

REGIONAL REPORT ON HIV/AIDS 2005



BUREAU FOR DEVELOPMENT POLICY AND THE REGIONAL BUREAU FOR LATIN AMERICA AND THE CARIBBEAN



SHIFTING PERSPECTIVES AND TAKING ACTION

UNDP'S RESPONSE TO HIV/AIDS IN
LATIN AMERICA AND THE CARIBBEAN

The Answer Lies Within

Table of Contents

Foreword by Elena Martinez and Shoji Nishimoto.....	1
Introduction by Monica Sharma.....	2
Overview ☒	5
Results and Accomplishments.....	15
Meeting the Governance Challenge: Strengthening the National Response.....	16
The Global Fund to Fight AIDS, Tuberculosis and Malaria	20
Creating awareness and Addressing Stigma and Discrimination.....	22
Strategic Partnerships for a Multi- sectoral Response.....	28
Exploring HIV/AIDS and Tourism.....	29
Gender Power Relations and HIV/AIDS.....	31
Faith in Action: Role of Faith-Based Organizations in Addressing HIV/AIDS.....	34
Tuning In: Using the Media.....☒	36
UNDP Workplace Initiative.....☒	37
Scaling up and Sustainability ☒	38
Conclusion.....☒	39
Sources and Resources.....☒	41

Foreword



Elena Martinez



Shoji Nishimoto

Addressing HIV/AIDS has emerged as one of the most urgent development priorities for Latin America and the Caribbean. With over 2 million people currently living with HIV and the epidemic continuing to grow, it has already placed an enormous burden on the health care systems. Left unchecked, sectors such as tourism, agriculture, finance and trade will be severely impacted. The urgent need is to address HIV/AIDS in a way that empowers people to change their perceptions and take action-as individuals and in institutions and communities.

In the past few years, the Latin America and the Caribbean (LAC) region has seen a renewed commitment by UNDP, national governments, stakeholders and development partners in their efforts to address this complex challenge. A number of initiatives, including the Leadership for Results programme, have helped break the silence and denial surrounding HIV/AIDS. Vulnerable populations, including men who have sex with men and people living with HIV/AIDS have participated in formulating programmes and policies that inform the response, and underlying issues such as gender inequality, power relations, stigma and discrimination have been addressed.

UNDP's efforts have contributed to strengthening national responses in the region, forming strategic partnerships and generating a truly multi-sectoral response. However, a lot more needs to be done. UNDP is committed to creating an enabling environment that will halt and reverse the epidemic in the region on an urgent basis, in keeping with the commitment entered into by Heads of State and Government in the Millennium Declaration and the Millennium Development Goals (MDG), and the UN General Assembly Special Session (UNGASS) held in 2001. We will continue to address the governance challenges, enhance capacities among key leaders in every sector of society and forge strong partnerships. We will build capacities of national stakeholders to implement Global Fund financed grants. We will enable and support innovative programmes and initiatives that address the underlying factors driving the epidemic. We will scale up strategies and initiatives that are producing measurable results.

Since the UNGASS, much has been achieved in addressing HIV/AIDS in all regions of the world. This report looks at what UNDP has accomplished over the last few years in addressing HIV/AIDS in the Latin American and Caribbean region, through global and regional programmes, and as a cosponsor of UNAIDS. Our learning and our successes are a result of the hard work and perseverance of not only our staff but also that of our invaluable partners, without whom we cannot stage a strong response to the epidemic.

We hope that the many breakthrough initiatives described in this report will strengthen our collective resolve to continue working in this important area and that the inspiration they provide will help us achieve the MDG and the goals set by UNGASS.

A handwritten signature in black ink, appearing to read 'Elena Martinez'.

Elena Martinez

*Assistant Administrator and Director
Regional Bureau for Latin America and the Caribbean*

A handwritten signature in black ink, appearing to read 'Shoji Nishimoto'.

Shoji Nishimoto

*Assistant Administrator and Director
Bureau for Development Policy*



Introduction

In Latin America and the Caribbean, over 2 million people are currently living with HIV and the number of people affected by the epidemic continues to grow.

The Caribbean bears the highest prevalence rate of HIV/AIDS outside of Sub-Saharan Africa (UNAIDS, July 2004). People living with HIV/AIDS in the LAC region are primarily between the ages of 15 – 49, the most productive segment of the population.

In Latin America the epidemic is concentrated among populations at high risk of HIV infection – injecting drug users and men who have sex with men. The Caribbean epidemic is mainly heterosexual, and in many places it is concentrated among sex workers. But it is also spreading in the general population. (UNAIDS, July 2004).

There is an urgent need for a different approach to address the epidemic at all levels: not only by transforming the systems and structures that have been implemented to respond to the challenges of HIV/AIDS, but most importantly by looking at the underlying causes that fuel its spread in the region.

HIV appears to be spreading among segments of the population that have been systematically excluded from the planning and decision-making processes. It is clear that scaling up the response is going to require new partners and new ways of doing things to achieve a different set of results. Addressing stigma and discrimination, gender and power relations, poverty, violence against women, human rights, commercial sex, the needs of people living with HIV/AIDS of men who have sex with men and of mobile populations, and confronting the challenges within the tourism industry will be vital in developing an appropriate response to the epidemic. It is through this approach that all stakeholders will gain a deeper understanding of how denial and silence affect the spread of HIV/AIDS, and how the empowerment of vulnerable populations can make a vital difference in the response. It is in this context that the UN will be called to lead a response that requires a new kind of leadership and strong partnerships with all stakeholders to ensure results, sustainability and ownership of national responses. Post-UNGASS, where strategies were defined by governments, the UN system needed to redefine itself to support the new strategic directions. As a result, under UNDP's Strategic Results Framework (SRF) and Multi-Year Funding Framework (MYFF), a concrete strategic direction for the organization has been developed.

There is an urgent need for a different approach to address the epidemic at all levels.

INTRODUCTION

The Leadership for Results Programme encompasses the elements of this strategic direction, by creating an enabling environment, and strengthening capacity at national and regional levels. With its governance mandate, UNDP is well-positioned to make an impact on the development of HIV/AIDS policy and to promote leadership at all levels. UNDP has the competencies to build leadership for overcoming institutional inertia, generate innovative approaches and produce groundbreaking results that can halt and reverse the epidemic.

The Leadership for Results Programme is UNDP's contribution in the response to HIV/AIDS. This innovative and synergistic programme has generated over 50 major breakthrough initiatives, touching the lives of thousands directly and millions of people indirectly. Most importantly, this unique approach has placed people at the core of the HIV/AIDS response. It directly taps human potential and for the first time, UNDP is at the forefront of a response which is based on the philosophy that the answer lies within - within individuals, communities, governments, and institutions, rather than imposed from the outside.

The HIV/AIDS epidemic calls for innovative responses that strengthen systems and structures, address the underlying causes, and produce meaningful results.





INTRODUCTION

This is a new level of leadership and commitment for change in development practice in an effort to scale up the response to the HIV/AIDS epidemic. UNDP's unique approach generates individual and collective commitments for actions that meet the challenges of HIV/AIDS. It brings together leaders and stakeholders to examine the root causes behind the epidemic, including the individual values and beliefs that shape their behaviour and actions. It fosters an enabling environment in which stakeholders are empowered to act.

UNDP continues to provide a platform for building partnerships between key stakeholders who can work together to make a difference. UNDP promotes a multi-sectoral response and coalitions for action between governments, non-governmental organizations (NGOs), community-based organizations (CBOs), the private sector and faith-based organizations (FBOs). The result is the creation of a synergy that strengthens the response to HIV/AIDS and favours the achievement of other development goals. This initiative is a process, rather than a product.

This report is an overview of the important work UNDP has done in Latin America and the Caribbean over the past three years to address the complex challenges of the HIV/AIDS epidemic. It is not a definitive collation of all the innovative activities that are occurring across the region. It highlights some of the breakthrough results that are contributing to an effective national and regional response to HIV/AIDS.

I would like to extend a very special thank you to Elena Martinez whose leadership and vision has been an invaluable asset in challenging the underlying causes of HIV/AIDS in Latin America and the Caribbean.

UNDP's unique approach generates individual and collective commitments for actions that meet the challenges of HIV/AIDS.

Monica Sharma

*Director
HIV/AIDS Group
Bureau for Development Policy*

Overview

Latin America

More than 1.7 million people are living with HIV in Latin America today. In 2004, around 95,000 people died of AIDS, and 240,000 were newly infected. Among young people 15–24 years of age, an estimated 0.5 percent of women and 0.8 percent of men were living with HIV at the end of 2004.

The epidemic in Latin America is highly diverse in terms of prevalence and transmission. The Latin American countries with the highest HIV infections rates are on the Caribbean side of the continent and most transmissions in this area are caused by heterosexual contact. In Guyana, 2.5 percent of the adult population is living with HIV/AIDS. And in Honduras, Guatemala, and Belize, the HIV prevalence rate among adults in the general population ranges from 1 to 2.4 percent. In Mexico, Argentina, and Colombia however, prevalence rates are less than 1 percent and HIV is mainly affecting men who have sex with men and injecting drug users. In Brazil, the adult prevalence rate is also less than 1 percent, and the epidemic is spreading increasingly through heterosexual contact, although prevalence rates among men having sex with men and intravenous drug users are high (UNAIDS 2004).

The Latin American countries with the highest HIV infections rates are on the Caribbean side of the continent and most transmissions in this area are caused by heterosexual contact.

HIV/AIDS in Latin America

Adults age 15-49 with HIV/AIDS 2003	1,600,000
New HIV infections 2004	240,000
Adult HIV prevalence (%) 2004	0.6
Women age 15-49 with HIV/AIDS 2004	610,000
Children with HIV/AIDS 2003	25,000
AIDS orphans (ages 0-17) 2003	ND
AIDS deaths 2004	95,000



ND = No Data

Source: UNAIDS 2004 Report on the global AIDS Epidemic

In Latin America, the epidemic is increasingly affecting the poor, who lack the information and the resources to protect themselves.

O V E R V I E W

There are several factors that play a decisive role in the spread of HIV across the region. It has been a challenge to implement condom use and safe sex practices because of prevailing socio-cultural and religious norms. Some countries such as Brazil, have been able to move beyond the status-quo and launch effective condom promotion campaigns. However, in some countries, the anti-condom stance has stymied education and information efforts, and condom use has remained low. In addition, because the practice of men having sex with men is illegal in many Latin American countries and a machismo culture pervades, men who have sex with men and bisexuals are often driven underground. This widespread denial of same-sex relationships and bisexuality increases the likelihood that individuals will engage in high-risk behaviour.

In Latin America, the epidemic is increasingly affecting the poor, who lack the information and the resources to protect themselves. As in other parts of the developing world, young people aged 15-24 are particularly vulnerable to HIV infection. There are an estimated 40 million children in Latin America who live and work on the street, many of whom are forced to engage in transactional and commercial sex to secure food, clothing, and shelter. Sex tourism is a rising problem in the region, and efforts are insufficient to protect these children.

The Caribbean

Outside of Africa, the Caribbean has the highest prevalence rates in the world. Many of the same factors contributing to the rapid spread of HIV through sub-Saharan Africa – extreme poverty, malnutrition, poor health care, and high rates of migration, also afflict the region. Haiti, the poorest country in the region, has the highest prevalence rate, with 5.6 percent of the adult population living with HIV/AIDS. The rate of the HIV infection in the Bahamas is 3 percent, and in the Dominican Republic, 1.7 percent of the adult population is HIV positive.

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index?reportId=5_12846

