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Study finds HIV/AIDS funding does not undermine health care services for other diseases

Study addresses long-standing debate about funding imbalances for global diseases

BURNES COMMUNICATIONS

Deerfield, Ill. (May 2, 2012) -- While the battle against HIV/AIDS attracts more donor funding globally than all other diseases combined, it has not diverted attention from fighting unrelated afflictions -- such as malaria, measles and malnutrition -- and may be improving health services overall in targeted countries, according to a study on Rwanda published today in the May 2012 edition of the *American Journal of Tropical Medicine and Hygiene*.

A six-year investigation of health clinics in Rwanda by researchers at Brandeis University infuses fresh evidence into a long-standing debate about whether the intensive focus on HIV/AIDS, which in 2010 alone killed 1.8 million people, is undermining other health services, particularly in African countries that are at the epicenter of the pandemic. For example, between 2002 and 2006, one-third of funds from wealthy countries earmarked for health and population programs abroad were committed to fighting HIV/AIDS.

"We found that when health clinics in Rwanda expanded AIDS services, these efforts had no adverse effects on other types of health care," said Donald S. Shepard, PhD, a professor at Brandeis' Schneider Institute for Health Policy and the study's lead author. "There is even evidence that clinics that have received funding for HIV/AIDS services provide better care for all patients, including superior prevention services, than do clinics without AIDS programs."

Shepard and his colleagues note that their study differs from past efforts to analyze the issue because their investigation focused on the actual performance of health centers rather than on "inputs" such as overall spending on facilities or staff. For example, for the Rwanda study, the researchers collected data on the number of vaccines administered, visits for child growth monitoring, and non-HIV/AIDS hospitalizations.

They concluded that "for most indicators examined, there were neither prominent diversions nor enhancement effects" after AIDS services were inaugurated in the health centers. However, there was evidence that the health centers that offered AIDS services provided better preventive care than those that did not, including superior delivery of childhood vaccinations.

