

HEALTHCARE FOR THE POOR



COMBAT HIV/AIDS AND OTHER PANDEMIC DISEASES

Halt and begin to reverse the spread of HIV and AIDS by 2015 and begin to reverse the incidence of other pandemic diseases like malaria and tuberculosis.

Achieve by 2010, universal access to treatment for HIV and AIDS for all who need it.

They're the three diseases of poverty – malaria, TB, and HIV. For many of the world's poorest people they go hand in hand. TB is now the biggest killer of people with HIV. Half of all children with HIV die before their first birthday and two-thirds before their second – if they are not tested and treated.

33 million people live with HIV. New infections have fallen in Asia and Latin America but in Eastern Europe and Central Asia, they've almost doubled since 2001. Nearly 70 percent of people living with HIV are in Africa.

Every year, 250 million cases of malaria kill almost one million people, over 90 percent of them children. The vast majority are in Africa,

where a child dies of malaria every 30 seconds. Those who survive may have hearing or brain damage.

There has been major progress against malaria, due to increased funding from \$250 million to \$700 million between 2004 and 2007. In Africa, some countries achieved a fivefold increase in bed net coverage for children, and a 50 percent drop in severe malaria cases and deaths. Nearly 200 million nets were delivered to Africa between 2007 and 2009.

There are now more cases of tuberculosis than ever before. In 2008, there were 9.4 million new ones, up from 8.3 m in 2000. It's the second biggest killer after HIV.



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Caritas in action: Dignity and care in Ukraine

"My illness began suddenly with first a loss of sight and then the left side of my body became paralysed. The diagnosis came as a bolt from the blue - I was HIV positive."

Alexander is now 31, and lives with his mother, grandmother and aunt in Kiev in Ukraine. Alexander's mother heard that Caritas Ukraine was aiding people like her son, who needed help to get medicines from the government and support from specially-trained staff.

His friends and girlfriend didn't want to know him when they heard his diagnosis. Caritas Ukraine helps people come to terms with HIV and cares for them when they are in hospital, or in a hospice when their illness is terminal. Caritas Ukraine's homecare programme now visits 90 people, helping them with practical things, like cleaning and cooking.

"I am taking anti-retrovirals now, and my health has improved. Caritas staff still come to visit me. In 2007, I took part in a Caritas conference here in Kiev, called "Stigma or Solidarity" and that was a breakthrough for me. I decided my life should and could go on, and that I would become a psychologist, working with people with HIV and AIDS. I want to help people as I have been helped – to be there for them in the hard times," said Alexander.

Every year, 250 million cases of malaria kill almost one million people, over 90% of them

Oksana and Jaroslav are a married couple from Kiev who met when they were only 16 years old. Jaroslav was using drugs and soon both he and Oksana were addicted. "When I learned I was HIV- positive I was terrified and told no one at first," Oksana says. "My mum already knew from reading my diary, but also did not know how to talk about it."

Then Oksana fell pregnant. "This was a terrible time for me. But Caritas Ukraine sent a nurse and a social worker to our home – they helped me with medicines and vitamins – and provided a doctor who knew how not to pass HIV to your baby."

Social and psychological care is a major part of Caritas Ukraine's work with people – including children - with HIV/AIDS and

staff help them stay on their medicines and to battle the tuberculosis with which some are also infected.

Oksana and Jaroslav have now sadly separated and after being drug-free, are once more addicted. Their child is four and a half and lives with a relative outside Kiev. Caritas Ukraine maintains contact with both of them and supports them in their struggle to make their lives better.

With new infection rates still rising in Eastern Europe, education and public outreach is crucial, so Caritas Ukraine advocates widely. There are solidarity days and candle lit marches and free anonymous testing campaigns, to make sure people can learn their status.

What can we do?

We need to keep the pressure up on the people who make anti-retroviral drugs, and those who pay for them, on behalf of poor people. There has been a big increase in the number of people living with HIV getting the treatment they need. In 2009 it is estimated that 40 percent did. That is 4 million people in the developing world. But 60 percent still don't.

More education is needed. For every 2 people who started on ARVs in 2009, five others were infected. In developing countries, only 30 percent of young men and 20 percent of young women understand how HIV is transmitted.

We must protect unborn children more. Although globally, services to prevent mother to child transmission rose from 10 percent in 2004 to 45 percent in 2008, more robust health systems are needed. Children with HIV or HIV and TB need to be given access to early testing and treatment with more child-friendly and affordable drugs.

We must reduce violence against girls and women. We must advocate to change cultural and social norms and practices which expose women and young girls to infection.

We must provide more insecticide treated bed nets, and support the good leadership in countries which have made serious interventions with the use of bed nets. We must lobby for funding for indoor spraying with safe insecticide.

Advocacy is necessary for better malaria treatment. Many African children are still given less effective medicines despite the expansion of new drugs.

Faster and better testing for tuberculosis needs to be developed, an effective vaccine, and new affordable drugs. Extra measures are needed in the former Soviet Union where there are the highest ever rates of extremely multi-drug resistant TB.

We should remind African governments of their 2001 promise to be spending 15 percent of their budget on health care by 2015. We need to help them keep that promise by reminding rich countries of their promise to dedicate 0.7 percent of their GDP to overseas development.

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Photos:

(Page 1) TB immunisation in North Korea.
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