

Uganda

Strong foundations in HIV prevention boost progress in treatment



- At the end of 2004, Uganda was estimated to be treating more than 40% of people needing antiretroviral treatment (ART). It is expected to reach its "3 by 5" target of treating half the total need within the next six months.
- As of end December 2004, it is estimated that about 40 000 people were on treatment in Uganda, with an average 3 300 people initiating treatment every month.
- Uganda is working to achieve 'universal access' to HIV/AIDS treatment and prevention.
- About 10 000 non-governmental organizations including The AIDS Support Organization (TASO) have teamed up with the public health sector to build social awareness, alleviate stigma surrounding AIDS, provide prevention education and testing and treatment counselling

and to help ensure sustainable HIV/AIDS delivery systems.

- Uganda is an example of a developing country that shows treatment scale-up can be successfully achieved. National funds have been invested in the purchase of drugs and to get programmes started. The US President's Emergency Plan for AIDS Relief and the Global Fund to Fight HIV/AIDS, TB and Malaria have been critical donors to increase access to treatment.
- Uganda shows increased access to treatment is possible in Sub-Saharan Africa. Many thousands of lives are being saved, survival rates are as high as 90% after 15 months of ART.

Haiti

Global Fund helps to turn the tide



- Despite massive challenges in infrastructure, Haiti provided access to ART to estimated an 8% of adults in need, as of end 2004.
- Haiti was one of the first countries to receive funding from the Global Fund, which also responded to the country's specific needs by assisting with simplified reporting and accounting tools.
- Following the funding and initiation of ART programmes, tens of thousands of people sought voluntary testing and counselling.
- A partnership between non-governmental and community-based organizations, missions, people living with HIV and AIDS and the Ministry of Health implemented a unique model of integrated prevention through mobilizing communities in both urban and rural areas.

- Additional support from the US President's Emergency Plan for AIDS Relief enabled 2 800 people to receive treatment in urban and central Haiti between February and September 2004.
- Haiti provides an example of how treatment programmes can be rapidly scaled-up in resource-poor settings.

Country Success Stories

Botswana

Political leadership shows the way



- Faced with the second highest HIV prevalence in the world (37%), the Government has made HIV/AIDS a priority and has adopted a long-term vision to have no new HIV infections by 2016.
 - By 2004, 23 sites were offering ARV therapy. Only two districts had no facilities for ART.
 - By March 2004, over 2 200 health workers had been trained. 536 were recruited to support ART and PMTCT (prevention of mother-to-child transmission) programmes.
 - About one quarter of people on ART receive it through private facilities. In the public sector, ART is free of charge.
 - Treatment adherence is high (85%).
 - Major social mobilization campaigns promote a supportive environment for people living with HIV and AIDS, as well as their families.
- In January 2004, a routine offer of testing was introduced in hospitals. In the first four months, 18 hospitals offered testing to 6 384 people - 86% opted to be tested.
 - Botswana has a successful public-private partnership (The African Comprehensive HIV/AIDS partnership with the Gates Foundation, Merck Foundation and pharmaceutical company Merck & Co.) which plays a critical role in the scale up of HIV testing and AIDS treatment.

Cambodia

National coordination — the key to success



- At end 2002, access to comprehensive HIV/AIDS care and support services in Cambodia was very limited, and almost entirely supported by international NGOs.
 - The last two years have seen significant progress. Services have expanded to rural areas, thanks to a broad partnership and the coordination of the National Centre for HIV/AIDS, Dermatology and Sexually Transmitted infections in the Ministry of Health.
 - The collaboration and coordination of multi-sectoral organizations working in the country has helped drive programmes.
 - By the end of October 2004, there were 4527 people receiving treatment (one in five adults in need). About 7% of all people receiving ART were children.
 - By end of 2004, 75 accredited testing and counselling sites were in place (61 supported by Government / 13 by NGO/one private centre).
- Collaborating with WHO regional offices in South East Asia and Western Pacific, in 2004 Cambodia hosted a workshop to train and facilitate knowledge exchange on ART management between experts from Cambodia, China, Laos, Malaysia, Papua New Guinea, Philippines, Vietnam, India, Indonesia, Sri Lanka and Thailand.

Country Success Stories

Cameroon

Rolling out testing and counselling



- At the end of 2003, WHO and UNAIDS estimated that there were 560 000 people living with HIV/AIDS in Cameroon.
 - In 2004, Cameroon set a national target to provide 36 000 people with ART by the end of 2005. By November 2004, more than 12 000 were receiving treatment.
 - It is estimated that national ART coverage is 14%.
 - Strong political commitment over the past 5 years has played a key role in increasing access to treatment.
 - Costs of ART have decreased dramatically from US\$600 to US\$30 per month in the past four years.
 - With more availability and increased affordability of antiretroviral treatment in the country, testing and counselling has become less costly and more people are coming forward to test for HIV.
- Integrating ART into key medical services has helped increase access to treatment. Eligibility for treatment is assessed at 14 testing and counselling and prevention centres, 160 sites for prevention to mother-to-child transmission, 23 treatment centres and 140 TB screening centres.

Mozambique

First steps towards an ambitious goal



- Slowly recovering from civil war, Mozambique shows that progress can be achieved under extremely difficult circumstances.
 - There is strong political commitment - the national HIV/AIDS plan calls for scaling up ART to 132 000 people by the end of 2008. Overall number of people needing ART is 200 000.
 - The country has a plan to train 2 000 intermediate health care professionals and a new drug management and logistics system is being developed.
 - The amount of people receiving ART has more than doubled in just six months from 2 800 (June 2004) to – 6 300 (November 2004).
 - More than 20 sites offer ART in the public sector through collaboration between the government and NGOs such as the Community of Sant'Egidio, MSF and the Health Alliance International.
- In mid-2004, the World Bank announced the Treatment Acceleration Project - a US\$ 60 million International Development Association grant to support increase of access to HIV treatment in three African countries including Mozambique.

Country Success Stories

Thailand

A country-wide effort



- At the end of 2004, Thailand is treating an estimated 44% of people in need of ART
- The number of people on ART has increased linearly - more than 3,000 new patients plus an additional 200 - 300 children initiated treatment every month between January and August 2004.
- The government has more than doubled its funding for AIDS treatment from 300 million baht (US\$7.7 million) in 2003 to 800 million baht (US\$ 20.5 million) in 2004.
- Thailand currently has over 900 treatment sites. Patient groups and NGOs are working to provide treatment literacy for people living with AIDS to help them make informed decisions about their treatment.
- The national ART programme has put up highly efficient systems which include extensive training of health personnel, standardized ART guidelines, computerized

central procurement and supply management systems with regional centres, laboratory networks, and well-functioning monitoring and evaluation systems.

- The country has also made major efforts to enhance prevention and treatment of HIV opportunistic infections, including TB and meningitis.

Zambia

A rapidly expanding programme



- Zambia is estimated to have ART coverage of 13% as of end 2004.
- The country had almost no AIDS treatment available before November 2002. In January 2003, the Zambian government set a target of getting 10 000 on people on ART before the end of 2005. Within a year, the target had increased to 100 000.
- The government's decision to make ART free-of-charge rapidly boosted testing and counselling among the population.
- The public sector started offering ART with only two pilot sites but gradually expanded to provincial hospitals and district clinics.
- By the end of 2004, ART was available in 53 public sector centres and 24 of 72 districts had at least one site of-

fering ART with 11 districts having two or more sites.

- By September 2004, more than 11 000 people were on treatment through the public sector - an increase of 57% in just three months.
- An additional 2 400 receive ART through the private sector.
- Zambia has an HIV prevalence rate of 15%.