



MAJWALA MEAUD > HIV/AIDS

We need smart innovations to fight HIV/Aids in Africa

HIV/Aids has had a devastating impact on the socio-economic growth of the world in the last three decades, leading to loss of lives, increase in the number of orphans, a rise in the number of child-headed families, reduced labour supply and productivity, etc. Though quantifying the impact may not be so easy, but still it has had gross implications on the socio-economic and political sphere in many nations, especially the developing ones.

The macroeconomic effects of HIV/Aids especially in Africa are substantial and policies for dealing with them may be controversial. This include whether expensive antiretroviral drugs should be targeted at economically productive people.

Four million people died from HIV/Aids in 2015, making it the world's fourth biggest cause of death after heart disease, stroke, and acute lower respiratory infection. More than 70 per cent of the world's 40 million people living with HIV/Aids are in Africa. Besides the human cost, HIV/Aids is having profound effects on Africa's socio-economic and political development.

While the impact of HIV/Aids on people may be well documented, it has been much more difficult to observe the pandemic's effects on the African political economy as a whole or to assess how it might affect Africa's future development. Nevertheless, scientist, researchers and medical professionals have dedicated

a lot of time and money on various inventions, innovations and research experiments to understand the broader causes and effects of the HIV/Aids pandemic in order to form effective policy response aimed at eradicating it. But what went wrong?

A goal-directed research sanctioned by the Global Healthcare & Education Initiative-Uganda Chapter (GHEI-Uganda) focusing on the progress of HIV/Aids prevention, control, treatment and positive living found out that with or without treatment, prevention must remain a priority for most developing countries. It emphasised the need to address gaps in HIV prevention and implement interventions, which have the highest impact such as making condoms available, ensuring injections and blood safety, behavioural change campaigns to address risky sexual behaviours and stigma.

According to Mr Dickson Kasozi of GHEI-Uganda, "to reduce new HIV infections, adolescent girls, young mothers and key populations must be placed at the centre of the response. Intensive focus is needed to improve their access to sexual and reproductive health services. Antiretroviral therapy and voluntary male medical circumcision need to be scaled up along with powerful prevention strategies such as pre-exposure prophylaxis for high risk populations.

For testing for HIV, we need to explore new ways of delivering HIV-testing services, in-

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cluding the potential of self-testing."

The same GHEI-Uganda report indicates that the success we have achieved so far gives us hope for the future. However, as we look ahead, we must remember not to be complacent. HIV/Aids is not over, but eradicating it can be achieved.

Fundamental political, financial and implementation challenges remain, but we should not waver. It is time to move forward to ensure that all children start their lives free of HIV; that young people and adults grow up and stay free of HIV and that treatment becomes more accessible so that everyone stays Aids-free.

We all share the challenge to ensure that those who are found to be HIV-positive, are initiated on treatment. The full benefits of HIV interventions and services are not being

realised in many parts of Africa.

There are many people living with HIV but who are unaware of their HIV status. In addition, there are so many people living with HIV who are not accessing antiretroviral therapy. Therefore, the responsibility to end HIV/Aids rests on each of us.

Optimism has never run higher that the Aids epidemic can be defeated. We should all aim at putting an Aids-free generation on the horizon. But for those living in the hardest-hit parts of Africa, there are risks in the policy shifts underway in Washington and other Western capitals. The rising enthusiasm for providing more medicines threatens to come at the expense of promising initiatives for preventing HIV infections in the first place - initiatives that could save many lives, with less money.

Ambitious treatment efforts and smart prevention programmes are, of course, not inherently at odds. But especially in an era of fiscal constraint, these two goals could come into conflict. Keeping sexual behaviour at the centre of the conversation about preventing HIV is essential to reversing the spread of the virus. Only in this way can the vision of an "Aids-free generation" someday become reality.

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