WORLD'S AIDS DAY

Growth and magnitude of the killer

ince 1984 when the first case of the Acquired Immuno Deficiency Syndrome - Aids - was iso-lated in Kenya, the Government moved fast to contain the spread of the killer

In 1987, the Government established the National Aids Con-trol Programme (NACP) and set up the Aids Programme

The Government also formed a National Aids Committee to advise the Ministry of Health on the epidemic.

The committee has several sub-committees dealing with various aspects of Aids control.

Since its inception, the programme has continued to play a leading role in the fight against the Human Immono-Deficieny Virus, co-ordination of Aids care activities and implementation of programmes including the first and second Medium Term Plans (MTP).

The first plan focused on public awareness campaigns, strengthening of laboratory services, surveillance of HIV/Aids

and training of health workers. Despite this drive, it was recognised that there was not much change in the behaviour of society as new Aids cases were

reported.
In 1992, the second Medium
Term Plan was formulated. The Government adopted a multi-sectoral approach in which all sectors were urged to initiate collective response to curb the epidemic.

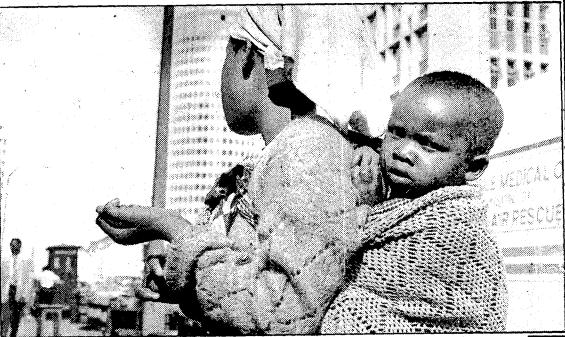
Prevention of Sexual Transmission of HIV:

The creation of public awareness on this mode of spread of the HIV virus has been enhanced through Aids education to young people in and out of school. This campaign has been supported by the United Nations Children's Fund.

Emphasis has also been put on family life education for young people in order to provide children with the information to protect themselves from HIV when

they become sexually active. Community-based Aids education has been accelerated. It includes the promotion and provi-sion of counselling services and public education on issues related to sex and to provide information to adults who are sexually active about how to protect themselves against Aids.

The programme also tackled the issue of Aids in the workplace in which a series of initiatives have been undertaken jointly with the Ministry of Labour and Manpower Development, Federa-tion of Kenya Employers, Kenya Breweries, East Africa Industries, Firestone (EA), Barclays Bank of Kenya (LTD), Standard Chartered Bank, East African Spectre and Magadi Soda Com-



The World Health Organisation's concept of family goes beyond mere blood relations to include groups whose bonds are based on feelings of trust like street people (the beggar above) and drug addicts (right). (File pictures)

pany among others.

Sexually Transmitted Diseases:

The presence of sexually transmitted diseases enhances the risk of HIV infection.

As a result, the control of sexually transmitted diseases has received priority-rating in order to reduce the transmission of HIV

There has also been increased promotion of condom use through distribution networks and condom marketing by Population Services International (PSI).

Steps have also been taken urge religious institutions to promote the use of condoms, particularly by young people.

Prevention of transmission through blood and blood products:

The risk of being infected with HIV through blood transfusion if one gets blood donated by a person who is infected with the Aids virus is almost 100 per cent.

The Government has taken measures to ensure that no Kenyan received contaminated blood.

These include screening of all the donated blood, promotion of rational and efficient use of blood supply and promotion of blood donations from low risk individuals.

Prevention of perinatal transmission (from mother to unborn child):

Many children with HIV get the infection from their mothers during pregnancy, at the time of

About 30 per cent of the chil-dren born of infected mothers will themselves be infected while the unaffected 70 per cent are at risk of being orphaned by Aids.

The prevention of this form of transmission is currently being undertaken through counselling of infected mothers at ante-natal

However, this form of transmission is best achieved by preventing women from being infected.

Steps have also been taken to sensitise the male population of their role in this line of prevention through the encouragement of spouses to present themselves for counselling as well.

Mitigation of socio-economic impacts of HIV/Aids:

Aids has already started having a negative impact on the economic development of this country through the loss of young people in their most productive years of

If Aids is more prevalent among the economic elite, best educated people with the highest paying jobs, then the impact could be much larger than the number of Aids deaths indicate.

The fight to keep the killer at bay through medical care, drugs and funeral expenses will also greatly reduce economic growth.
The economic impact is likely

to be larger in some sectors than

Certainly, the health sector and the insurance industry are likely to be hard hit.

Sectors with many mobile young sexually-active personnel who are kept away from their families for long periods will also

Such sectors include transportation and extension services,

The impact of Aids on the agricultural sector is likely be heaven as affected families will be forced to reduce their cultivated areas

The loss of workers will lead to reduced harvest.

The loss of labour force through Aids could also make farmers switch to less-labour-intensive crops which might mean switching from export to food

To stop this, the areas that need looking into include:- Care of Aids orphans; empowerment of women; strengthening of counselling services and provision of patient care services (both institutional and home-based care).

Epidemiological surveillance:

This is the system by which the NACP is able to provide esti-mates of the extent of HIV infection in the country.
Through the HIV Sentinel

Surveillance, NACP monitors HIV infection rates among wom-en attending 13 ante-natal clinics

Nationally, the HIV infection rate has more than doubled over a three-year period from six per cent in 1990 to 13 per cent with

The results show that all parts of the country are affected, with some having as high a prevalence of HIV infection among pregnant women as 20-30 out of every 100 Although some areas have a

low prevalence of between two-ten out of every 100, there is already a rising trend in these areas while in areas like Kisumu with high infection rate, there appears to be a leveling at 20 per cent prevalence.

On average, the HIV infection rates among women of reproduc-tive aga is estimated to be seven per cent.

Co-ordination of research

This area is being addressed through co-ordination of research on biological aspects, socio-cultural issues and factors related to behaviour change. The NACP is currently

streamlining all research-related activities by helping those coming up with research proposals. A number of Non Governmen-

tal Organisations and the private sector programmes are also contributing to the fight against Aids Some organisations in the commercial sector are also devel-

oping Aids-in-the-workplace programmes to protect their employ-ees and families.

Some of the major achieve-ments of the NACP include the production of guidelines for various components of the programme such as rational use of blood and home-based care of people within Aids.

In April, last year, the NACP organised the first HIV/STD/ Aids National Conference in Kenya that attracted thousands of people from all walks in life.
Through the support of the
United Nations Development
Programme (UNDP) and the Ministry of Planning and National Development, the NACP carried out a series of workshops in the last half of 1993

for provincial and district commissioners These workshops were organised through the initiative of the Ministry of Planning and

National Development The transformation of Aids from being merely a family problem to a national issue was based on the analysis undertaken by the Director of Planning and Economists in the Ministry of Planning and National Development.

Multisectoral Aids prevention and care approach:

The development of the second Medium Term Plan (MTP) took into account the major problems that faced the programme.

All Government ministries, NGOs, religious groups, the pr vate sector and representatives from donors agencies took part in the campaign.

The main objective of MTP \coprod was to reduce the transmission of HIV through the promotion of activities that would enable people to use their knowledge to change their sexual behaviour and minimise the personal and socio-economic problems associated with Aids.

Another major step taken was the integration of the Sexually

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