Realizing global prevention and control of Human Immunodeficiency Virus infection: Role of higher education

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Session Objectives

1. Specify the eight Millennium Development Goals and focus on MDG-6.
2. Provide an overview of the current status of global epidemic of HIV/AIDS.
3. Explain the challenges pertaining to realization of MDG-6 by 2015.
4. Discuss the role and responsibilities of higher education in global prevention and control of HIV infection.
The Millennium Development Goals
(based on The Millennium Declaration, 2000)

MDG 1: Eradicate extreme poverty and hunger
MDG 2: Achieve universal primary education
MDG 3: Promote gender equality and empower women
MDG 4: Reduce child mortality
MDG 5: Improve maternal health
MDG 6: Combat HIV/AIDS, malaria and other diseases
MDG 7: Ensure environmental sustainability
MDG 8: Develop a global partnership for development

(Source: U.N. Millennium Development Goals, n.d.)
MDG Goal 6: Combat HIV/AIDS, Malaria and Other Diseases

Target 6.A:
- Have halted by 2015 and begun to reverse the spread of HIV/AIDS.

Target 6.B:
- Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it.

(Source: U.N. Millennium Development Goals, n.d.)
MDGs: The current reality

Three summary findings:

➢ Progress made on any goal varies from region to region (and country to country).

➢ Progress made on different targets varies within the same goal.

➢ Progress made on all eight goals varies from goal to goal.
Global Prevalence of HIV (1990-2010)

People Living with HIV by Region, as Percent of Global Total, 2010

- Sub-Saharan Africa: 67%
- South/South-East Asia: 12%
- Eastern Europe/Central Asia: 4%
- Central/South America: 4%
- North America: 4%
- Western/Central Europe: 2%
- East Asia: 2%
- Middle East/North Africa: 1%
- Caribbean: 0.6%
- Oceania: 0.2%

Global HIV Incidence and AIDS-Related Deaths (1990-2010)

NEW HIV INFECTIONS AND AIDS-RELATED DEATHS


Incidence of HIV, Prevalence of HIV and Deaths due to AIDS (1990-2009)

The number of people living with HIV continues to rise, due to life-prolonging treatment.

* All AIDS-related figures are the midpoint in a range. The estimate of 2.6 million new infections in 2009, for example, is based on a range of 2.3 million-2.8 million. The complete data series of ranges and corresponding midpoints is available at http://mdgs.un.org.
Prevention and Treatment – The dual approach

- Between 1997 (when incidence peaked) and 2009, a drop of 21 percent in incidence noted.
- From 2004-2009, persons on antiretroviral therapy increased 13-fold. By end of 2009, 5.25 million people were receiving ART in low- and middle-income nations; this is an increase of over 1.2 million people since December 2008.
- AIDS-related deaths decreased by 19 percent over the time period December 2008 to end of 2009.

The UNAIDS vision

0

ZERO NEW HIV INFECTIONS.
ZERO DISCRIMINATION.
ZERO AIDS-RELATED DEATHS.

Young People as Percent of Global Number of New HIV Infections, 2010

New Infections = 2.7 million

NOTE: Calculations are estimates.
Some Reasons for focusing on adolescents and young adults

1. Constitute current and/or future learners in post-secondary institutions.
2. Compose the future labor force both within and outside academia.
3. Belong to sexually active and reproductive age group in the population. (In the US, by age 19, 7 in 10 males and females have had sexual intercourse.) (Abma, Martinez, & Copen, 2010).
5. Educate peers and others about prevention and control.
Challenging issues with global HIV prevention and control

1. Comprehensive knowledge about HIV prevention

- 1 out of 3 men and 1 out of 5 women in developing regions have comprehensive knowledge and correct knowledge of HIV

- Knowledge about use of condoms to prevent HIV infection has increased

- Knowledge gaps between male and female youth; urban and rural areas

(Source: The Millennium Development Goals Report, 2011, p. 38)
Challenging issues with global HIV prevention and control

2. Testing

– 1 out of 5 of the estimated 1.2 million persons living with (HIV) infection in the United States at the end of 2008 were not aware of their infection


3. Referral to care and treatment services

– Absence of guaranteed referral to care and treatment services leading to loss to follow-up
Challenging issues with global HIV prevention and control

4. Antiretroviral treatment

– Coverage of ART in low- and middle income-nations continued to increase in 2010 and reached 47% of those needing it (estimated 14.2 million)

– However, for every two persons starting treatment each year, five new persons are infected with HIV.*

Ten Roles and Responsibilities for Higher Education Institutions

1. **Education**: Primary role; educate both internal and external stakeholders, including policy makers

2. **Training**: Develop and offer skill-based training programs in risk reduction for students; pre-service and in-service training programs for K-12 teachers

3. **Direct Services**: Provide risk reduction services (voluntary counseling and testing; condom distribution; diagnosis and management of STIs)

4. **Human Rights and Gender Equality**: Promote an agenda for gender equality and human rights through all available means (curricula, training, and advocacy).
Ten Roles and Responsibilities for Higher Education Institutions

5. **Advocacy**: Advocate for policies that protect and advance the interests of especially vulnerable and disadvantaged groups in the population. Develop and implement AIDS policy for own institution.

6. **Community Outreach**: Offer direct service provision through volunteer and service learning opportunities.

7. **Research**: Conduct basic and applied research for innovation and implementation particularly in areas of behavior change, testing, service delivery, treatment, and scaling-up programs.
Ten Roles and Responsibilities for Higher Education Institutions

8. **Evaluation**: Conduct (formative and summative) evaluation of programs and share results.

9. **Evidence-driven knowledge base**: Create and share “what works” and “what doesn’t.”

10. **Capacity Building and Fundraising**: Develop partnerships with NGOs, PVOs, and other organizations for capacity building and shared fundraising.
### Table 1.1 Key indicators for the HIV epidemic, 2002-2010

<table>
<thead>
<tr>
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<th>2002</th>
<th>2003</th>
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<th>2009</th>
<th>2010</th>
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</thead>
<tbody>
<tr>
<td>Number of people living with HIV (in millions)</td>
<td>29.5</td>
<td>30.2</td>
<td>30.7</td>
<td>31.0</td>
<td>31.4</td>
<td>31.8</td>
<td>32.3</td>
<td>32.9</td>
<td>34.0</td>
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<tr>
<td>Number of people newly infected with HIV (in millions)</td>
<td>3.1</td>
<td>3.0</td>
<td>2.9</td>
<td>2.8</td>
<td>2.8</td>
<td>2.7</td>
<td>2.7</td>
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<td>2.7</td>
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<tr>
<td>Number of people dying from AIDS-related causes (in millions)</td>
<td>2.0</td>
<td>2.1</td>
<td>2.2</td>
<td>2.2</td>
<td>2.2</td>
<td>2.1</td>
<td>2.0</td>
<td>1.9</td>
<td>1.8</td>
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<tr>
<td>% of pregnant women tested for HIV</td>
<td>8%</td>
<td>13%</td>
<td>15%</td>
<td>21%</td>
<td>26%</td>
<td>35%</td>
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<tr>
<td>Number of facilities providing antiretroviral therapy</td>
<td></td>
<td></td>
<td></td>
<td>7700</td>
<td>12400</td>
<td>18600</td>
<td>22400</td>
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</tr>
<tr>
<td>Number of people receiving antiretroviral therapy</td>
<td>300000</td>
<td>400000</td>
<td>700000</td>
<td>1330000</td>
<td>2034000</td>
<td>2970000</td>
<td>4053000</td>
<td>5255000</td>
<td>6650000</td>
</tr>
<tr>
<td>Number of children receiving antiretroviral therapy</td>
<td>71500</td>
<td>125700</td>
<td>196700</td>
<td>275400</td>
<td>354600</td>
<td>456000</td>
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<tr>
<td>Coverage of antiretroviral medicines for preventing mother-to-child transmission</td>
<td>9%b</td>
<td>14%b</td>
<td>23%b</td>
<td>33%b</td>
<td>43%b</td>
<td>48%b</td>
<td>48%c</td>
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</tbody>
</table>

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*In low- and middle-income countries.*

*b The coverage data includes provision of single-dose nevirapine which is no longer recommended by WHO. It should not be compared with the previous years. When including single-dose nevirapine, the coverage in 2010 is 59%.*

*c This data does not include single-dose nevirapine regimen which is no longer recommended by WHO.*
The world is watching…

“Meeting the goals is everyone’s business. Falling short would multiply the dangers of our world – from instability to epidemic diseases to environmental degradation. But achieving the goals will put us on a fast track to a world that is more stable, more just, and more secure.”

“Billions of people are looking to the international community to realize the great vision embodied in the Millennium Declaration. Let us keep that promise.”

--Ban Ki Moon, UN Secretary-General, 2010
(Foreword, The Millennium Development Goals Report 2010, p. 3)
Selected References


Selected References


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