

Drugs and screening kits available at the Solwezi Urban Clinic in Zimbabwe to treat adolescents and test for HIV.

In many developing countries, travel to health facilities is difficult, especially for people in advanced stages of HIV. Overwhelmed health care systems are short on staff and resources. In many places, lack of information and cultural beliefs render many families afraid to gap with community-based care and support. We enable families and communities to care for their sick by providing counseling, nursing care, health care training, and items including food, clothing and medicines. CRS helps community volunteers provide compassionate care – which reduces stigma, keeps families together and builds each community's capacity to offer care in the future. Demand for these services continues to grow, particularly as drug treatment remains out of reach for most people living with the disease.



A 4-year-old girl in Creang Bak, Cambodia, can hope for a healthy life thanks to a CRS health center that links HIV-positive mothers to programs to prevent transmission of the virus from mother to child.

As many as 65 million people with HIV and AIDS in developing countries are in dire need of antiretroviral drug treatment, the combination of medicines that helps reverse the progression of HIV in the body. In 2004, CRS was able to launch into this new territory. As part of the President's Emergency Plan for AIDS Relief, funded through the Office of the Global AIDS Coordinator and the Human Resources Services Administration, Department of Health and Human Services, CRS became the lead agency in a consortium to expand delivery of antiretrovirals to people infected with HIV in Africa, the Caribbean and Latin America. The grant is expected to total several hundred million dollars (U.S.) over 5 years. Called AIDSRelief, this public-private consortium has made major inroads in assessing health care providers and putting in place mechanisms to distribute antiretroviral treatment worldwide. AIDSRelief has the advantage of tapping into its existing network of faith-based health care providers, which provide as much as 50 percent of all health care in developing countries.

Treatment

The Zimbabwe-based STRIVE project works through local partners to improve the ability of communities to the mounting challenges that face the children orphaned by AIDS. Our programs focus on solutions that are based in the community and can be sustained over time. In Zimbabwe, where AIDS has left nearly a million children orphaned, the STRIVE program has helped to ease the suffering of nearly 54,000 children.

STRIVE

By the end of 2006, HIV and AIDS had orphaned more than 15 million children in sub-Saharan Africa, Asia, Latin America and the Caribbean. Not only do orphans suffer the emotional and financial consequences of losing a parent, they are also at greater risk of malnutrition, illness, abuse, criminal activity, withdrawal from school, sexual exploitation and HIV infection. CRS is responding to the mounting challenges that face the children orphaned by AIDS. Our programs focus on solutions that are based in the community and can be sustained over time. In Zimbabwe, where AIDS has left nearly a million children orphaned, the STRIVE program has helped to ease the suffering of nearly 54,000 children.



A child in Burkina Faso holds up his work during a drawing session for children whose parents are HIV positive.

The Children

In 2006 alone, over 4 million people worldwide were newly infected with HIV. The pandemic continues to race across the globe, fueled in part by stigma and silence. Many are reluctant to discuss HIV and AIDS because of its relationship to sexual activity and death, taboo subjects in many cultures. Within the context of Catholic teachings, CRS programs encourage communities to discuss how abstinence, fidelity, respect and sexual responsibility are essential in stemming the spread of HIV. We also help families understand that they can provide compassionate care to their HIV-positive relatives without putting themselves at risk. By providing accurate information, CRS presents viable options to those we serve while respecting their ability to make independent choices. Our prevention programming includes treatment of sexually transmitted infections and voluntary counseling and testing, prevention and education within reach. In combination with CRS projects that improve income, food security and education, our HIV and AIDS programs can contribute to a wide-scale reversal of the AIDS epidemic.

Prevention



A young member of an AIDS ALIVE group participates in an HIV/AIDS awareness and education event in northern Ghana.

As AIDS takes hold, the body weakens and strenuous work becomes impossible. This often means loss of income, resulting in an inability to provide food. CRS offers HIV and AIDS-affected families a range of agricultural and small-business development programs. We help families with supplemental food, seeds and tools to develop gardens, or small loans to create or expand small businesses – all of which put basic necessities like food, medicines and education within reach. A member of the Solwezi Home-Based Care Program in Zambia tends to her garden. The vegetables she grows will contribute to a healthier diet and a longer life.



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Promoting Self-Sufficiency

Advocacy—giving a voice to those affected by HIV and AIDS—can play a key role in countering the stigma and reducing the poverty that leaves people so vulnerable. Both in the United States and in the developing world, CRS works with partners to promote awareness and greater involvement of governments, private enterprise and the international community in the fight against HIV and AIDS. The need for both public and private resources will rise exponentially in the coming years, particularly as the pandemic takes hold in Asia. CRS continues to seek out partners in the battle against HIV and AIDS around the world – and it will take the resources the world – and the resources it will take to case the suffering of so many. Africa Rising: Hope and Healing is a CRS campaign that promotes a CRS campaign that promotes support for HIV and AIDS and other health programs in Africa. These efforts directly contributed to passage of the multi-billion dollar President's Emergency Plan for AIDS Relief of 2004.

Giving a Voice

Catholic Relief Services HIV and AIDS Programming



Together, HIV and AIDS pose one of the largest, most complex threats to human health the world has ever known. Great stigma compounds already tragic physical consequence. In the developing world, the pandemic is devastating the physical, social and economic health of entire regions. Not only do people suffer and die from this disease, it robs them of their dignity, their families, their social networks and their livelihoods. Women bear the greatest risk of infection, stigma associated with illness, and burden of caring for the ill and their families.

In 25 years, HIV and AIDS have infected more than 65 million people and killed 25 million. The majority of those suffering live in Africa, but the pandemic is quickly spreading in many countries throughout Eastern Europe, Latin America and Asia. By 2010, it is estimated that 80 million people will have been orphaned. HIV and AIDS affect the poor and vulnerable disproportionately. And limited resources prevent poor communities from supporting the millions who suffer.

Hope & Dignity in the developing world



"The battle against AIDS ought to be everyone's battle."

—Pope John Paul II
Ecclesia in Africa

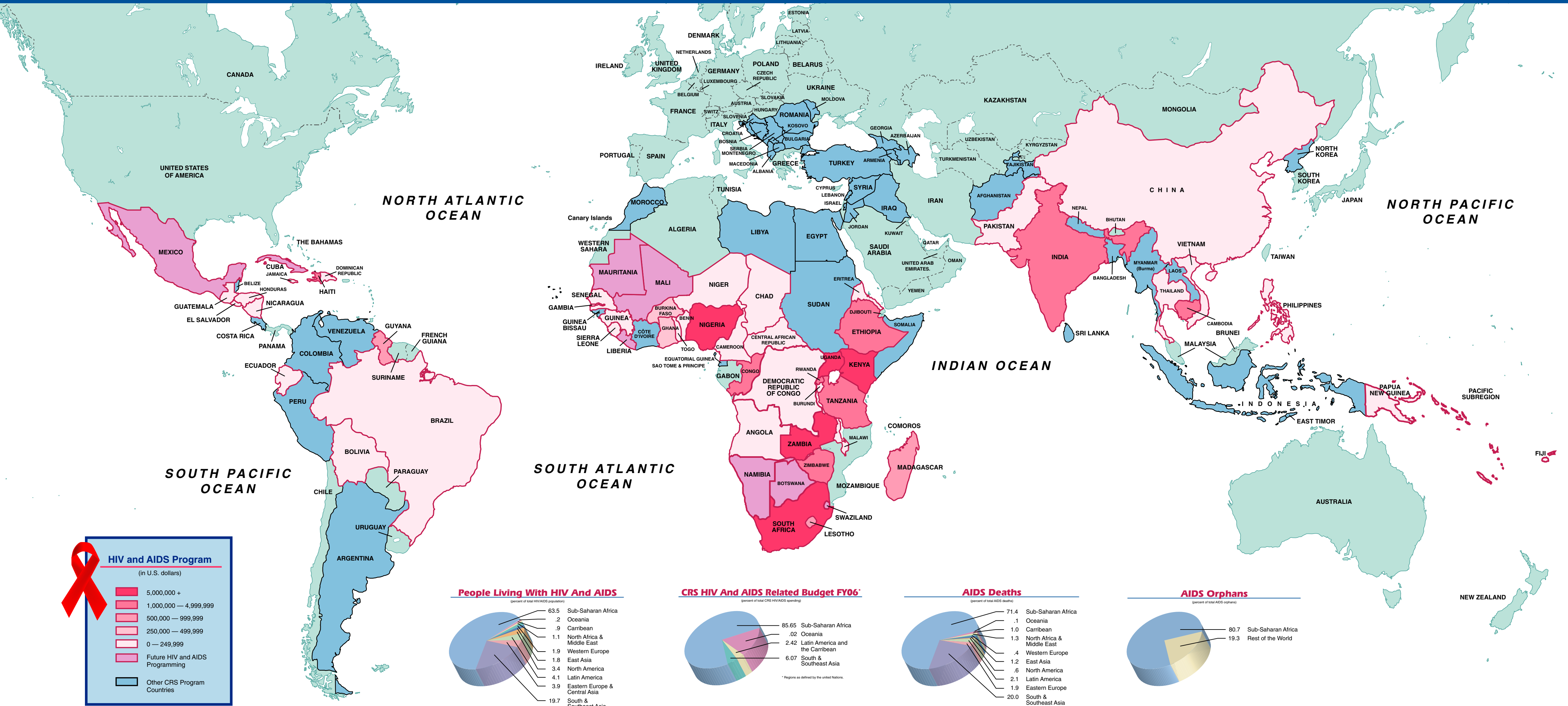


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*Statements and statistics reflect the most reliable information currently available from the United Nations family of agencies, academic sources and partners in the international aid community.
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Offering Compassion and Preserving Dignity

Hilda Likumbi has been a volunteer in her community's Home Based Care program since 1998. Like all of the HBC volunteers, she devotes as many as 20 hours each week to visiting with clients who are ill, and provides services ranging from spiritual support to physical care for those who are suffering from HIV and AIDS.



Catholic Relief Services initiated our first HIV and AIDS program in 1989 in Masaka, Uganda. We now have HIV programming in nearly 50 countries across Africa and the hardest-hit regions of Asia and Latin America. We support more than 200 HIV and AIDS projects in the poorest and most vulnerable areas of the developing world, with a total expenditure of \$68 million (USD) in 2005 alone. This year, CRS will help nearly 20 million people affected by the pandemic – more than 4 million directly and nearly 16 million indirectly.

An HIV-positive man receives food aid from CRS at the Parakou clinic in Benin.



CRS programming in HIV and AIDS has evolved to help individuals, families and communities as they struggle through the physical, economic, social and emotional devastation of the disease. Dignity and quality of life are at the heart of CRS HIV and AIDS programming. We also work to reduce the spread of the disease by addressing its fundamental causes and helping everybody understand

the causes and options available to help reduce transmission of the disease. Through our vast network of local partners—including Catholic, governmental, and other faith-based and private organizations—we can support people and communities as they fight to stem the tide of this pandemic.



Food distribution for families affected by HIV and AIDS: Las Palmas Bethanis feeding center in Guatemala.