

4. Resource requirements and funds committed for scaling up antiretroviral therapy in 2004–2005

- WHO estimates that the total funding required to support scaling up antiretroviral therapy to reach the WHO “3 by 5” treatment target of 30 000 by the end of 2005 is between US\$ 97 million and US\$ 101 million.
- The national antiretroviral therapy programme is funded by the government in collaboration with the African Comprehensive HIV/AIDS Partnerships (ACHAP) and a few other development partners. ACHAP is funded by the Bill & Melinda Gates Foundation with a US\$ 50 million contribution over a five-year period, to be matched by pharmaceutical manufacturer Merck & Co., Inc. and The Merck Company Foundation, whose contributions will include antiretroviral medicines.
- Botswana submitted a successful Round 2 proposal to the Global Fund to Fight AIDS, Tuberculosis and Malaria with two-year approved funding of US\$ 18.6 million focused on training, strengthening treatment, care and support activities, scaling up prevention programmes and reducing stigma and discrimination. An estimated US\$ 3.2 million of this is expected to be available for scaling up antiretroviral therapy.
- The United States President's Emergency Plan for AIDS Relief is expected to contribute about US\$ 36 million for scaling up antiretroviral therapy in Botswana.
- Taking into account the funds committed to date to support scaling up antiretroviral therapy, WHO estimates that the total funding gap for Botswana to reach 30 000 people by the end of 2005 is between US\$ 38 million and US\$ 42 million.

5. Antiretroviral therapy coverage

- Botswana's total treatment need for 2005 is estimated to be 60 000 people, and the WHO “3 by 5” treatment target is 30 000 for the end of 2005 (based on 50% of need).
- The government has declared a national treatment target of 47 500 by 2005.
- An estimated 18 000 people are currently receiving therapy; 12 000 are enrolled in public health facilities (under MASA – the national antiretroviral therapy programme) and about 6000 through the private health sector.

6. Implementation partners involved in scaling up antiretroviral therapy

- *Leadership and management.* The National AIDS Council coordinates the multi-sectoral response to HIV/AIDS. The secretariat of the National AIDS Council is the National AIDS Coordinating Agency. The National AIDS Council has representatives from 17 sectors including civil society, the private sector and the public sector. Other coordinating mechanisms include the National HIV/AIDS Partnership Forum, chaired by the National AIDS Coordinating Agency; and the HIV/AIDS Donor Coordination Forum, chaired by the Ministry of Finance and Development Planning. The government has also established HIV/AIDS sector committees in all ministries aimed at mainstreaming HIV/AIDS into sector plans and programmes. The Ministry of Local Government coordinates the district response centrally. The AIDS Department of the Ministry of Health plays the role of sector leadership, formulating policy, strategic planning, developing programmes, technical support and implementation in selected areas. WHO supports the AIDS Department in coordinating and harmonizing the work of all stakeholders.
- *Antiretroviral therapy service delivery.* The Government introduced highly active antiretroviral therapy on a nationwide scale in 2001. The implementation started in one centre, Princess Marina Hospital, and has since expanded to eight additional sites. The African Comprehensive HIV/AIDS Partnerships (ACHAP), funded by the Bill & Melinda Gates Foundation, Merck & Co., Inc. and The Merck Company Foundation, has been responsible for coordinating and financially supporting the antiretroviral therapy programme since inception. It has provided critical human resources and facilitated and supported the development of needed space in a number of treatment sites. It has also supported the development of information, education and communication activities for antiretroviral therapy, a system for tracking patients on treatment and monitoring of the programme. It has also provided support for logistics, medicines and other supplies. Other major partners supporting the antiretroviral therapy programme in Botswana include the United States President's Emergency Plan for AIDS Relief and the United States Centers for Disease Control and Prevention. The Baylor Center of Excellence is promoting comprehensive HIV/AIDS family care and support. The Botswana–Baylor partnership includes work on antiretroviral therapy for children and women and family care in general. The Botswana–Harvard Partnership provides assistance in laboratory services. BOTUSA is contributing to HIV testing and counselling activities. WHO is supporting activities related to assessment and planning for human resources for scaling up.

- *Community mobilization.* Over the years, civil society involvement in HIV/AIDS in Botswana has focused on prevention and on basic care for affected and infected victims. Community home-based care services are available through District Health Teams coordinated by the AIDS/STD (ASU) Unit in the Ministry of Health. As of July 2004, the ASU has trained more than 500 community home-based care volunteers. Several nongovernmental organizations operate in Botswana together with faith-based organizations. The most common community-based organizations involved in HIV/AIDS work are church organizations and women's groups. Village health committees are also reported to be very active in HIV/AIDS in many areas. The First Coping Center for People Living with HIV/AIDS (COCEPWA), which began in Gaborone as a private initiative, has been expanded to seven centres operating countrywide. COCEPWA has also initiated training for youth on the prevention of HIV/AIDS via the Centre for Youth of Hope. The Botswana Network of People Living with HIV/AIDS and the Botswana Christian AIDS Integration Programme play an important role in community mobilization. The main challenge faced by nongovernmental organizations and community-based organizations is the scarcity of available funding.
- *Strategic information.* The Ministry of Health provides leadership and coordination in monitoring and evaluation, surveillance, patient tracking, operational research and information management activities. Supporting agencies include the Ministry of Local Government, the Botswana–Harvard Partnership and WHO.

7. WHO support for scaling up antiretroviral therapy

WHO's response so far

- Conducting a WHO scoping mission to Botswana in March 2004 to assess the situation and identify opportunities and challenges for scaling up antiretroviral therapy and areas for WHO support
- Supporting the development of a national operational plan for scaling up antiretroviral therapy
- Assessing the human resource situation for scaling up antiretroviral therapy

Key areas for WHO support in the future

- Establishing a subregional “3 by 5” team for Botswana, Lesotho and Swaziland
- Supporting the strengthening of Ministry of Health planning and coordination mechanisms
- Supporting the review and update of regulations and policies on the role of nurses and midwives in delivering antiretroviral therapy
- Supporting the review and update of policies and legislation on issues related to the TRIPS Agreement and generic antiretroviral drugs
- Supporting the strengthening of the monitoring and evaluation system in accordance with scaling up antiretroviral therapy, including work on indicators for tuberculosis, HIV/AIDS care, preventing mother-to-child transmission and testing and counselling
- Supporting the development of treatment literacy to ensure community involvement

Staffing input for scaling up antiretroviral therapy and accelerating prevention

- Recruitment of a subregional “3 by 5” officer (for Botswana, Lesotho and Swaziland) is currently underway.
- Additional staffing needs identified include one National Programme Officer and one medical officer for antiretroviral therapy.

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This country profile was developed in collaboration with national authorities, the WHO Country Office for Botswana and the WHO Regional Office for Africa.