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PROGRAMME MATTERS

Co-operation against AIDS

Report of the Administrator

A. Introduction

1. The Governing Council was advised at its thirty-fourth session that the Administrator of the United Nations Development Programme (UNDP) would collaborate with the World Health Organization (WHO) and other agencies in the efforts to fight the disease known as Acquired Immunodeficiency Syndrome (AIDS). In its decision 87/28 of 19 June 1987 entitled "Co-operation against AIDS", the Council noted that concrete proposals would be submitted at its special session in February 1988. The Administrator is hereby submitting proposals for consideration by the Council. Additional information on activities at the country level will be made available to the Council at its special session.

2. First identified in 1981, AIDS has now become a world-wide epidemic. Eight countries reported cases of AIDS in 1981; as of 1 November 1987, 62,811 cases of AIDS had been officially reported to WHO from 127 countries. No cure has yet been found for AIDS. This epidemic, which has no geographic, social, racial or cultural boundaries, demands a global response.

3. WHO is leading the global fight against AIDS. During the Third Meeting of Participating Parties for the Prevention and Control of AIDS, which took place at WHO headquarters, Geneva, on 27 and 28 April 1987, the Administrator made a commitment on behalf of UNDP to join in an international campaign to fight AIDS. The participants in this meeting included representatives and officials from developed and developing countries, and from WHO, UNDP, the United Nations Children's Fund (UNICEF), the United Nations Fund for Population Activities (UNFPA), the World Bank, the United Nations Educational, Scientific and Cultural DP/1988/1 English Page 2

Organization (UNESCO), the European Economic Community (EEC) and several non-governmental organizations.

4. At the Third Meeting of Participating Parties, UNDP pledged support for global and regional activities, and announced its intention to request the resident representatives to take up the matter of AIDS with the national authorities and international agencies concerned, in close co-operation with WHO. Resident representatives have been contacted and advised on how best to assist Governments in this programme.

5. On 15 May 1987 the Fortieth World Health Assembly endorsed the establishment of a Special Programme on AIDS as well as the Global Strategy for the Prevention and Control of AIDS (resolution WHA40.26).

6. At the invitation of the Administrator, extended during the Third Meeting of Participating Parties, Dr. Jonathan Mann, Director of the WHO Special Programme on AIDS, briefed the Governing Council during its thirty-fourth session in June 1987 on the global AIDS situation and its implications for international co-operation. In its decision of 19 June 1987 entitled "Co-operation against AIDS", the Council took note of the statement by the representative of WHO and noted with satisfaction the response of the Administrator to collaborate with WHO and other agencies. As stated above, the Council noted further that concrete proposals would be submitted to its special session in February 1988 (decision 87/28 of 19 June 1987).

7. The Economic and Social Council, in its resolution 1987/75 of 8 July 1987, drew the attention of the General Assembly to World Health Assembly resolution WHA40.26; called upon all States to take active measures to prevent and control AIDS in line with the global strategy; and urged all appropriate organizations of the United Nations system, including the specialized agencies, as well as bilateral and multilateral agencies and non-governmental and voluntary organizations, to support the world-wide struggle against AIDS in close co-operation with WHO in its role of directing and co-ordinating the urgent fight against AIDS.

B. Background

8. According to WHO, the number of AIDS cases so far diagnosed is much smaller than the true number of people actually infected with the AIDS virus. Symptoms of the dread disease may not develop for five or more years after an individual is infected with the AIDS virus. It is projected by WHO that by 1992 as many as 3 million people may be stricken. Many more millions of people are now infected with the virus, most of whom do not know it.

9. As stated in WHO publications, the AIDS epidemic affects both industrialized and developing countries and it threatens economic and social development through its impact on adults 20-49 years old, men and women in their prime working years.

10. The world-wide AIDS epidemic also threatens public health. WHO has noted that when the AIDS virus infects pregnant women, infant mortality rises; in some areas, an alarming percentage of children are being born with AIDS. The interaction of

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the AIDS virus with other diseases sparks outbreaks of otherwise controllable infections, and the care of AIDS patients places enormous burdens on already limited health resources. Fear and ignorance of AIDS break down vital social relationships between communities, families and individuals and may even lead to political problems at the national and international level.

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ll. When the AIDS issue is addressed, the following considerations should be borne in mind:

(a) AIDS, while not having been identified in all countries, must be regarded as a spreading epidemic;

(b) While the present morbidity and mortality of AIDS cannot compare with other communicable diseases such as malaria, schistosomiasis, diarrhoeal diseases, respiratory infections and others, the rate of Human Immunodeficiency Virus (HIV) infection is growing alarmingly;

(c) The personal and societal stress caused by AIDS will require exceptional commitments and counselling skills at government, community and family levels;

(d) For advice on AIDS programmes UNDP will rely on WHO, which is the leading and co-ordinating international organization. Other partner agencies such as UNICEF, UNFPA, the World Bank and UNESCO will be consulted, as appropriate;

(e) The prime responsibility for AIDS programmes rests with the national authorities.

C. UNDP co-operation against AIDS

12. UNDP support to AIDS programmes is based on the following global strategy: (a) prevention of HIV transmission; (b) reduction of morbidity and mortality associated with HIV infection; and (c) reduction of the impact of AIDS on the socio-economic conditions of countries.

13. In view of the unprecedented nature of the AIDS pandemic and the urgency surrounding it, and the need therefore to act quickly to meet the changing needs in continuous consultation with WHO and other agencies, UNDP has taken early action in a number of areas.

14. UNDP participation in national AIDS programmes is guided by the strategies outlined in the WHO document of March 1987 entitled "Special Programme on AIDS: Strategies and structure - projected needs". <u>1</u>/ In order to give maximum flexibility to the WHO Special Programme on AIDS, global and regional projects have been launched under preparatory assistance.

15. The UNDP global and regional programmes have allocated \$3.5 million and are currently supporting AIDS activities that are of general value and importance and of direct relevance to country projects. These activities include dissemination of global messages on AIDS; promotion of international consensus and exchange of DP/1988/1 English Page 4

information; epidemiology and impact assessment; promotion, co-ordination and support of research; laboratory support for research and prevention; intersectoral co-operation; preparation of guidelines and educational materials; and centrally managed missions to assist developing countries in the preparation and initiation of country-specific AIDS plans and programmes.

16. Steps are currently being taken to establish a joint UNDP/WHO programme progressively to make blood supplies safe throughout the world by assisting with the installation of up-to-date blood screening and testing facilities. It is expected that other multilateral, bilateral and non-governmental organizations, particularly the International Red Cross and the Red Crescent, will participate in this urgent effort.

17. With regard to national programmes, the resident representatives have been requested to examine the possibility of including, where appropriate, an AIDS component in existing UNDP-assisted projects and/or to design a new project dealing with AIDS exclusively. At the country level UNDP is supporting programmes which - depending on the case - include: creation of a broadly representative AIDS committee; epidemiological assessments; resource assessments; establishment of surveillance programmes; development of laboratory capability to support epidemiological and diagnostic work; strengthening of the capacity of national health systems to recognize, diagnose and manage HIV infections and associated clinical manifestations; educational programmes and services for health workers at all levels; and prevention programmes.

18. The AIDS component of UNDP country programmes is planned and implemented in full consultation with, and bearing in mind the activities financed by, the Governments themselves and other donors. As experience in AIDS programmes is being gained, more detailed approaches may be considered for future funding of AIDS programmes.

D. Management and co-ordination

19. The Special Programme on AIDS was created by WHO as a focal point for global AIDS prevention and control. The Director of the Special Programme on AIDS, who reports directly to the Director-General of WHO, will ensure that the Special Programme will be co-ordinated with and benefit particularly from: (a) other WHO research and operational programmes, including those supported by UNDP; and (b) the programmes of other multilateral, bilateral and non-governmental agencies.

20. UNDP headquarters and the field offices are fully committed to collaborate, as appropriate, with WHO - the leading international agency on AIDS - and other interested multilateral, bilateral and non-governmental agencies in the preparation and implementation of programmes to combat AIDS.

Notes

1/ WHO/SPA/GEN/87.1.
