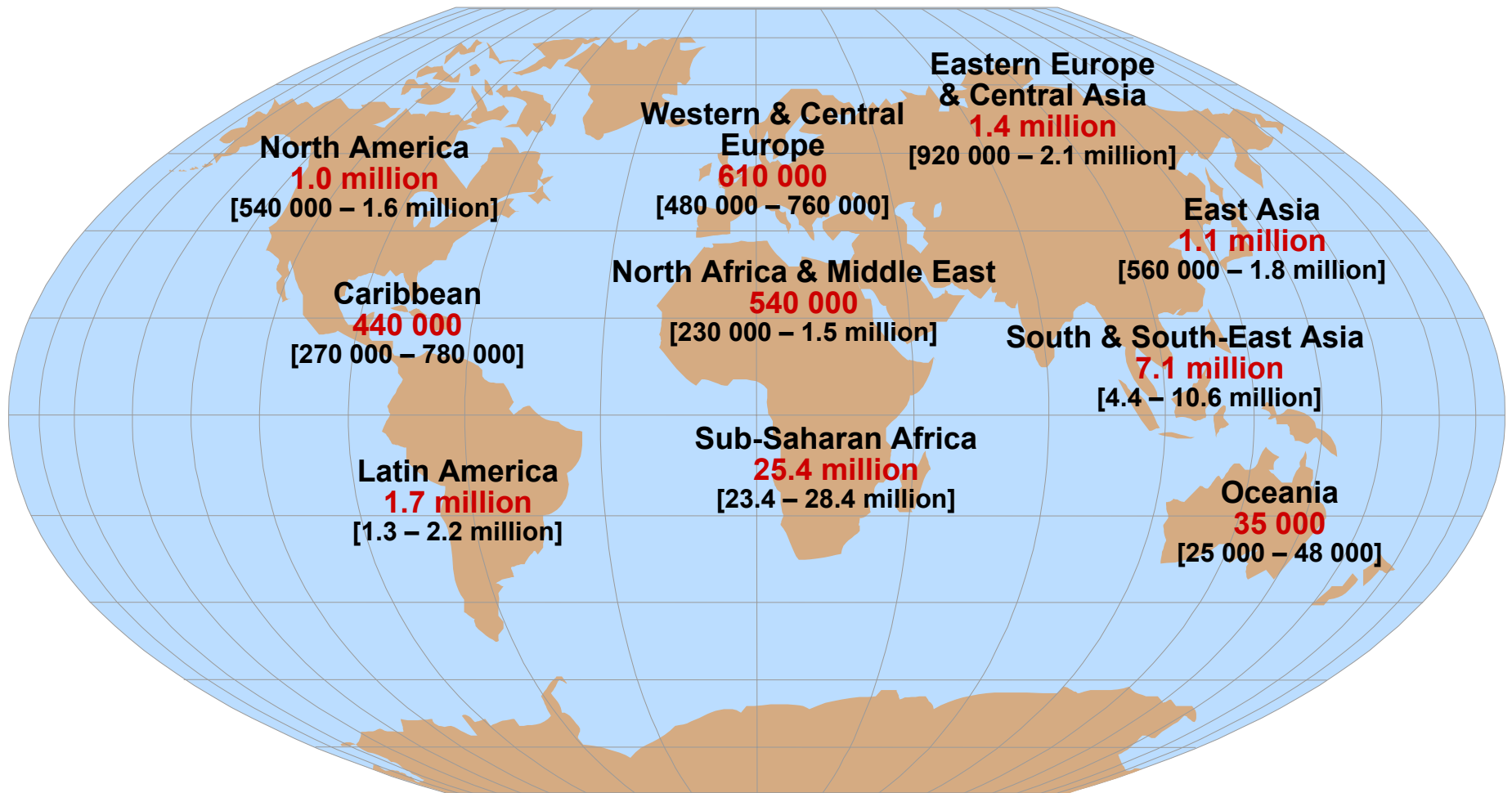
- People living with HIV ■ 39.4 million
- New HIV infections ■ 4.9 million
- Deaths due to AIDS in ■ 3.1 million
2004



A global view of HIV infection, end 2003

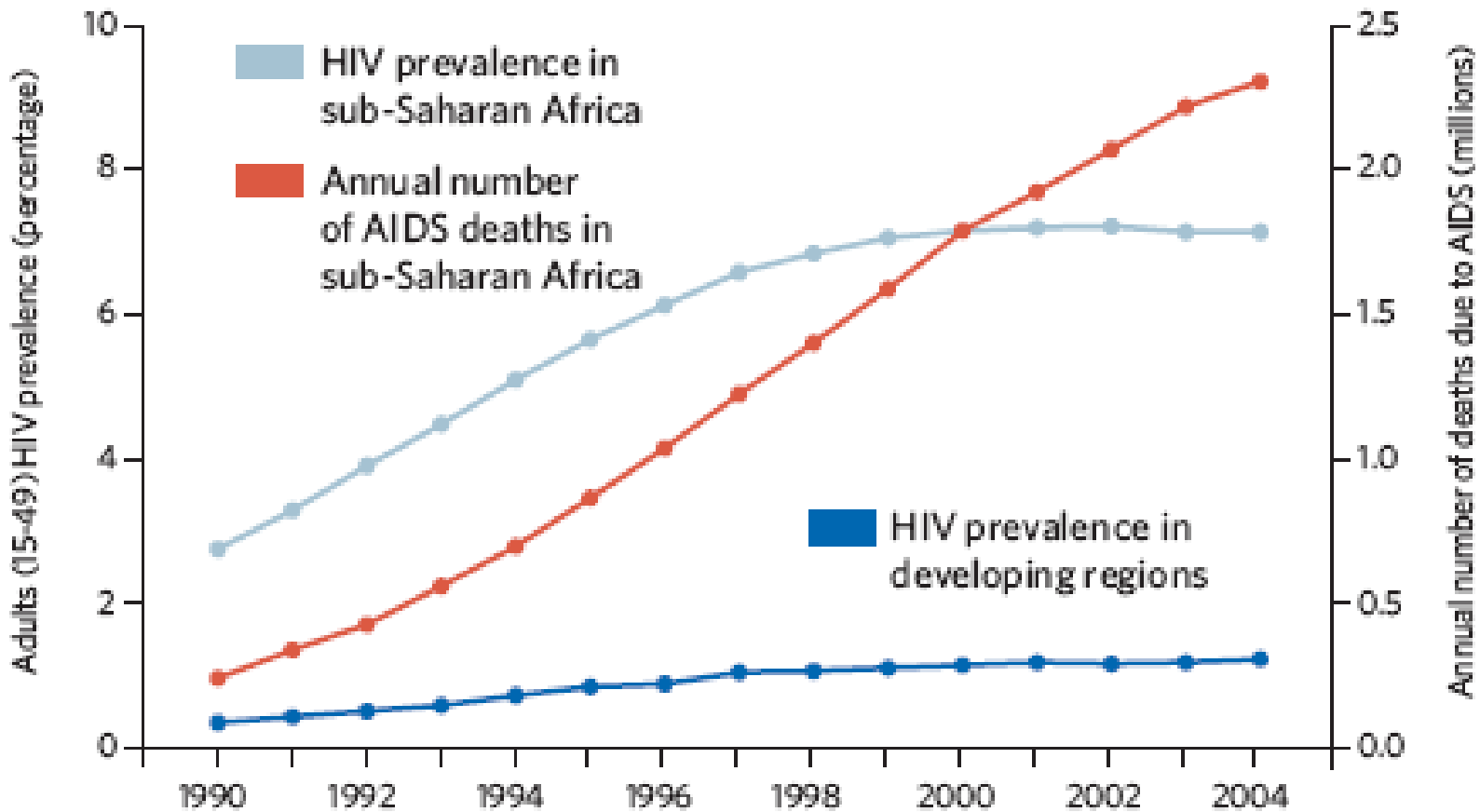


Adults and children estimated to be living with HIV as of end 2004



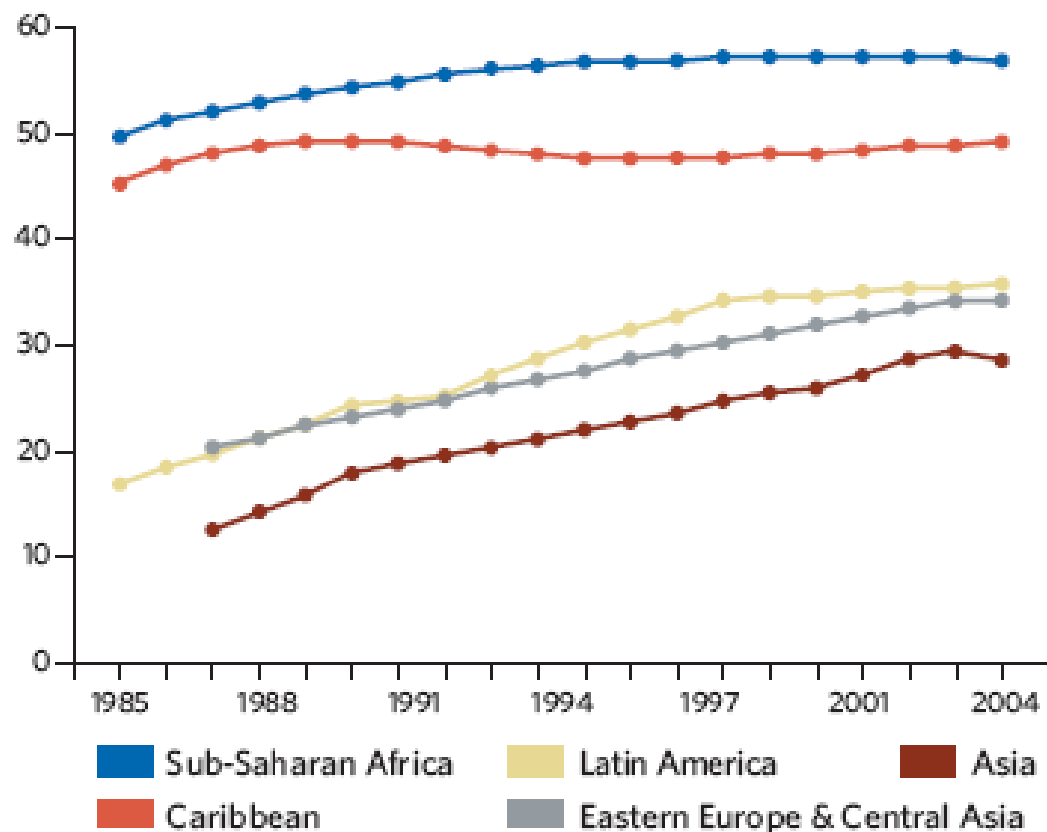
Total: 39.4 (35.9 – 44.3) million

HIV prevalence in adults aged 15-49 & number of AIDS deaths in sub-Saharan Africa



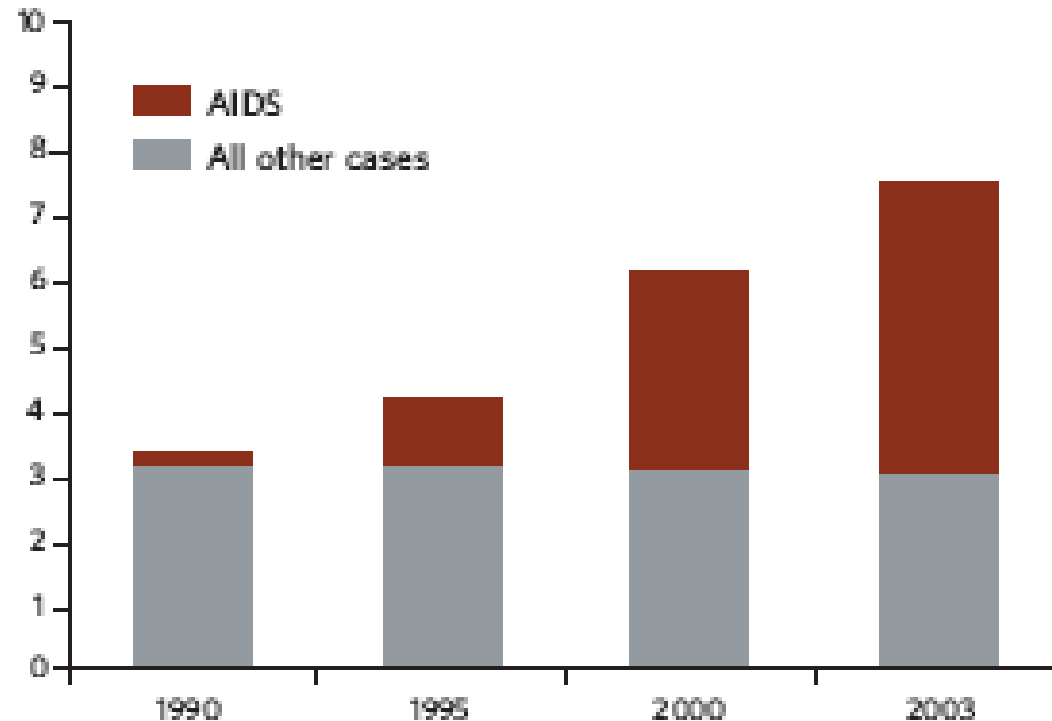
Source: United Nations. 2005. The Millennium Development Goals Report 2005. New York.

As the AIDS epidemic worsens, more girls and women are infected



Proportion of adults aged 15-49 living with HIV who are women, in selected developing regions, 1985-2004 (Percentage)

AIDS is robbing children of their parents in record numbers



Children under age 15 who have lost both parents to AIDS and other causes in sub-Saharan Africa, 1990-2003

AIDS takes a harsh toll on education in sub-Saharan Africa

- In 1999, nearly one million children in the region lost their teachers to AIDS
- Cumulative effect of these deaths has placed a burden on countries that already lacked sufficient trained teachers
- When parents die, children are often pulled out of school.
- Education is the single most effective way to prevent the spread of HIV



Prevention is the key along with treatment and care

- Increased political commitment and financial resources
- Expansion of treatment offers hope
- Civil society playing an increasing role
- Some countries are turning around the epidemic
- Prevention expanding but millions of young people still uninformed
- Treatment expanding but only reaching 12% of those who need it
- Impact on children and labor force staggering in certain countries



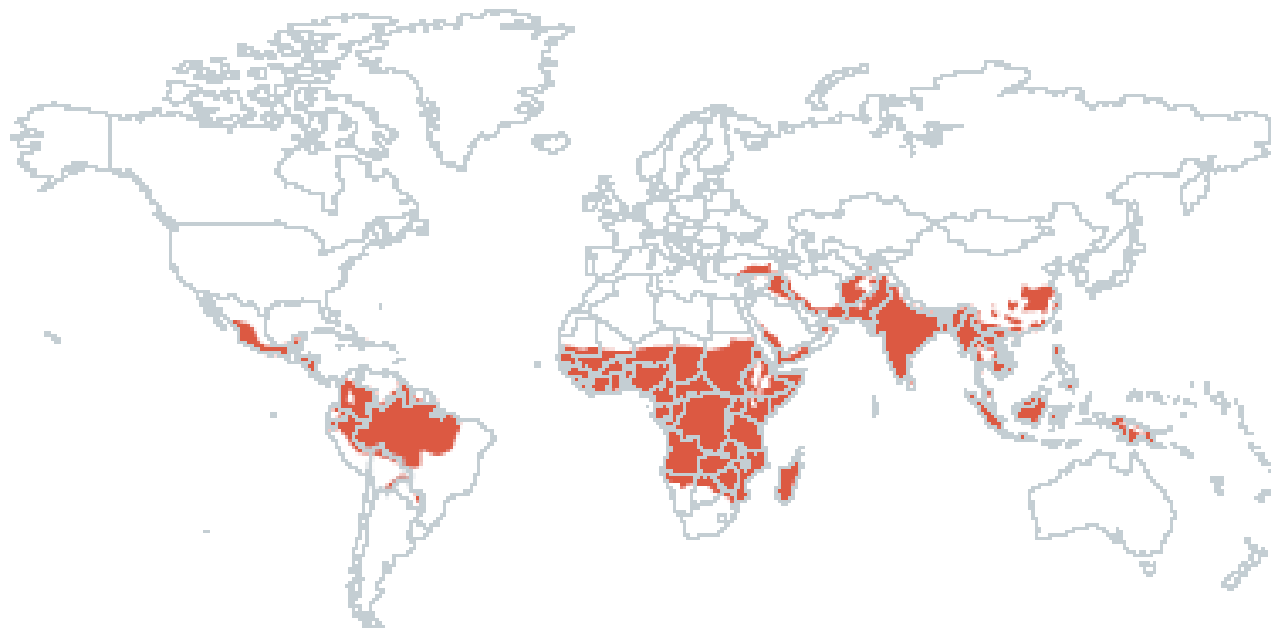
Malaria and Tuberculosis

- **Malaria** kills a million people a year, mostly young children
- Malaria is estimated to have slowed economic growth in Africa by 1.3% a year
- **Tuberculosis** kills 1.7 million people a year
- New tuberculosis cases growing with the fastest increases in sub-Saharan Africa and the Commonwealth of Independent States

TARGET

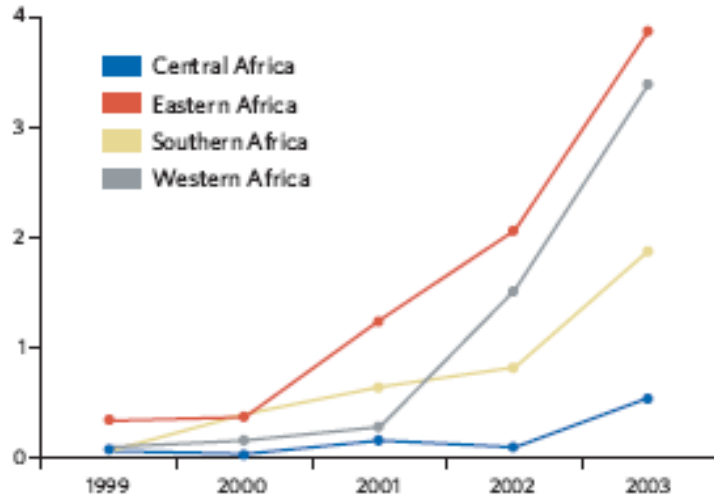
Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases

Malaria attacks the poorest and most defenceless



_____ Risk of malaria transmission by geographical area

Mosquito net distribution widens



Mosquito nets sold or distributed in sub-Saharan Africa, 1999-2003 (Millions)

Illness and death from malaria increased in the 1990s, mainly in Africa. Since then, prevention and treatment measures in that region have improved. Among the most effective tools for prevention are insecticide-treated mosquito nets, which United Nations organizations and their partners are distributing free to people in need. Distribution has increased tenfold since 2000.

Countries are adopting more effective malaria drug policies



African countries that, by 2004, had changed their policy on treatment of malaria to one requiring the use of artemisinin-based combination therapy

Tuberculosis, an old threat, re-emerges

- Emergence of drug resistance strains, increase in the numbers of people with HIV, and the growing numbers of refugees and displaced persons contribute to the spread
- With the international DOTS protocol, more patients being treated successfully
- However, the identification of cases and expansion of treatment will have to improve in Asia and Africa

AIDS and the Millennium Development Goals

| Millennium Development Goal | Africa Progress | AIDS effect |
|-------------------------------------|-------------------------|--------------------|
| Reduce poverty/hunger | <i>Stagnant at best</i> | Large |
| Universal primary education | <i>Lagging</i> | <i>Moderate</i> |
| Gender equality | <i>Lagging</i> | Large |
| Child & infant mortality | <i>Worsening</i> | Large |
| Maternal health | <i>Worsening</i> | Large |
| Combat AIDS & diseases | <i>Worsening</i> | Large |
| Environmental sustainability | <i>On track</i> | <i>Minimal</i> |
| Improve global partnerships | <i>On track</i> | <i>Favorable</i> |

Artisanal and Small Scale Mining Communities Vulnerability to HIV/AIDS

- Large proportion transient, migrant workers
- Rural areas with limited access to health services and information
- Many found in sub-Saharan countries with high HIV prevalence and endemic malaria
- Not perceived as a group at risk for HIV



HIV and Sexually Transmitted Infections within New Goldmines Communities in Tanzania

[Source: Clift *et al*, *Sex Trans Infect* 2003;79:307-312]

- Cross sectional surveys mine workers, communities, female food and recreational facility workers (FRFW) for behavior and HIV/STIs
- Found high risk behavior for HIV/STIs among all groups
- 42% FRFW were HIV+, 6% male miners HIV+, 16% community men HIV+ and 14% community women HIV+
- High rates other STIs such as syphilis
- Multiple partners, low condom use



Africa's tomorrow depends on

what we, together, do about

HIV/AIDS today

