The Star WEDNESDAY FEBRUARY 15 2006

The ABCs of fighting HIV/Aids with Pepfar

COMMENT

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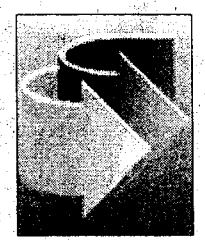

The US is not taking a 'religious bias' approach to combatting HIV/Aids

In 2003, the US launched the President's Emergency Plan for Aides Relief (Pepfar), the largest commitment by a single nation to a global health emergency. Through unprecedented resources ($15-billion – about R92-billion – over five years), this program is supporting expanded local, regional and national responses to the HIV/Aids pandemic.

In South Africa, Pepfar's partnership with the government and over 250 implementing partners has already made a difference. Currently over 40 000 South Africans are receiving life-saving antiretroviral treatment through Pepfar programmes. In addition, during the last year, Pepfar provided care and support to more than 100 000 South African orphans and vulnerable children, and nearly 300 000 South Africans received palliative care services.

In spite of these remarkable achievements, Pepfar has often been the target of criticism in the South African press for what has been described as a "religious bias" in its approach to HIV/Aids prevention. This supposed bias relates to the requirement that one-third of its prevention funds support abstinence education.

Allow me to set the record straight. The US fully supports the balanced approach toward HIV/Aids prevention known as ABC (Abstinence, Be faithful, and correct and consistent use of Condoms). This approach contributed to a drop in prevalence in Uganda from approximately 30% to just over 6%. What's more, compelling new evidence of declining HIV prevalence in Kenya, Zimbabwe and elsewhere has been linked to ABC behaviour changes and highlights the importance of this balanced, evidence-based approach.

In Kenya, for example, the government estimates that HIV prevalence has dropped markedly from 1998 to 2003, from 10% to 7%. Among the government's key findings are that behaviour-change messages are taking root. Among men between the ages of 20 and 24, the percentage who reported more than one sexual partner dropped from over 35% to 18% over the same time period, and the median age for first sex among women rose from 16,7 to 17,8.

As Dr Peter Piot of UNAIDS recently remarked, "The declines in HIV rates have been due to changes in behaviour, including increased use of condoms, people delaying the first time they have sexual intercourse and people having fewer sexual partners." Put another way, each of the ABC behaviour changes took place in those societies now seeing a drop in prevalence.

So yes, the US is supporting increased attention to abstinence messages for youth audiences in many countries. Any suggestion, however, that the US has emphasised abstinence education at the expense of condoms is flatly wrong. In 2005, 25% of Pepfar funding for prevention in the programme's focus countries went to abstinence and faithfulness (A and B) activities, while 22,4% went to condoms and related activities. The plain truth is that through the infusion of new resources, the US is supporting dramatic expansion in all three core prevention categories. I would argue that this approach hardly supports the theory of religious or any other bias. Instead, it unequivocally demonstrates our determination to attack the problem on all fronts and with all available weapons.

These new resources also allow the US to support a diverse portfolio of prevention strategies, including prevention of mother-to-child transmission of HIV, improved blood safety and safe medical injections, programmes that focus on intravenous drug users, HIV-discordant couples, on women, on men and on alcohol abuse.

South Africa rightly receives more Pepfar resources than any other nation in the program. In 2005, more than $150-million (about R923-million) was distributed to some 250 implementing partners, from large international non-governmental organisations, to small community-based groups. In 2006, we anticipate sharply increased resources for South Africa, to approximately $221-million (about R1,3-billion). The growing allocation to South Africa is not only an appropriate reflection of the critical need, but also of the tremendous work being done at all levels by government ministries, NGOs, the private sector and faith-based organisations to address the pandemic.

The effort to stem the spread of HIV/Aids and support those infected or affected is an enormous challenge, and the US is just one player among many supporting the South African government's Operational Plan for Comprehensive HIV and Aids Care. The US will continue to support all effective tools to promote the strategies to reach the populations at risk with programmes that make a difference in fighting the spread of HIV/Aids.

■ *Donal Teitelbaum is the charge d'affaires at the US Embassy in Pretoria. James Clarke will be back on Friday.*