

## World Disasters Report 2008: Acknowledging a Disease as a Disaster!

The 'World Disasters Report' is annually published by the International Federation of Red Cross and Red Crescent Societies: the world's largest humanitarian organization(1). Founded in 1919, the Federation coordinates and directs international assistance to victims of natural and technological disasters. The World Disasters Report 2008, which is 16<sup>th</sup> in the series, is the first in a sense that it focuses on a single disease, HIV/AIDS as a disaster. It is a voluminous report containing seven chapters, 254 pages and 16 tables highlighting and discussing various issues related to HIV and AIDS like the extent of problem, funding, and impact of population mobility, war and natural disasters.



### WHY HIV/AIDS TARGETED AS A DISASTER?

For many countries in sub-Saharan Africa and for a significant number of groups of people where the epidemic is concentrated, the HIV epidemic is undoubtedly a disaster. Government services are overwhelmed by the need for support and treatment, stigma still prevents access even where services exist, and communities are decimated by its effects. This report analyses how the effects of HIV and AIDS on specific countries and key (at-risk) groups of people justify defining the epidemic as a disaster. In the most affected countries in sub-Saharan Africa, where prevalence rates reach 20 per cent, development gains are reversed and life expectancy may be halved. For specific high-risk groups across the world, HIV rates are on the increase but they often face stigma, criminalization and little, if any,

access to HIV prevention and treatment services. Natural and man-made disasters exacerbate other drivers of the epidemic and can also increase people's vulnerability to infection.

According to UNAIDS, almost seven thousand people contract HIV every day, and without a major change in the epidemic's trajectory, AIDS will claim millions more lives(2). Since 1981, more than 25 million people have died of AIDS, and some 33 million are currently living with HIV. AIDS is the fifth major cause of death in middle-income countries, the third in low-income countries and the leading cause in sub-Saharan Africa. Of the seven million people estimated to need anti-retroviral treatment, some five million still do not have access to it.

### KEY FINDINGS

The Report analyzes the enormous economic, social and intellectual toll of HIV and

AIDS and details the vast challenges the epidemic presents to governments, humanitarian organizations and local communities. Ignorance, stigma, political inaction, indifference and denial all contributed to millions of deaths attributable to HIV. The Report dispels myths about those 'other' people who spread HIV – refugees, migrants, people escaping from conflict and poverty. The Report makes it clear that a more effective response to HIV will need to be longer term and better targeted with delivery being more inclusive and better coordinated. In regions with high HIV prevalence like Southern Africa, the long-term impact on education, health, childcare and economic development implies a move from short-term 'fixes' to one of sustained treatment, capacity building and the strengthening of the resilience of local populations(1). The disruption of medical supplies and subsequent interruption of treatment is

evidently life threatening. A longer-term approach means recognizing the implications of a disease with a latency period between infection and death of 15 years or more.

A final chapter deals with the funding of HIV programs and details possible corrective measures by donor governments and partners. According to the Report, estimated annual spending on the response to AIDS in low- and middle-income countries grew from less than US\$ 300 million in 1996 to US\$ 1.6 billion in 2001 and then to US\$ 10 billion in 2007(1). UNAIDS estimates that reaching the goal of universal access to HIV prevention, treatment, care and support by 2010 will require steep annual growth until the total reaches US\$ 40 billion in 2010. Majority of this funding will be required in low- and lower-middle-income countries heavily burdened by HIV and AIDS(2). Raising so much additional money from donor countries will not be easy and the best hope lies in making better use of whatever money may be available. The fact is that much of the money supposedly spent on the response to HIV in low- and middle-income countries never actually reaches those countries or else, once there, is wasted on inefficient bureaucratic procedures and on programs and projects that fail to deliver.

Besides HIV, the Report also includes a section on disaster statistics and analysis of global trends. Overall, disasters in 2007 were slightly less in number (405 vs. 423) and far less deadly than in previous year but the total number of people affected by natural disasters, including floods, storms, droughts and geophysical disasters, rose by about 40 percent as compared to 2006. The combined total of 23,167 people killed by natural and technological disasters was the lowest in the decade, far below the yearly average of 113,000(1).

#### WHAT IS NEEDED?

Fighting bureaucracy, simplifying procedures, im-

proving coordination, confronting gender inequalities, and involving local communities including, especially, people living with HIV - are among the solutions offered by the Report, to improve the effectiveness and efficiency of HIV programs(1). In terms of delivery, a more inclusive and coordinated approach means more involvement and empowerment of local communities, less tied and earmarked aid, greater integration of HIV into all aspects of humanitarian work and a simplification of bureaucratic processes for obtaining and delivering aid(1). Funding for HIV needs to be evidence-based and results-driven. It must reach those who need it more quickly and more fully.

The Report has succeeded in bringing many stark realities about the disease in light. It also justifies its projection of looming threat of HIV epidemic as an emerging disaster. Though the threat is not 'homogenous' and concentrated in few regions and countries, but amount of humanitarian work needed even in those countries is tremendous. The challenges are enormous - but if we fail to meet them, there will be little chance of reversing the spread of one of the most deadly viruses in history.

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