I nfectious diseases such as malaria and tuberculosis burden people around the world, lowering productivity and weighing down already underdeveloped health care systems. Yet even as there has been an ongoing reluctance to invest in solutions to these illnesses, which mainly affect the poor, a new and more devastating epidemic has come along. HIV/AIDS has swept a destructive path through sub-Saharan Africa, and crept, often silently, into some portion of populations in every country of the world. Forty-two million people live with HIV/AIDS, and the number will surpass 100 million within a decade unless a massive response begins immediately.

In a growing number of countries, HIV/AIDS is a catastrophe for economic stability. Income is lost, health care costs explode, savings turn into debt and children drop out of school. Governments face stripped-down ranks of essential personnel: doctors, teachers, civil servants. When millions of farmers die, famine follows. Behind the scenes, women bear the brunt of the burden in their multiple roles as caretakers, subsistence farmers and breadwinners, and as people who, facing violence and discrimination, stand less of a chance of protecting themselves.

HIV/AIDS may be the world’s most serious development crisis. Without progress in fighting it, prospects dim greatly for achieving any of the MDGs.

**UNDP Responds**

Because HIV/AIDS is a factor in so many development concerns, UNDP works with countries to integrate responses to the epidemic across national planning and budgets, including poverty reduction strategies, and move beyond the narrow confines of HIV/AIDS as a public health intervention. We urge dynamic leadership from all corners, including civil society and the private sector, while recognizing that community initiatives are among the most effective in offering prevention, care and social support. In the worst affected countries, where social and health infrastructures are crumbling in the face of illness and death, UNDP helps to stem further declines, provide human resources where necessary and devise strategies to cope with the loss of skilled workers.

All of our activities are imbued with the principles of human rights and gender equality, emphasizing that people with HIV/AIDS should play an active role in their societies, without stigma. We support communications strategies that relay messages of hope, and advocate for legislation against discrimination as well as leadership roles for people living with HIV/AIDS.

UNDP is also well placed to assist governments in attracting growing flows of international funding to respond to the epidemic. Since it was launched in 2001, the Global Fund to Fight AIDS, Tuberculosis and Malaria has become a major source of new financing. We work in close partnership with the Fund, which is distributing $1.5 billion in 2003 and 2004, 60 percent of it for HIV/AIDS. UNDP itself has launched an accelerated approach to the epidemic in the hardest-hit countries. In Botswana, where a 15-year-old boy now has a 90 percent chance of dying from AIDS, we are assisting the government and other development partners in drawing up a five-year national strategy to cope with severe social and economic fallout. In Eastern Europe and the Commonwealth of Independent States, where infection rates are climbing most rapidly, we have put sports stars and people with HIV/AIDS at the forefront of massive public information campaigns.

### UNV: The Human Face of an Epidemic

**T**serayi Machinda is at the centre of the HIV/AIDS epidemic in his native Zimbabwe. The UN volunteer works with the National AIDS Council to combat the disease throughout Manicaland, a province with more than 100,000 orphans and 15,000 known cases of AIDS. “We have 4,000 Zimbabweans dying of AIDS each week,” he says.

Tserayi fights the spread of HIV/AIDS with drama productions and workshops on safe sex, enlisting the help of village chiefs to urge people to change their behaviour. He belongs to a global corps of UN volunteers working with communities in Africa, Asia, the Caribbean and Latin America. As counsellors, they offer home care and help set up self-help groups for people living with HIV/AIDS. They advise on national action plans and assist HIV-positive people in earning a living.

Through these efforts and many more, the United Nations Volunteers (UNV), administered by UNDP, provides a human face and voice to the epidemic. Building on three decades of experience and the contributions of over 30,000 volunteers, UNV is also responding to increasing demand from governments and UN partners to provide professional expertise to offset the devastating loss of skilled workers due to HIV/AIDS.

Encouraging local volunteering for development, UNV supports over 20 UN organizations in areas as diverse as humanitarian relief, the promotion of human rights, electoral supervision, peacebuilding and poverty reduction. In 2002, UNV mobilized 5,234 volunteers, representing 158 nationalities, who served in 139 countries.
The Arab Region: People Break the Silence

All Arab countries have reported increases in HIV/AIDS prevalence rates, with the number of people in the region living with HIV/AIDS now surpassing 500,000. Instability and high migration rates fan the epidemic’s spread. Yet social stigma has prohibited nearly any form of public discussion. UNDP, collaborating with government officials, NGOs, people living with HIV/AIDS and cultural celebrities, decided it was time to break the silence.

Starting in September 2002, UNDP offices across the region, coordinated by our Regional Bureau for Arab States, have held events in different countries to encourage initiatives in response to HIV/AIDS. In Yemen, national HIV/AIDS programme managers from 17 countries agreed to work on partnerships and policies that underscore links between the epidemic and the full spectrum of development issues. In Tunisia, civil society organizations from 14 countries created the Network of Arab Civil Society Organizations to coordinate prevention efforts. In Egypt, top entertainment stars affirmed their role as ambassadors in fighting HIV/AIDS, including the Egyptian singer Hakim, who declared he would regularly speak about it in his concerts.

Together, these and other initiatives now form a comprehensive regional campaign that is marshalling media coverage, targeting discrimination, supporting emerging leaders, and mobilizing action across governments, NGOs and civil society. As one workshop participant in Tunisia concludes, “If we can speak with a unifying voice, we will be much stronger and more effective advocates for our cause.”

Cambodia: Building Capacity Through Conversation

While the HIV/AIDS prevalence rate has dropped slightly in Cambodia, thanks to concerted efforts by the government and the international community, it remains the highest in Asia. Among people aged 15 to 49, about 2.6 percent now carry the virus—several hundred thousand Cambodians could develop AIDS in the coming years.

A team of UN agencies is backing Cambodia’s actions to combat the epidemic, with UNDP helping to coordinate aid, set up advocacy programmes and train new leaders. Since HIV/AIDS is much more than a public health issue, touching all aspects of a country’s development, we have built strong links with government partners across every ministry. Our Leadership Development Programme has spearheaded campaigns that have brought in central authorities, local leaders, NGOs and Buddhist monks. As people with deep roots in their communities, they can ease social taboos and spread prevention messages, while urging dignified treatment of people with HIV/AIDS.

In 2003, drawing on a highly successful UNDP project in Ethiopia and experiences in Senegal, we began assisting local authorities in seven provinces to hold “community conversations.” In exploring their concerns together, local people develop plans for a local response. And to create an atmosphere of openness about HIV/AIDS across the nation, a television and radio ad campaign is about to go to air. Ordinary people will spread the word: “I too feel that I have difficulties in discussing this issue, but I must find the courage to do it. The change begins with me.”