

Health Action AIDS Campaign

E Rubinowitz

Citation

E Rubinowitz. *Health Action AIDS Campaign*. The Internet Journal of Law, Healthcare and Ethics. 2004 Volume 3 Number 2.

Abstract

AIDS is the most devastating disease the modern world has ever faced. More than 42 million people are living with HIV today. If current trends do not change, there will be more than 20 million AIDS orphans in Africa alone by 2010. The Health Action AIDS campaign initiated by Physicians for Human Rights (PHR) and Partners in Health, strives to avert the predicted trends in AIDS proliferation by encouraging health professionals to become advocates. For policy on AIDS to be successful, it must be well-informed by experts. Health professionals are those experts.

When the campaign began in 2001, it was up against a general consensus in Washington D.C. that treating HIV/AIDS in poor countries was too hard, too expensive and unsustainable. Now, just three years later, the U.S. has committed itself, through the President's Emergency Plan for AIDS Relief (PEPFAR), to spend \$15 billion dollars over five years on global HIV/AIDS prevention, treatment and care. Partners in Health, a non-profit that delivers health care services to the poor in Haiti and Latin America and co-founder of the Health Action AIDS campaign, has shown that treatment in poor countries is possible and has helped to silence those who said: "It can't be done."

"When the campaign started, it focused largely on the right to treatment, enshrined in the right to the highest attainable standard of health," says Eileen Campbell, Health Action AIDS coordinator. "Now that PEPFAR has been put into place by the U.S. administration, the thousands of health professionals in our campaign are confronting the difficult issues around rolling out treatment, and building the health infrastructure that many of these poor countries never had."

One of the best ways to promote appropriate policy is by encouraging health professions to apply political pressure on decision-makers themselves. "When you compare the relatively simple but often neglected truth that access to health care is a human right to the complicated realities of

actually getting the job done, you realize that our commitment to ending this disease requires new and increasingly sophisticated layers of analysis and advocacy," says Campbell.

Although PEPFAR was a major victory for all of the activists who have been fighting AIDS, there is still much more work to be done. AIDS is the most devastating crisis in the history of human health. Twenty-five million men, women, and children have died already, and 15,000 people are infected every day. At current infection rates, a 15-year-old boy in Botswana now has an 85 percent chance of dying of AIDS.

With education, constituency building, and encouragement of health professionals, a national commitment can be sustained and highly effective in battling HIV/AIDS. "The traditional human rights tactics of 'shaming and blaming' which make sense when our government's position is characterized by total inaction, just don't quite fit anymore," Campbell says. "The Health Action AIDS campaign fills a gap--that of a committed, educated, authoritative constituency for global health and human rights; one that can exact a political cost for inaction, under-funding, and allowing ideology to interfere with sound science."

The brain drain of health workers from Africa is a key concern of the Health Action AIDS campaign. Many have classified this phenomenon as the single most serious obstacle in fighting and preventing the spread of AIDS in Africa. English speaking doctors, nurses and pharmacists are emigrating in droves to the United Kingdom, the United States, and Canada. The incentive for health care professionals in Africa to emigrate is multifaceted. The AIDS and tuberculosis crises in Africa have stretched the health infrastructure too thin, where doctors and nurses are working in unsafe, under-funded, and under-equipped hospitals. PHR released a report about these issues, "An

Action Plan to Prevent Brain Drain: Building Equitable Health Systems in Africa” at the XVth International AIDS conference in Bangkok. It is available at <http://www.phrusa.org/campaigns/aids/pdf/braindrain.pdf>.

The Health Action AIDS campaign also works to confront the many layers of human rights abuses that allow this insidious disease to spread unchecked. PHR recently published a report about Thailand's Hill Tribe women and girls and the nearly one million Burmese migrants, who are currently being denied Thai citizenship based explicitly on their ethnicity (<http://www.phrusa.org/campaigns/aids/pdf/nostatus.pdf> for full report). Their status as non-citizens in Thailand has prohibited them from basic rights of citizenship, such as marriage and birth registry, work permits, as well as health care. Without legal status, the Hill Tribe women and girls and the Burmese migrants are at an elevated and unaddressed risk of contracting HIV/AIDS.

Success in fighting HIV/AIDS is contingent upon policy-makers. In September, PHR coordinated a nurses summit which convened members of the Association of Nurses in AIDS care (ANAC) to discuss the ways that they can influence Global AIDS policy makers. “Nurses have had a front row seat at the epidemic, and policy and HIV care are inextricably linked. If health professionals speak with a collective voice, it can be very powerful,” said Patrick Robinson, president of ANAC.

Students are also an important demographic to the Health Action AIDS campaign because they represent the future of health care in America and across the globe. The campaign works to help students foster an understanding of the connection between human rights and health care. “Our student members reflect a growing movement of health

professionals who believe the preservation of human rights is integral to their ability to provide care,” said Saranya Kurapati, the National Student Program Coordinator for the Health Action AIDS campaign.

In February, PHR organized a national student conference in Chicago, IL, which over 600 students attended. Students participated in workshops ranging from global advocacy to the effects of racial disparities on the delivery of healthcare. The next month, PHR partnered with the American Medical Student Association to organize the 4th annual Global AIDS Week of Action, in which over one thousand medical, nursing and public health students participated. Students elevated the voice of health professionals in calling for a stronger and more committed global response to the AIDS pandemic. They organized a film festival that highlighted the socioeconomic inequalities fueling the pandemic and hosted town forums in four cities to increase dialogue between health professionals and members of Congress.

Dr. Paul Farmer, co-founder of Partners In Health, and a Harvard medical anthropologist, was the keynote speaker at the February student conference. He called on future doctors to use their professional voices in the fight against AIDS and support their colleagues abroad.

“What is the cost of not doing the work?” he asked. “What is the cost of standing by? How many physicians can sustain their commitment when faced with a complete absence of the necessary tools? What is the cost of losing, through inaction, an entire generation of young people to the AIDS epidemic?”

To learn more about the campaign or to get involved, visit <http://www.healthactionaids.org>.

References

Author Information

Eddie Rubinowitz

Physicians for Human Rights