

## **WORLD FOOD PRIZE SYMPOSIUM October 2001**

### **Debrework Zewdie**

Thank you, Mr. Chairman. Distinguished laureates, ladies and gentlemen. I am deeply honored to be invited to this year's World Food Prize International Symposium and talk about how HIV/AIDS impacts food production. I'll focus most of my comments on South Sierra, Africa, the region hit hardest by the epidemic and also where the impact of the epidemic in different sectors, such as agriculture and food security, is serious.

I'll start with the status of the epidemic, its impact that is ..., including some of the work that they've been doing at The World Bank, and then spend a few minutes on what can be done to curb the epidemic.

In Africa the epidemic has already reversed many of the development gains of the past generation and now threatens to undermine the next. Note that, according to ... estimates, 40% of today's 15-year-olds will have acquired HIV in countries such as Ethiopia, in C\_\_\_, and 60% in countries such as South Africa and Zambia. The darker the color on the slide is the higher prevalence, and these are prevalence rates in adult populations.

Let me give you a few examples. On the next slide, if you take education, for example, across Africa teachers and students are dying or leaving school because they can no longer afford it or have fallen ill or because they're needed at home to work or care for the sick. ... death of students and teachers would reduce both the quality and efficiency of the education system. In some countries more than 70% of teachers are leaving with HIV aids, and more now die each year than graduate from teacher-training programs.

The second slide shows its impact on agriculture. HIV/AIDS reduces investment in irrigation, soil enhancement and that of capital improvements, thereby inhibiting agricultural production. Households are shifting from more nutritious foods to less nourishing but less labor-intensive crops. The epidemic is forcing families to make irreversible decisions to sell livestock, equipment and land to cover AIDS-related costs. HIV/AIDS illness and care also siphon time away from vital farmwork. As one farmer in M\_\_\_ remarked, I quote, "We are spending more time cuddling bodies of the sick than we are cuddling the soil."

Young women are disproportionately infected and affected by this epidemic. AIDS has exacted a particularly heavy toll on young women. The red bar shows young girls, and the blue, boys. Among Africans in their early twenties, infection rates are three times higher for women than for men. ... of 15 to 19-year-olds are biologically and socially more vulnerable to HIV/AIDS. In some countries, for every 15 to 19-year-old boy who is infected, there are six girls that are infected in the same age group.

AIDS is also creating unprecedented social welfare challenges. More than 17 million children have already been orphaned by AIDS. Twelve million of them are African. The

number is likely to double by 2010. A tremendous challenge for those working on food security is finding a way of feeding these orphans.

The next slide shows decline in life expectancy, which is one of the measures of self-development. Life expectancy is now declining in a host of countries after decades of progress. In several nations it's already ten years shorter because of HIV/AIDS. In the hot... countries, such as B\_\_\_ and Zimbabwe, life expectancy is approximately 17 years shorter than it would otherwise have been. Clearly, AIDS is jeopardizing development in practically all sectors. Unless the epidemic is addressed, it will be impossible for Africa to obtain the majority of ... international development got.

What has the ...response to HIV/AIDS been like? After years of apathy among governments in the north and the south, international partnerships are making some progress against the epidemic, proving that the global community can come together for a common purpose. The International Partnership for AIDS in Africa, which brings together African governments, bilateral and multilateral agencies, the private sector and yours and other civil society organizations including a ... of people living with HIV/AIDS, is a fine example. The past year has brought a sea of change in the official response to HIV/aids in Africa where broad leadership had previously been lacking.

After all these meetings that have taken place last year and the resulting... declaration, leaders of Africa endorsed the strongest and most candid statement to date about AIDS – To take personal responsibility for leading national HIV/AIDS efforts and pleading to set the target of allocating at least 15% of the national budget to spend in health systems to cope with the epidemic.

The past year has also brought a marked intensification in the global response to HIV/AIDS. The landmark June 2001 U.N. General Assembly Special Session on HIV/AIDS produced a unanimous declaration of commitment, including concrete, time-bound targets for achieving a full spectrum of HIV/AIDS goals. A global AIDS and health fund was launched in May 2001 and has raised about \$1.5 billion to date.

When going to The World Bank's response, the Bank has recently expanded its efforts against HIV/AIDS in collaboration with African governments, U.N.... and other developing partners. More resources were committed to HIV/AIDS in fiscal year 2001 than in any previous year. The banks have ... approved \$744 million for HIV/AIDS programs, which is more than three-fourths as much as the banks committed to HIV/AIDS in the previous 15 years. Since 1986 the Bank has committed nearly \$1.8 billion for HIV/AIDS activities in more than 60 countries in all regions.

To step up its response to the epidemic in Africa, the Bank launched a new strategy plan, intensifying action against HIV/AIDS in Africa, responding to a development crisis in September of 1999. The strategy seeks to involve all sectors in the fight against the epidemic, given that the health sector can no longer bear the full brunt of HIV/AIDS alone.

In addition to developing standalone HIV/AIDS projects, the Bank is retrofitting its existing portfolio with HIV/AIDS components and is seeking to ... development products in the pipeline in all parts of South Sierra, Africa. Our rural development sector is one of the needy ones in this effort.

As part of the strategy, the Bank has launched the multi-country HIV/AIDS program, MAP for Africa, which makes an additional amount of \$500 million in flexible and rapid funding available to African countries to assist in scaling up national HIV/aids efforts. A key feature of the MAP is that it supports the community organizations, especially those that work in rural areas.

As of October 2001, nine countries listed on the slide have had projects approved under the MAP committing a total of \$399 million. We have already started preparation for the second phase, MAP-II for another \$500 million and U.S. \$100 million of which will be purely grants for subregional activities.

Through MAP and other programs and projects, the Bank will continue to focus on HIV/AIDS in rural areas. The red are the countries where we have programs already, followed by the green that are in the pipeline. Eventually, we intend to cover the entire South Sierra in Africa.

Let me now go to the impact of HIV/AIDS on food security and overall rural development. Immediate and future impact of HIV/AIDS on the rural sector include but are not limited to the following: Threats to food security for households. In poor households food expenditure and consumption may decline after the primary adult's death because of high medical and funeral expenses, as well as the loss of income and the... that the primary adult typically provides. Also, food security may in particular impact child nutrition, in turn, children's physical and intellectual development. These issues are particularly serious for the millions of African children orphaned by AIDS.

Decreased laborers available for agriculture and for other production and to the household through AIDS-related sickness or death of laborers or because laborers must care for those who are infected. Loss of agricultural assets and outputs, either because of direct AIDS-related expenses, such as families having to sell land, livestock or equipment to pay for AIDS-related death and funeral expenses, or by widows losing their land after the death of their husband, or through indirect causes which are mainly related to loss of labor. Loss of methods, knowledge and specialized skills..., natural resources, management and community development, as adults die and children are left orphans. Children who lack adult guidance will gain fewer of these skills.

Changing in family structure, including leaving an unprecedented number of AIDS orphans in child-headed households. In B\_\_\_ today, every one in five households is headed by a woman or a child. Children who are orphaned tend to have poorer health outcomes and fewer educational opportunities. Loss of gains recent... for women and girls in health, nutrition and education. As I said earlier, women and girls bear the greatest burden of care for AIDS-suffering

families and are often denied education to care for sick relatives or assume family responsibilities.

Decline in community health due to spread of HIV infection. Tuberculosis and opportunistic infections stand out in this case. Labor migrants, in particular, are at high risk of HIV infection due to their nomadic lifestyle. Workers with a nomadic lifestyle are at higher risk for contracting AIDS because they have increased opportunities for engaging in risky sexual practices since they spend a lot of time away from their families. Infected workers can spread HIV to their spouses or within their communities.

What can be done, and how can the international community in partnership with African governments reduce the impact of HIV/AIDS on food security? Let me touch upon a few of these.

Community interventions. Strengthening initiatives that mitigate the impact of HIV/AIDS in the rural areas is paramount. These programs have generally been driven by NGOs, religious groups, traditional..., people living with HIV/AIDS, women, youth and others. Examples include community-based childcare, orphan support in the form of nutrition and educational assistance, home care and visits to orphans and HIV/AIDS patients, agricultural products to increase output, and labor sharing and income-generating projects to produce food.

Youths' interventions provide the rural youth with technical skills and support that will meet their immediate and future financial needs. Youth without such resources will often turn to short-term, high-risk solutions that not only may not be sustainable but may also increase the likelihood of engaging in high-risk, sexual behavior such as having sex for gift or for money.

For example, extension services should develop formally structured youth programs that work to retain the links and transfer of knowledge between all the members of the rural community and the younger generation. Gender-related interventions establish gender-sensitive programs in the rural areas. Possible interventions include: providing women with alternative income-generating opportunities, educational and vocational training, and...

Policy development... government resources and commitment to their poverty elevation, food and livelihood security, labor issues and gender inequalities. None of these are new to you, and these are the steps that have been taken for other purposes as well.

Mr. Chairman, in conclusion, there is a very close similarity between the five... HIV/AIDS and what all of you have been doing to ensuring food security. In 1991, a study was conducted among the... leaving with HIV/AIDS to ascertain their priorities. Almost all of the 600 people living with HIV/AIDS who took part in this study listed food and shelter as their number one priority, followed by other needs such as treatment. Unfortunately, the very same people for whom you have been trying to ensure food security are now faced with the HIV/AIDS epidemic. The many millions of people infected and affected have food security as their primary concern.

Today the developing world, especially South Sierra, Africa, needs a powerful effort by all sectors and by everyone who cares, to make sure that this epidemic does not spread further and that those infected... [end of tape 2, beginning of tape 3] in Eastern Europe and Central Asia. Nor is the epidemic unique for M\_\_\_, Africa. It's, in fact, multiple epidemics. Adult HIV/AIDS vary from 1% to 36%.

HIV spreads quickly. Appropriately, this slide is called, "The Cost of Inaction." Look at the prevalence in Africa in 1982 and what is happening in 1999 and more. Africa has suffered the greatest impact of any region so far because it was struck first, and the response has been inadequate. Africa has never received a tenth of the resources needed to mitigate this epidemic.

As the epidemic progresses further into other regions, it's a global responsibility to ensure that what's happening in Africa today would not happen in India and China and other countries. Our response should not be based on what others can do for this region. It should be based on what we ourselves can do to make the world a better place. This world will be a better place if we all accept the fact that this is a global tragedy that requires a response for all we citizens of the world.

Finally, Mr. Chairman, what most of you do here is important, as I said before. When survey after survey shows that people living with HIV/AIDS have food as their priority in a region where the per capita held expenditure is \$12 at best, the best cost for a course of treatment now is \$350. Even worse, the cost of the drugs pales in comparison to the cost needed to strengthen the health system and distribution infrastructure.

Today in Africa we can keep many alive and improve their quality of life by providing them with nutritious food and treating the opportunistic infections, which will not cost much. Most of you here deal with hunger and food security and have seen similar tragedies for decades. Before we can declare a victory on food security, we are faced with an additional burden, an epidemic which is unprecedented in the history of humankind. If you look back where the world was in food security a few decades ago and where it is now, there is indeed hope. And together we can make this world a better place if we stand together as a global family.

I thank you.