

Preface

AIDS: A Public Health Crisis Forcing Improvement of Public Health Systems Worldwide

If you understand AIDS, you understand public health. There's almost no aspect of behavior, policy, basic science, statistics, epidemiology, nutritional interventions—everything—that does not touch HIV/AIDS.

Max Essex (Harvard Public Health Review, November 2011)

For public health workers in developing countries, working on AIDS prevention and control requires a broad range of social skills and special knowledge not taught in public health schools. Many of us from public health schools have often been impressed by what local AIDS workers in Africa and Asia have accomplished in terms of providing help to AIDS patients in resource-poor regions. Publishing this book is part of our continuous effort to encourage the world to learn about how and what these AIDS workers in developing countries have done in the fight against the AIDS pandemic, in the hope that with such encouragement, more and more public health students and workers will devote their careers to AIDS prevention and treatment. We also hope that this book will provide a source of inspiration for more people to become interested in various international or local AIDS programs anywhere or everywhere in the world. Unlike other infectious diseases that come and go, such as SARS in 2003 and the H1N1 “Swine Flu” in 2009, AIDS came to stay. The challenges facing AIDS workers today will surely face many generations of AIDS workers in the years to come.

Being an AIDS worker in a developing country or a resource-poor region might mean raising funds to build a clinic, a school, a nursing home, or even a paved road connecting a village to the outside world; or being a social activist fighting to obtain funds for public health costs from local or national governments; or a clinician who may need to be able to deal with any kind of medical emergency as the only doctor or nurse in the entire village. Treating AIDS patients effectively requires the most advanced modern medical knowledge. The new antiretroviral drugs are based on very recent scientific discoveries and created by major investments of research and

development. Tens of thousands of AIDS workers have successfully used these drugs in developing countries and resource-poor regions to save lives and prevent newborn babies from being infected by their infected mothers. As described in this book, these AIDS workers often accomplished their mission in “impossible” environments, working under extremely harsh living conditions in places with no existing public health infrastructure.

The idea of publishing this book was conceived when we conducted our annual AIDS medical training courses and research workshops in China. Many of us from public health schools sat together trying to figure out which new medical training topics in antiretroviral (ARV) treatment and which new research discoveries we should bring in to each group of trainees. We, as instructors in these courses, were also students ourselves, as we learned from our trainees and from each other. We soon realized that public health students back home or around the world, some of whom will hopefully become future AIDS workers, could benefit from reading the presentations of these workshops. We decided to include one chapter to describe the prevention of mother-to-infant transmission in some remote villages in China where modern prenatal medical care did not previously exist, and one chapter to describe how free ARV treatment was started and maintained in some poor villages that lacked very basic public health infrastructure or even paved roads connecting them to the outside world. We included one of the most popular presentations in the past training courses where the trainees learned how India dealt with ARV treatment because AIDS workers in China faced similar challenges. We specifically selected a presentation that described the ARV treatment programs in Africa, which were made possible by the US President’s Emergency Plan for AIDS Relief (PEPFAR). In order to elicit more strategic thinking about the future of the global ARV treatment program and for public health students to get prepared for more challenges to come, we included a chapter by some of the researchers who first proposed the concept of ARV prophylaxis. We also included a chapter by a Chinese national public health official that addresses improving access to generic ARV drugs through international collaboration and specific WTO rules. We also included a presentation trying to answer one of the most frequently asked questions in these workshops: when will most AIDS patients in the world have access to effective treatment?

The past 30 years of the AIDS pandemic have resulted in tens of millions of deaths, mostly in developing countries. This global tragedy will unfortunately continue into the foreseeable future. AIDS workers around the world have no choice but to fight this dreadful disease with any and all tools they may have or acquire. An encouraging thought is that in trying to treat AIDS patients under very difficult conditions, such AIDS workers have, at the same time, improved public health infrastructure. In some developing countries and resource-poor regions, AIDS workers are actually creating basic public health infrastructures that had eluded many generations of public servants before them. And the newly created public health services, despite their simplicities and need for improvement, provide foundations and hope for future generations.

HIV/AIDS Treatment in Resource Poor Countries

Public Health Challenges

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