

# AIDS in the Context of Development

*Joseph Collins and Bill Rau*



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## Acronyms

<b>AIDS</b>	acquired immunodeficiency syndrome
<b>AIDSCAP</b>	AIDS Control and Prevention Project
<b>CBO</b>	community-based organization
<b>DFID</b>	Department for International Development (United Kingdom Government)
<b>FAO</b>	Food and Agriculture Organization of the United Nations
<b>FOCUS</b>	Families, Orphans and Children under Stress
<b>GNP</b>	gross national product
<b>HDI</b>	Human Development Index (UNDP)
<b>HIPC</b>	Heavily Indebted Poor Country
<b>HIV</b>	human immunodeficiency virus
<b>ICRW</b>	International Center for Research on Women
<b>IDU</b>	intravenous drug user
<b>IGAC</b>	Insiza Godlwayo AIDS Council
<b>ILO</b>	International Labour Organization
<b>IMF</b>	International Monetary Fund
<b>KAP</b>	knowledge, attitude and practice
<b>MAP</b>	Monitoring the AIDS Pandemic
<b>NACP</b>	National AIDS Control Programme
<b>NGO</b>	non-governmental organization
<b>OPEC</b>	Organization of Petroleum Exporting Countries
<b>PTM</b>	Pink Triangle Malaysia
<b>SAP</b>	structural adjustment programme
<b>STD</b>	sexually transmitted disease
<b>TASO</b>	The AIDS Support Organization
<b>UNAIDS</b>	Joint United Nations Programme on HIV/AIDS
<b>UNDP</b>	United Nations Development Programme
<b>UNESCAP</b>	United Nations Economic and Social Commission for Asia and the Pacific
<b>UNRISD</b>	United Nations Research Institute for Social Development
<b>USAID</b>	United States Agency for International Development
<b>WHO</b>	World Health Organization
<b>WHO/GPA</b>	World Health Organization/Global Programme on AIDS

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## Foreword

Social and economic development are essential elements in the battle against AIDS. As the history of other devastating epidemics has shown, vulnerability is magnified by poverty, discrimination and despair. And people's capacity to deal with the threat of disease is fundamentally shaped by the social and economic conditions in which they live.

A vigorous public response to HIV/AIDS goes hand in hand with wide-ranging efforts to improve levels of living for the majority of the population of the developing world. Infection rates will fall, and care improve, when many more people are able to find decent work without leaving their families and communities; when women are empowered; when living standards increase, generated by renewed economic growth and rising wages; when the quality and coverage of the public health and education systems improve significantly; and when new opportunities are created for civic action in a tolerant and democratic context.

In the following pages, Joseph Collins and Bill Rau remind us of the desperate economic and social conditions that form the backdrop for the spread of AIDS in many parts of the developing world. They highlight important responses by local people, who are dealing with the epidemic in innovative ways. And they ask hard questions about the effectiveness of approaches currently underlying some national and international HIV/AIDS programmes.

The paper closes with a partial agenda for further social science research on AIDS in the context of development. The kind of research that leads to policy and programme decisions deserves high priority, and UNAIDS and UNRISD are committed to fostering its development and application.

Peter Piot  
Executive Director  
UNAIDS

Thandika Mkandawire  
Director  
UNRISD

## **Summary/Résumé/Resumen**

### ***Summary***

The AIDS pandemic is destroying the lives and livelihoods of millions of people around the world. An estimated 15,000 people are being infected every day, and the rate is set to rise. The situation is worst in regions and countries where poverty is extensive, gender inequality is pervasive, and public services are weak. In fact, the spread of HIV/AIDS at the turn of the twenty-first century is a sign of maldevelopment—an indicator of the failure to create more equitable and prosperous societies over large parts of the world.

This paper was commissioned by UNRISD, in collaboration with UNAIDS, to provide background for new comparative research on HIV/AIDS as a problem of development. Moving away from an epidemiological or behavioural focus on the pandemic, the essay begins by considering AIDS in the context of widespread and worsening poverty. Two strategies adopted by desperate people, attempting to improve their income, are particularly conducive to the spread of HIV/AIDS. The first is migration in search of work, whether within countries or across borders. The second is poverty-driven commercial sex work. Both place men and women in particularly high-risk situations, in which institutions providing normal support for stable family relations are absent. And both would be largely obviated if adequate opportunities for making a living were available at home.

For some, HIV/AIDS infection is the first major disaster in their lives. But for many more, the disease is just an additional problem on top of many others. The paper discusses the series of shocks which, during the past few decades, have seriously exacerbated the already precarious living conditions of large numbers of people and made them more susceptible to disease. In addition to natural disasters, these shocks include debt crises and structural adjustment programmes that have intensified economic recession, reduced employment and limited the coverage and quality of social service provision in many parts of the developing world. Wars and civil violence have further weakened economies, uprooted populations and diverted much-needed resources from health care. It is important to realize that, in this context, taking care to avoid HIV/AIDS may seem a less immediate concern for many people than simple survival.

From the beginning of the AIDS epidemic, NGOs and community groups have played a critical role in dealing with it. Their importance has been acknowledged by governments, donors and international agencies, which have provided limited, but much-needed, support. Nevertheless, efforts by the broader national and international community to learn from popular initiatives and to adapt their own programmes accordingly have been only partially successful. The third section of the paper by Collins and Rau therefore provides examples of vigorous community responses to the pandemic, and the fourth looks critically at three interrelated approaches formulated by public health and donor agencies to expand and improve their efforts: integration of HIV/AIDS prevention and care with existing sectoral programmes; mainstreaming of prevention and care into normal bureaucratic activities (including planning, budgeting and evaluation); and scaling up effective initiatives to cover a wider area or a larger number of people.

A central conclusion of their study is the importance of understanding not only the *content* of successful programmes, but also the *process* through which they have been developed. If the HIV/AIDS epidemic is to be brought under control, networks of social solidarity and broad-based political action must be strengthened. And opportunities for a decent livelihood must improve. At the heart of this effort is recognition of the skills, resources and knowledge of all groups—men and women, young and old, impoverished and powerful. Top-down, technocratic responses are unlikely to be effective in meeting the extraordinary challenges of the rapidly advancing pandemic.

The paper ends with suggestions for further social science research on HIV/AIDS and development. This includes documenting and analysing global processes that drive the pandemic, so that HIV/AIDS can be integrated into international debates on major development issues. Thus it is important to ask what changes in global trade and financial policy would be required to ensure a renewal of economic growth in developing countries, and what changes in national policies would be necessary to improve the distribution of benefits from growth. It is also extremely important to evaluate global development goals, including those agreed by the OECD Development Assistance Committee and others set at international summits, in the light of the worsening pandemic. It is likely that HIV/AIDS will be the biggest obstacle to achieving these goals—and in fact that it will not be possible to meet them at all unless there is a much more effective response to AIDS.

At national and local levels, new social science research—closely linked to the needs of policy makers and advocates—is urgently needed on the progress of the pandemic in specific circumstances: it is important to know who is affected, why and how; and to devise ways to lessen the vulnerability of particular groups. Although significant efforts have been made to document the social and economic impact of AIDS in some regions and communities, a great deal remains to be done.

It is also important to explore the social, political and institutional factors that seem to have made some national responses to HIV/AIDS more effective than others. Improving the debate on health sector reform, by relating it squarely to the issue of HIV/AIDS, is central to this effort. What elements of recent reform experiences have had a detrimental effect on ability to deal with the epidemic in particular countries? And what steps would be required to improve the response to HIV/AIDS?

Finally, new analysis of concrete attempts by community groups and NGOs to deal with the epidemic is essential. By working closely with these groups, researchers can help them analyse the problems they face. At the same time, research can play an important role in building broader networks for the exchange of experiences and, ultimately, for facilitating the comparative analysis of responses to HIV/AIDS in different social contexts.

Additional suggestions for future work will be found in the paper, which also contains a bibliography chosen for its relevance to HIV/AIDS in a development context.

Since 1970, Joseph Collins (Jcollins@cruzio.com) has researched and written about world hunger and other issues in inequitable development. He is the co-founder of the Institute for Food and Development Policy. His books include **Food First, World Hunger: Twelve Myths**, and **Chile's Free-Market Miracle: A Second Look**. Since 1994 he has been a consultant in community-based responses to HIV/AIDS and HIV/AIDS policy issues in a number of countries in Africa, Latin America and Asia.

Bill Rau (brau42@yahoo.com) has worked on development issues for over 30 years and on policy and socioeconomic themes relating to HIV/AIDS for eight years. Currently, he works as an independent consultant on HIV/AIDS and policy process issues. He is the author of **From Feast to Famine** and numerous studies on development processes and outcomes.

### **Résumé**

La pandémie du sida détruit les vies et les moyens de subsistance de millions d'individus dans le monde. Quelque 15 000 personnes sont chaque jour infectées, et ce taux ne fait qu'augmenter. La situation est pire dans les régions et les pays où la pauvreté est étendue, l'inégalité des sexes frappante et les services publics faibles. En fait, la progression du VIH/sida au début du vingt-et-unième siècle est un signe de mauvais développement, un indicateur de l'incapacité de créer des sociétés plus équitables et plus prospères dans une grande partie du monde.

Cette étude a été commanditée par l'UNRISD, en collaboration avec l'ONUSIDA, afin de servir de toile de fond à une nouvelle recherche comparative sur le VIH/sida en tant que problème de développement. En s'éloignant d'une approche épidémiologique ou behavioriste de la pandémie, le rapport commence par examiner le sida dans le contexte d'une pauvreté très répandue, qui ne fait qu'empirer. Deux stratégies adoptées par des gens désespérés, qui tentent d'améliorer leurs revenus, sont particulièrement propices à la progression du VIH/sida. La première est la migration en quête d'un travail, au sein d'un même pays ou à travers les frontières. La deuxième est la prostitution motivée par la pauvreté. Ces deux stratégies exposent grandement hommes et femmes à des risques, en l'absence d'institutions fournissant un soutien normal en vue de relations familiales stables. Elles auraient été toutes deux largement évitées

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