

Project Name	Barbados-HIV/AIDS Prevention and Control (@)... Project
Region	Latin America and the Caribbean (LCR)
Sector	Other Population; Health & Nutrition
Project ID	BBPE75220
Borrower	Government of Barbados
Environment Category	B
Date PID prepared	January 3, 2001
Expected Board	June 28, 2001

1. Country and Sector Background:

In most respects, Barbadians enjoy a good state of health, and are being well served by the national health delivery system. Life expectancy for males is about 73 years of age, and females about 77 years. Literacy is among the highest in the Caribbean (95%), availability of safe piped water is universally available (94% served at home, and the remainder through public stand pipes). The five leading causes of death have been cardiovascular disease (about 19%), malignant neoplasms (17%), cerebrovascular disease (14%); diabetes (10%); and other diseases of the circulatory system (4%). Births to adolescent mothers, and STIs have generally been declining. Health services have been provided by public facilities, centered at the Queen Elizabeth Hospital (QEH) (with 547 beds, providing 24 hour acute care services, and wide range of specialized preventive and curative services), and eight associated polyclinics. An additional 100 private physicians practice on the island. Laboratories in two public and four private facilities provide capacity for conducting about five tests per person per year, and have been sufficient to date for general health support. The Barbados blood bank has routinely screened blood supplies for HIV, Hepatitis B and C, Syphilis and HLTV1. The system is supported by the Barbados Drug Service (BDS) which has been designated a WHO Collaborating Center, and controls the importation and distribution of essential drugs.

However, since 1995, the Ministry of Health through the AIDS Management Team (within the Department of Medicine at the QEH) and committed volunteers, have attempted to address the needs of HIV/AIDS infected and affected individuals, working with non-earmarked and inadequate resources. Notwithstanding the numerous efforts made to combat this disease, its spread has continued. In 2000, there were approximately 70% more HIV infected persons than predicted in 1990, and the number of new infections is growing relative to that in the Organization of Eastern Caribbean States (OECs) countries. To date, the overall national response has been confined to the health sector with limited support from international and national resources. The current approach with a predominant health focus to respond to the epidemic, can no longer serve to promote a broad based expanded response to the epidemic. A proactive response with a multisectoral approach, has to be launched if there is to be a reversal in the current trend of this epidemic.

In response to the above problems, the Government of Barbados has issued a strategic plan for the restructuring of its national HIV/AIDS program.

Barbados' Cabinet approved a Comprehensive Program for the Management, Prevention and Control of HIV/AIDS, 2001-2006 (the Program), in November 2000 to be managed under a new National Commission for HIV/AIDS (NACHA), supported by an executive office with a full-time paid staff. The challenge for the government is to do the following:

? become proactive in managing the epidemic rather than being reactive to it;

broaden the effective scope of the activities undertaken to be truly multisectoral;

address treatment and care as well as prevention as a continuum;
generate more collaboration and partnership among national institutions;
involve the private sector more fully in the management of the epidemic;
establish accountability for results; and

progressively mainstream and then sustain management efforts both institutionally and financially.

Barbados' strategic plan for HIV/AIDS draws on elements of the Caribbean Regional Strategic Plan of Action formulated by the CARICOM-led Regional Task Force on HIV/AIDS, and approved by CARICOM Heads of Government in July 2000.

2. Project Objectives:

The project will concentrate on the following:

Introducing and scaling up cost-effective preventive programs and treatment efforts, that have been successful in other countries and in Barbados--in particular, strengthening and expanding the prevention and control of STIs;

establishing a staged implementation approach to ensure adequate lessons from experience leading to better informed public and private stakeholders and decisions on scaling up prevention and treatment services;

building sustainable and proactive institutions to implement Government of Barbados's current and future HIV/AIDS management programs; and

ensuring Government leadership at the highest level and multi-sectoral participation through various line Ministries.

The project would be open to efforts to scale up or introduce initiatives or actions that hold promise for managing the epidemic (guided by past experience in other countries), rather than focusing on a pre-selected narrow set of options. It would be prepared to evaluate the usefulness of such activities during implementation and either continue or abandon activities on this basis. Combined private/public sector implementation would be sought, since NGOs play a central role in effectively reaching high risk groups. Given the newness of some preventative programs in Barbados and the complexity of scaling up ART, a phased approach to project implementation has been chosen.

3. Project Description:

A. Prevention and control of HIV/AIDS Transmission - US\$ 5.7 million
Eight Ministries and the Office of Government Information Services would establish HIV/AIDS Coordination Units each, responsible for designing and managing implementation of specific interventions according to target populations. During the first year of project implementation, each Ministry would start implementing at least two core national program interventions: Information, education and communication (IEC), specifically addressed to behavioral change and condom distribution among different target groups. The following prevention programs would be developed through the different

Ministries under the coordination, monitoring and evaluation of the National Commission on HIV/AIDS (NACHA): a) Information Education and Communication, b) Condom Distribution, c) Prevention and Control of STIs, d) Prevention of HIV/AIDS Mother to Child transmission, e) Control of Laboratories and Blood Supply.

B. Diagnosis, Treatment and Care for HIV/AIDS; US\$ 14.3 million

The project would scale up the diagnosis, treatment and care for HIV/AIDS patients in the island, as part of the government's commitment to meet patient's clinical and emotional needs, reduce opportunistic infections, reduce work disability, and improve quality of life. Under this component, the project would support scaling up the following interventions: a) Voluntary testing and counseling; b) Laboratory strengthening; c) Pharmacy strengthening; d) Community and home care; and e) Facilities for treatment of Opportunistic Infections - OI and HAART therapy for patients with AIDS.

C. Management and Institutional Strengthening US\$3.5 million

The third component of the project would support sustainable institutional structure and management that will allow Barbados to effectively control, prevent, and care for HIV/AIDS over the long term. This would be accomplished by providing the necessary leadership, advisory services, staffing, goods, and general operating costs of the institutions discussed below.

4. Project Financing: The total cost of the proposed program is estimated at US\$23.65 million.

5. Project Implementation:

The project would be implemented under the authority of the Office of the Prime Minister (who is also the Finance Minister). At the political level, an Inter-ministerial Committee would set the political strategy guiding the implementation of the National Program. The Prime Minister and the Inter-ministerial Committee are finalizing executive appointments of experienced staff to assure sound implementation of the program.

The National Commission on HIV/AIDS (NACHA) will be responsible for determining the strategic content and direction for implementing the project in Barbados. This body has been created by the Barbados Cabinet as a "statutory board" to oversee the performance of the project and be accountable for its success to the public. The NACHA would advise government on HIV/AIDS policy, advocate and promote the active involvement of all sectors and organizations in implementing HIV/AIDS management actions, create partnerships to broaden the national response to HIV/AIDS, mobilize resources, internationally and locally to support the efforts, and to monitor and be ultimately accountable to the public for the successful implementation of the project.

6. Project Sustainability:

The project itself is likely to be sustained throughout its implementation period owing to the high level of ownership and commitment being shown by the government. The project would involve a broad number of stakeholders in its actual implementation, which will also raise the level of general ownership of the program and its subsequent sustainability. The project would also satisfy other conditions that will build longer term loyalty and commitment including:

Having immediate impacts on PLWHAs quality of life;
strengthen NGO capacity to deliver services;
resolving regulatory and legal issues that have been controversial;
encouraging broad participation, involvement, and therefore ownership; and
addressing prevention as well as treatment.

While less problematic in the short term, achieving financial sustainability of an ambitious program in the longer term will require further study and policy decisions. Government expects to arrive at a long term financial sustainability plan at project mid-term evaluation.

7. Lessons from Past Operations:

The project adapts design features that underpin the Multi-Country HIV/AIDS Prevention and Control Program, and have been successful in other countries. These include the following:

- Demonstrating a high level of government commitment and providing clear national leadership for a program;

- building collaboration networks with NGOs, community groups and CSOs, as a complement to public sector agencies;

- deconcentrating the initiatives for efforts to address the epidemic;

- including the focus on treatment and care as a continuum in the program;

- providing focus on behavior change as a key element of prevention and control; and

- adopting implementation measures that provide flexibility and responsiveness to the epidemic as it evolves.

The proposed project also adapts lessons from the Government experience with the NACHA in that direct line authority for the project's implementation is attached to the Prime Minister's Office to give institutional structure to the effort. Second, the project is being driven by pre-identified monitorable goals with financial resources allocated through Ministries to achieve them. Third, management of the HIV/AIDS activities is being assigned to dedicated persons both within Ministries and within the new Office, which brings managerial accountability.

Other lessons of previous Barbadian experience are less easily built in to the project's design; notably the difficulty of motivating behavioral change in individuals even when they may be well informed about the epidemic. The proposed project is designed to at least accommodate this risk by allowing for annual evaluation of results and the presumption that the activities to be financed (especially in the area of prevention) will change over time as a result.

This project also includes a major lesson from the other regional APL on Disaster Management in the Eastern Caribbean. Multi-country projects need a strong regional component to coordinate strategy and actions. This project will include such a regional coordinating mechanism.

8. Government Commitment:

The Government of Barbados organized its first nationwide effort to address the issues of HIV/AIDS in 1985. It established HIV/AIDS in public thinking and as a part of public dialogue. Government has now placed the advocacy and responsibility for achieving an effective response to the epidemic directly in the Office of the Prime Minister. It adopted a comprehensive program for the management, prevention and control of HIV/AIDS in September 2000. This program corresponds to recognized "best practices" as agreed by agencies such as UNAIDS, PAHO/CAREC, and CARICOM. Implementation of the program will involve a broad cross-section of Barbadian leadership from the public sector, NGOs, communities and civil society. For 2001, GOB has, in addition

allocated new budgetary resources specifically for the program, and has re-qualified for "borrower status" from the World Bank (having previously been graduated). These are strong indications of commitment to effectively reversing the epidemic's trend.

Barbados has also been a key leader in mobilizing efforts to prevent and control the spread of the epidemic throughout the Caribbean. As Chairman of CARICOM, the Barbadian Prime Minister gave strong impetus to reaching agreement on a Caribbean Regional Strategic Plan of Action for HIV/AIDS by Caribbean Heads of Government during July 2000. Barbados hosted a Caribbean Conference on HIV/AIDS in September 2000 that further built support for HIV/AIDS programs by governments as well as multilateral and bilateral donors. Most recently, (January 2001) Barbados has given additional encouragement to the OECS countries to invigorate their own national responses to the HIV/AIDS threat.

Finally, Barbados has agreed to devote additional resources to become one of the two "flagship" countries to launch the Caribbean Multi-Country HIV/AIDS Program, and serve as a model for subsequent country projects.

9. Environmental Aspects:

Category B. See Annex on environmental aspects.

10. Program Objective Category: The category for this project is Poverty Reduction and Human Resource.

11. Contact Point:

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Note: This is information on an evolving project. Certain components may not necessarily be included in the final project.