

AIDS-free by 2030

What is the issue?

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- In July 2000, the UNSC adopted **Resolution 1308**, calling for "urgent and exceptional actions" to mitigate the threats posed by HIV/AIDS.
- As the **first disease to be the subject of a UNSC resolution**, the exceptional status of HIV/AIDS has brought about unprecedented levels of international funding allocated primarily in developing countries where responses to the disease have been scarce.

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What happened then?

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 While the exceptional approach to HIV/AIDS was warranted in the earlier stages of responses at the national level, it has become increasingly ineffective over time.

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- The **overdependence on international assistance**, coupled with the overwhelming policy preference towards HIV/AIDS, has resulted in the marginalisation of other pressing health threats such as malnutrition.
- Most importantly, there has been a stagnating and even declining trend of HIV/AIDS international financial assistance in recent years.
- In light of the continuous economic boom in India and China, international funding agencies now argue that these countries should be donors instead of recipients of HIV/AIDS-specific grants.
- Without renewed and increased commitment from international donors and recipient governments, the sustainability of future national HIV/AIDS programmes is in doubt.

What India is doing now?

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• In response to the changing global health agenda, most of these countries are prioritising the integration of HIV/AIDS programmes into existing health-related systems.

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- \bullet An integration of HIV/AIDS interventions and primary health-care systems has taken place in India from 2010 onwards. \n
- For instance, six components of the National AIDS Control Programme (NACP)-III merged with the NRHM in 2010.
- \bullet The integration of HIV/AIDS responses under the umbrella health system is ongoing in the NACP-IV.
- At the 2016 high-level meeting at the UNGA, India pledged to follow targets towards ending HIV/AIDS as a public health threat in the next five years, and ending the epidemic by 2030.
- India is now playing a larger role in funding its HIV/AIDS programmes, twothirds of the budget for the NACP-IV is provided by the Government of India and comes from the domestic budget.
- Indian HIV/AIDS programmes have progressively become less dependent on foreign assistance.
- But in order to ensure the sustainability of the HIV/AIDS interventions, continuous integration of HIV/AIDS programmes into a larger health system is required.

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What could be done?

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• If the goal of ending HIV/AIDS in India by 2030 is to become reality, there not only has to be an **increase in budgetary allocation** to public health care but also a more **concentrated effort to increase AIDS awareness.**

- Evidence suggests that many people suffering from HIV/AIDS in Asia lack the awareness that they test positive.
- \bullet Certain levels of AIDS exceptionalism should be maintained when we perceive ending HIV/AIDS as a means to an end. $\$

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Source: The Hindu

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