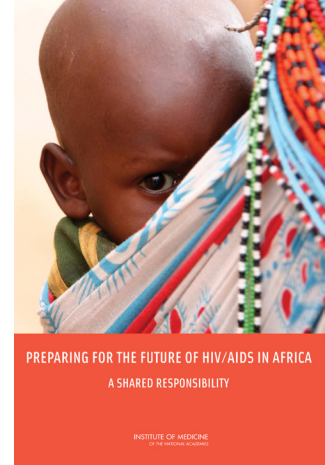


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Preparing for the Future of HIV/AIDS in Africa

A Shared Responsibility



HIV/AIDS is a catastrophe globally, but nowhere more so than in sub-Saharan Africa, which in 2009 accounted for 68 percent of cases worldwide and 69 percent of new infections. The magnitude of the epidemic in Africa is further amplified by a region that lacks sufficient resources to meet the need for life-saving antiretroviral therapy (ART) and is home to those who need it the most. According to the World Health Organization's most recent guidelines, just 36 percent of Africans needing ART are receiving it, and the need for treatment is expected to increase exponentially over the next decade.

In this context, the Institute of Medicine (IOM) tasked a committee of experts to recommend affordable, sustainable strategies that both African nations and the United States can implement to address the long-term burden of HIV/AIDS. The committee concludes that the burden of morbidity and mortality in Africa cannot be alleviated through treatment alone. Treatment can reach only a fraction of those who need it, and its costs are unsustainable. Greater emphasis must be placed on preventing new infections.

Strategies to Build Capacity to Tackle HIV/AIDS in Africa

The IOM committee identified strategies for both African nations and the United States to build African capacity—including human, scientific, technological, organizational, institutional, and/or resource capabilities—to prevent, treat, and care for HIV/AIDS.

For African nations, the focus is to strengthen health care systems by making the most of existing capacities, such as health care workers on the ground and local institutions. Some of the committee's recommended strategies include:

The IOM committee identified strategies for both African nations and the United States to build African capacity to prevent, treat, and care for HIV/AIDS.

- making use of management and support staff from outside the clinical health sector to free up time for health care providers to perform clinical work;
- delegating tasks of health professionals, when appropriate, to health workers with less-specialized training;
- tapping the potential of modern information and communications technology, such as smart phones and distance learning; and
- forming partnerships between developing countries and creating regional collaborations to exchange technical assistance.

For the United States, strategies focus on supporting partnerships—particularly institutional partnerships—so Africa can move forward independently toward a sustainable and healthier future. Partnerships include collaborations between the public and private sectors, with faith-based organizations, and between the militaries of the United States and African nations, as well as academic partnerships.

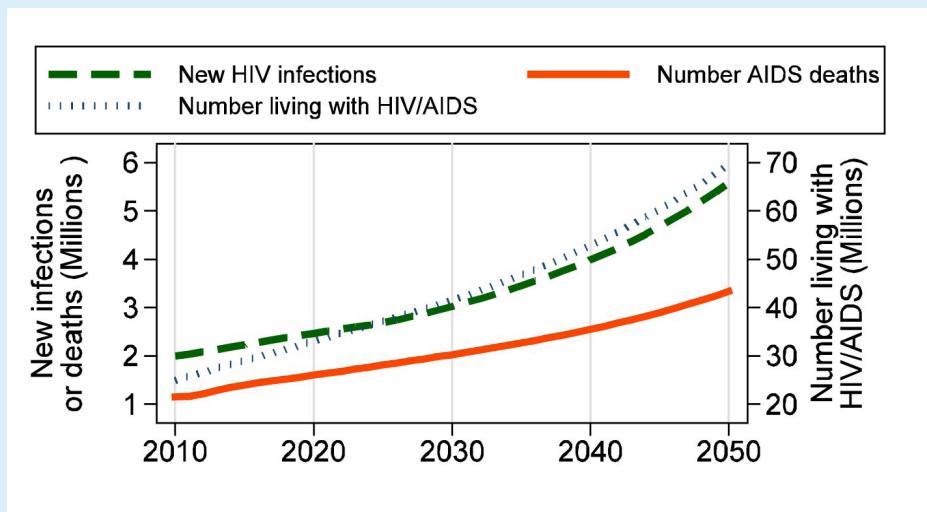
Ethical Decision Making for HIV/AIDS in Africa

If the burden of HIV/AIDS does in fact reach the projected levels, it will confront decision makers with tough choices about who receives life-saving treatment and who does not. Capabilities need to be expanded to enable professionals overseeing HIV/AIDS policies, programs, and resource allocation to receive ethical training and to carry out their responsibilities within the structures needed to ensure transparency and accountability in these life-altering decisions.

Sharing the Responsibility

For years, governments and private funders have offered support to African nations in combating the epidemic. The U.S. President’s Emergency Plan for AIDS Relief (PEPFAR), for example, has provided approximately \$32 billion to HIV/AIDS-related programs since it was established in 2003. Today, however, the sustainability of such support is imperiled by the global recession.

Projected Infections and AIDS-Related Deaths



The committee’s projections show the number of people living with HIV/AIDS continues to rise in the coming decades, reaching 70 million by 2050.

The committee concludes that it is essential to transition to a model for long-term sustainability in which the responsibility for the response to HIV/AIDS is borne by the United States in part but is also shared with African partner states and the broader international community.

sion, massive debt among donor nations, and competing demands in health and other arenas.

The committee concludes that it is essential to transition to a model for long-term sustainability in which the responsibility for the response to HIV/AIDS is borne by the United States in part but is also shared with African partner states and the broader international community. Under this model, the United States would assist African nations in developing the leadership, academic, medical, research, and other capacities necessary to share this responsibility effectively. Countries with demonstrated political will; an emphasis on prevention; and efficient, transparent health care management would receive stronger financial commitments with less oversight or intervention.

Recommendations

The committee's recommendations provide guidance for both the United States and African nations about how to share responsibility in preparing for the future of HIV/AIDS in Africa.

- African countries, with the support of donors, such as the United States, should develop and implement methods for measuring the level of and change in new HIV infections to enable better planning and evaluation of prevention programs.
- The U.S. government should support countries in assessing the implications of alternative national HIV/AIDS policies so policy

makers can make informed decisions on related trade-offs.

- The Office of the Global AIDS Coordinator should emphasize a more binding, negotiated contract approach at the country level whereby additive donor resources are provided largely as matching funds for partner countries' investments of their own domestic resources in health. African countries should establish a negotiated contract with U.S. agencies that includes programmatic targets and delineates each partner's responsibilities and expectations.
- The White House and the Office of the Global AIDS Coordinator should develop and articulate a U.S. roadmap for HIV/AIDS in 2020 that incorporates a model of U.S.-African shared responsibility. This roadmap should give priority to HIV/AIDS prevention and strike an optimal balance between bilateral and multilateral funding mechanisms. Likewise, individual HIV/AIDS coordinating bodies in Africa should develop a 20-year roadmap for combating the epidemic, including sufficient investment in prevention and the development of more efficient models of care and treatment.
- To prepare for the long-term burden of the epidemic, African governments and international donors should, first, assess and plan for meeting national health workforce requirements. Second, they should better utilize existing capacity within African institutions.



Committee on Envisioning a Strategy to Prepare for the Long-Term Burden of HIV/AIDS: African Needs and U.S. Interests

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Institute of International Education

Merck & Co., Inc.

The Rockefeller Foundation

Third, the United States and other donors should fund African leadership and management development. Fourth, donors should increase funding for and participation in partnerships designed to build African capacity to address the epidemic.

- International donors and African governments should help build capacity for ethical decision making by adequately funding education and training in the disciplines of ethics, human rights, and pertinent aspects of the law. Both donors and governments should establish effective mechanisms to ensure that requirements such as transparency, accountability, and responsibility are met.

Conclusion

Projections indicate that new infections will surpass the global community's capacity to provide treatment. No single strategy will offer a magic bullet to meet the challenge of HIV/AIDS; countries will need to adopt multipronged approaches. In particular, African nations—where the burden of HIV/AIDS is the greatest in the world—should plan now for how to respond to this rapidly growing epidemic. Shared responsibility between the United States and African nations will empower these nations to take ownership of their HIV/AIDS problem and to work to solve it.

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