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POLICY

PROGRAMME IMPLEMENTATION

IMPLEMENTATION OF DECISIONS ADOPTED BY THE GOVERNING COUNCIL
AT ITS PREVIOUS SESSIONS

The role of UNDP in combating HIV and AIDS

Note by the Administrator

Summary

The Governing Council, in its decision 90/9 of 23 February 1990, called upon the United Nations Development Programme, within the framework of national HIV/AIDS plans, to exercise its role in assisting Governments, at their request, to respond effectively to the problems of HIV and AIDS. It also decided to consider the undertaking by the United Nations Development Programme of a study on the socio-economic impact of the AIDS pandemic in order to enable countries to address the problem and deal with it. The present report is presented to the Governing Council in response to that decision.

I. INTRODUCTION

1. The WHO/UNDP Alliance to combat AIDS was signed by the Administrator of the United Nations Development Programme (UNDP) and the Director-General of the World Health Organization (WHO) on 29 March 1988. This Alliance seeks to ensure a co-ordinated and complementary response to the human immunodeficiency virus (HIV) epidemic by combining the strength of WHO as international leader in health policy as well as in HIV-related biomedical matters and of UNDP as a leader in socio-economic development. The development imperatives are to reduce further transmission of the virus, lessen the personal and social ramifications of HIV infection, and assist Governments in forecasting and planning for the future social and economic impact of the global epidemic. The Administrator has already urged all Resident Representatives, wherever possible, to ensure that HIV/AIDS prevention and care activities be considered in fifth cycle programmes.

II. THE WHO/UNDP ALLIANCE

2. The Governing Council, in its decision 90/9 of 23 February 1990, re-endorsed the WHO/UNDP Alliance. It recognized that the comparative expertise of UNDP in social and economic development would be important in assisting Governments to respond effectively to this threat to the well-being of people. The decision, therefore, called upon UNDP to strengthen its capacity to ensure that Governments can effectively implement their national AIDS plans. Further, in carrying out these activities, UNDP was requested to promote and support the full utilization of community-based organizations in programme development and delivery.

3. The national short- and medium-term plans for the prevention and control of HIV/AIDS have provided a working framework for Governments, donors and non-governmental organizations (NGOs). Increasingly, UNDP field offices are responding to requests from Governments for assistance. For example, UNDP is providing assistance through the fourth country programme for Thailand to implement a series of initiatives designed to minimize transmission through sexual behaviour and drug usage, to secure the blood and the blood product supply and to involve NGOs in prevention and support activities. In the Gambia, UNDP is providing assistance to district-level HIV/AIDS groups involving community-based volunteers. In Sierra Leone, UNDP is providing support to the Government in working with NGOs which operate HIV-testing centres. In many countries, UNDP is a participant in national HIV/AIDS committees and has assisted in the organization of HIV/AIDS donor conferences. At present, approximately \$20 million in national indicative planning figures (IPFs) has been committed for or planned for HIV/AIDS prevention and control.

4. With the establishment of activities to respond to the HIV epidemic in virtually all countries of the world, an important but initial stage of the implementation of the Alliance has been completed. In response to Governing Council decision 90/9, the priorities of the next stage for UNDP will be to increase the understanding of the development implications of the epidemic and to strengthen UNDP capacity to assist Governments effectively in this area.

III. THE SOCIAL AND ECONOMIC IMPACT OF THE EPIDEMIC

5. The epidemic is still relatively new. No event or phenomenon in living memory quite parallels it. The impact of the epidemic will be wide-spread, its repercussions, economic and social, affecting both individuals and communities. Without some knowledge of its probable impact, prevention and care programmes will remain primarily directed at those known to be affected. Forward planning to minimize potential economic, psychological and social disruptions will be hampered.

6. The Governing Council decided to consider at its thirty-seventh session (1990) the undertaking by UNDP of a study of the socio-economic impact of the AIDS pandemic in order to enable countries to address the problem and deal with it. UNDP is currently in the process of determining how best to respond to these requirements.

7. The determination of the probable effects of this pandemic will involve an unusually wide range of academic disciplines: not only economics, demography and sociology, but also development studies, psychology, social anthropology, women's studies, ethics, political science, to name some but not all. Thus, there is a need to determine how best such multidisciplinary research can be carried out: by linked but separate research institutions or by multidisciplinary research teams in each institution, for example. All modes of transmission will need to be encompassed: sexual, intravenous drug use, iatrogenic and occupational.

8. In response to the Governing Council decision, UNDP has held consultations with the WHO Global Programme on AIDS, other organs and agencies of the United Nations system, member Governments, financial institutions, including the World Bank, academics and experts. The consensus was that while there was an urgent need to initiate such studies, the long-term nature of the HIV epidemic was such that it was equally important to create the institutional capacity within countries or subregions to establish a programme of research. Studies of the social and economic impact of the HIV epidemic will, to a great extent, be country or community specific and must essentially be linked to national planning processes as well as to policy and programme development and delivery.

9. It is therefore proposed that a preparatory phase be undertaken immediately to review existing research studies and methodologies, to determine the approach to be adopted for programming implementation, to identify potential collaborating institutions and to explore funding modalities. The estimate cost for the preparatory phase is \$150,000, which amount will be provided by UNDP from Special Programme Resources (SPR). Consequent to this phase, it is anticipated that a longer-term programme of assistance will be initiated. Substantially increased funding for programme activities, including country-level studies, will be required and could be sought from a variety of sources. UNDP, WHO, the World Bank and other donors will be invited to share in the cost of this programme.

IV. STRENGTHENING UNDP CAPACITY TO RESPOND

10. The HIV epidemic carries with it the requirement for new expertise, new institutional arrangements, new programmes and new financial resources. UNDP is currently in the process of determining how best to respond to these requirements.

11. A number of activities for strengthening UNDP ability to respond, including increasing the capacity of field offices to sustain and strengthen national HIV/AIDS programmes have been initiated. It is planned to prepare a handbook to assist field staff to understand the development implications of the epidemic so that the required support can be provided to Governments in the preparation of country programmes and in programme development and delivery. This handbook will then be used in the country-level training of UNDP staff, executing agencies and Governments. Consultations have already been initiated with WHO and with others on the content and funding of these training courses. There is a need to increase our understanding of the longer-term implications of the epidemic for development assistance. In response to this, UNDP has asked a range of individuals, particularly from countries with more seriously affected populations, to reflect upon its possible future impact on their communities and societies. These reflections will be of assistance in planning for a longer-term response to this emerging global concern.

12. The Administrator seeks the views of the Governing Council on the foregoing proposals.
