

Frontline Health Workers

Reducing the Burden of HIV/AIDS

The world has made tremendous progress toward thwarting the HIV/AIDS epidemic over the past decade, with notable gains in scaling up prevention and treatment efforts. From 2010-2015 alone, the number of children infected with HIV annually dropped by nearly half, while the number of people accessing treatment more than doubled.¹

Frontline health workers (FHWs) are essential deliverers of critical HIV prevention and treatment services, without which we cannot end HIV/ AIDS as a public health threat. As community champions of prevention interventions, FHWs increase awareness of risk factors, educate communities on safe practices, and reduce stigma through their everyday work. They also ensure patients receive and adhere to life-saving treatment. By conducting voluntary HIV counseling and testing, they provide entry-points to the health system at large, especially for high-risk populations and those in remote and hard-to-reach locations. Additionally, FHWs provide critical interventions to prevent mother-to-child transmission of HIV. For example, at a routine pregnancy check-up a FHW may test a mother for HIV, offer prenatal services, ensure safe childbirth, and counsel on safe breastfeeding and treatment if the baby is HIV-positive.

US Leadership

The United States is a leader in the global fight against HIV/AIDS through the US President's Emergency Plan for AIDS Relief (PEPFAR) and the Global Fund to Fight AIDS, Tuberculosis and Malaria. For over a decade, these programs have received strong bipartisan support from Congress. In turn, Congress has played a critical role in strengthening these programs and bolstering the central role of FHWs. In 2008, Congress mandated PEPFAR to place greater emphasis on the frontline health workforce, setting a specific goal to train 140,000 new health workers.² PEPFAR has far exceeded this target, training 220,000 new health workers as of 2016.³

Frontline health workers have been crucial to the following achievements under PEPFAR:

- Supporting lifesaving antiretroviral treatment for 11.5 million men, women and children worldwide; this means PEPFAR supported roughly 2 in every 3 people on HIV treatment globally in 2015⁵
- Preventing nearly 2 million babies from being born with HIV, who otherwise would have been infected
- Caring for and supporting **6.2 million** orphans and vulnerable children
- Supporting HIV testing and counseling for more than 74.3 million people in 2016
- Supporting more than 11.7 million voluntary medical male circumcision procedures in Eastern and Southern Africa, which help to prevent new infections among high-risk populations

Health Workforce Strengthening Under PEPFAR:

Since 2009, PEPFAR has been one of the largest bilateral donors to strengthening the global health workforce.⁶ PEPFAR's 2015 Human Resources for Health (HRH) strategy involves a scale-up of resources and services to support the places and people in greatest need. To date, PEPFAR's investments in HRH include significant achievements such as:⁷

- The rapid scale-up of highly trained providers to deliver services in health facilities and communities hardest hit by HIV/AIDS
- A transformative effect on health training institutions – from improved curricula to increased faculty retention – an investment in the long-term sustainability of the global health workforce
- Major investments in future physicians and nurses, with health workforce training and production capacities strengthened in 40 medical schools and 20 nursing schools across 14 sub-Saharan African countries
- Strengthened health workforce data systems to drive decision making, improved health workforce policies and regulations to support both the scale-up and quality of HIV services provided, and increased support for retention of health workers.

However, significant challenges remain. Over 36 million people are living with HIV across the globe – 69% of whom live in sub-Saharan Africa – and in 2015, more than half were not receiving life-saving treatment. Further, the number of new infections continues to outpace the number of people newly put on treatment. In 2015, 2.1 million people were infected with HIV – including 1.9 million adults, a number that has remained the same every year since 20089 – and 2 million people were newly put on treatment. In short, the HIV/AIDS epidemic is still outpacing the response, but increased investment in frontline health workers can play a pivotal role in addressing these persistent challenges.

More highly trained frontline health workers will be essential to scaling up key HIV interventions needed to put the world on track to end AIDS as a public health threat by 2030.

The current pace of progress on building a strong health workforce will fall well short of what's needed by 2030; estimates suggest the world will be short 18 million health workers by 2030 in countries with the greatest need if we maintain current trends. This severe shortage of health workers will hit African countries the hardest 2 – a region that makes up 75% of the global burden of HIV/AIDS.

The US Can Accelerate Progress

To bring the world closer to the end of HIV/AIDS, the United States government must increase its support for frontline health workers while maximizing the impact of existing support. Additionally, the US government should continue leading efforts to expand access to essential services provided by health workers, including HIV-related services and data gaps on the health workforce. Doing so will help build the foundation for the world's poorest countries to fight HIV/AIDS and other diseases on the front lines.

Citations

- $1. \qquad UNAIDS, 2016. \ ``Fact Sheet November 2016" \ http://www.unaids.org/sites/default/files/media_asset/UNAIDS_Fact Sheet_en.pdf$
- 2. One Hundred Tenth Congress of the United States of America at the Second Session. (2008) H. R. 5501. https://www.pepfar.gov/documents/organization/108294.pdf
- PEPFAR, 2016. "PEPFAR Latest Global Results 2016" https://www.pepfar.gov/documents/organization/264882.pdf
 PEPFAR, 2016. "PEPFAR Latest Global Results 2016" https://www.pepfar.gov/documents/organization/264882.pdf
- 5. UNAIDS, 2016. "Fact Sheet November 2016" http://www.unaids.org/sites/default/files/media_asset/UNAIDS_FactSheet_en.pdf
- 6. PEPFAR, 2015. PEPFAR Human Resources for Health Strategy. https://www.pepfar.gov/documents/organization/237389.pdf
- 7. PEPFAR, 2015. Human Resources for Health. https://www.pepfar.gov/documents/organization/238308.pdf
- 8. UNAIDS, 2016. "Fact Sheet November 2016" http://www.unaids.org/sites/default/files/media_asset/UNAIDS_FactSheet_en.pdf
- 9. UNAIDS, 2016. AIDSinfo Database. http://aidsinfo.unaids.org/ (Last accessed 2/7/2017).
- 10. UNAIDS, 2016. "Fact Sheet November 2016" http://www.unaids.org/sites/default/files/media_asset/UNAIDS_FactSheet_en.pdf
- 11. WHO, 2016. "Working for Health and Growth: Investing in the Health Workforce." http://apps.who.int/iris/bitstream/10665/250047/1/9789241511308-eng.pdf?ua=1
- 12. WHO, 2016. "Global Strategy on Human Resources for Health: Workforce 2030." http://apps.who.int/iris/bitstream/10665/250368/1/9789241511131-eng.pdf?ua=1
- 13. Calculation using the Institute for Health Metrics and Evaluation Global Burden of Disease Database, using DALYs, Deaths, YLDs, and YLLs. IHME, 2015. GBD Results Tool. http://ghdx. healthdata.org/gbd-results-tool

Cover photo by Christopher Wilson, IntraHealth International.



The Frontline Health Workers Coalition is an alliance of United States-based organizations working together to urge greater and more strategic US investment in frontline health workers in developing countries as a cost-effective way to save lives and foster a healthier, safer and more prosperous world.