

FIGHT AIDS

DROP THE DEBT TO FIGHT GLOBAL AIDS

Imagine a town where you only see grandparents and young children, and everyone else is mysteriously missing. The schools have no teachers; the hospitals have no nurses. This is what AIDS is causing in impoverished countries. Every day 8,000 people die from AIDS. Without drastic action, 40 million children will be orphaned from the AIDS epidemic by the year 2010.

But, people all over the world are fighting back. They're working to save families and towns. Countries can stop AIDS by lifting the burden of unjust debt and providing affordable medications and funds for education, care and treatment.

The world community needs to invest \$10-15 billion every year to fight HIV/AIDS and other diseases such as tuberculosis and malaria in Africa and around the world. Currently, Sub-Saharan Africa pays out almost \$15 billion each year in debt service, resources that could be used for HIV/AIDS prevention and treatment. You do the math.

THE HIV/AIDS CRISIS IN AFRICA

Of all the regions in the world, sub-Saharan Africa has been hit the hardest by HIV/AIDS. The subcontinent holds only one tenth of the world's population, yet it accounts for 70% of persons who are currently infected. The majority of those infected are women, and the majority contracted the disease as youths. Some 20 million Africans, one-fourth of them children, have already died as a result of AIDS, and millions more will die each and every year unless action is taken now.

In the industrialized West, most people live well for years with HIV/AIDS. This is primarily because they have access to good health care and to medications that can fight the HIV virus. Most Africans, unfortunately, lack these things. Their governments, thanks to two decades of budget-cutting structural adjustment programs, often cannot afford to fund even the most basic health care, and the few Africans who can afford to purchase HIV/AIDS medications are likely to find that they are not readily available in their home countries.

Whether an infected person lives or dies, depends directly on whether they receive life-prolonging medications. Even the World Bank admits, "Not since the bubonic plague of the European Middle Ages has there been so large a threat to hundreds of millions of people—and the future of entire economies. AIDS is no longer a problem of medication. It is a problem of development."


DEBT, STRUCTURAL ADJUSTMENT, AND HIV/AIDS

The policies of the World Bank and IMF in the developing world undermine, rather than contribute to, the fight against global AIDS. More than half of African nations spend more on debt payments than health care for their citizens. Every dollar spent servicing the debt is a dollar not spent on HIV/AIDS treatment and prevention. Furthermore, the IMF and World Bank often demand, as a condition of debt relief and new loans, structural adjustment policies that adversely affect attempts to combat the epidemic.

For example, many governments have been forced to cut the number of clinics they support and often must charge user fees for the ones that continue to operate. As many people cannot afford the user fees, they simply do not go to the clinic when they need medical care. This has severe repercussions for the HIV/AIDS crisis. To give just one example: People suffering from sexually transmitted diseases have an increased risk of



STOP GLOBAL AIDS



infection. Yet many of these STDs are easily treatable, and the number of afflicted persons contracting the HIV virus could be cut by around 40% with treatments costing as little as \$2.11 per person. But when Kenya, following a recommendation by the World Bank, instituted a user fee of \$2.15 to visit STD clinics, attendance fell by 35-60 percent, putting an increased number of people at risk.

And it isn't just the lack of ready access to good basic health care that poses a problem. Poor nutrition is also a factor contributing to increased risk of HIV/AIDS infection, and lack of primary education stymies awareness campaigns. Yet IMF/World Bank structural adjustment policies contribute to poor nutrition and make primary education unavailable to those who cannot afford the school fees.

Moreover, the economic havoc caused by structural adjustment policies helps push people toward risky behavior. Such policies as currency devaluation, privatization, and increased emphasis on production for export tend to disrupt rural economies, displacing workers. When they can no longer earn a living at home, rural workers typically migrate to urban areas in search of work, leaving their families behind. It is not uncommon for such workers to have relations with high-risk commercial sex workers, leaving them vulnerable to infection. Those that do become infected run the risk of spreading the virus on their return home. Often enough, the commercial sex workers are widowed women – whose husbands not infrequently have died of AIDS—who have no other way to support themselves and their children.

DEBT RELIEF IS WORKING TO FIGHT AIDS

Since some countries began receiving debt relief, many devoted more resources to the fight against AIDS. For example, Malawi received a cut in debt service of 30%, or \$28 million. These funds financed the purchase of critical drugs for hospitals and health centers, hiring extra staff and support in primary health centers, and training new nurses.

Uganda also made progress, increasing primary health care spending by 270% as a result of debt relief. \$1.3 million of Uganda's debt relief money has been specifically earmarked for their national HIV/AIDS plan. This amount will be matched by an additional \$1.3 million of government revenue and supported by \$2.4 million of overseas development assistance.

Cameroon put its \$114 million cut in debt service to good use. By the end of 1999, the HIV rate reached eight percent, Cameroon chose to spend part of that savings to fund several emergency actions in their comprehensive national strategic HIV/AIDS plan, including promoting behavior change, making voluntary testing and counseling widely available and preventing HIV transmission from pregnant women to their babies.

BECOME PART OF THE SOLUTION

The AIDS crisis in Africa and many other parts of the world is unparalleled in its devastating effects on lives and communities. Substantial resources are required to combat it now. Payments on international debt divert funds badly needed for treatment and prevention of the virus. The economic disruption caused by World Bank and IMF imposed structural adjustment policies only worsens the problem, putting the most impoverished at greater risk of infection. Full unconditional debt cancellation for impoverished countries and an end to structural adjustment will not, by themselves, solve the problem, but they will go a long way toward enabling countries to address the challenges of prevention and treatment of HIV and AIDS. Join us now to drop the debt to fight global AIDS. Become part of the solution.

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www.africanservices.org

Health GAP Coalition
www.globaltreatmentaccess.org

Africa Action
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Global AIDS Alliance
www.globalaidsalliance.org

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