

COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

Target: Halt and begin to reverse the spread of HIV/AIDS

Target: Halt and begin to reverse the incidence of malaria and other major diseases

Performance Summary

Will Development goal be reached?

Possibly-Probably-Unlikely-Lack of Data

State of Supportive Environment

Strong-**Fair**-Weak but Improving-Weak

Status and Trends

Compared with many countries, Bahrain has a relatively low prevalence of HIV/AIDS. Nevertheless, this is no excuse for lack of action. The relatively young age structure of the country's population, the mobility of a significant number of expatriates, and the increased movement of Bahrainis abroad for educational and commercial purposes, heighten the risk of an outbreak. Certain factors that need to be addressed include a lack of adequate information and awareness about HIV/AIDS, especially among at-risk groups, as well as the lack of an adequate regulatory framework to provide guidelines on prevention. Treatment and reporting of HIV/AIDS, as well as obtaining reliable data, constitute a serious challenge in a society where the subject is still considered taboo by many individuals.

Malaria and tuberculosis do not constitute major problems in Bahrain, and in both cases, rates are declining as shown in the table below. Those who suffer from these diseases are mainly expatriates who have contracted them abroad and are currently being treated by local health care services. It is therefore likely that they will continue to decline, particularly in the case of malaria, which is not indigenous to the island.

HIV/AIDS Prevalence

An accurate assessment of the HIV/AIDS epidemiological situation in Bahrain is not possible due to the lack of updated, reliable data. Nevertheless, according to a surveillance report by the Ministry of Health, dated June 2002, HIV accounted for 115 cases in Bahrain and AIDS cases 7, or a total of 122. The 2002 UNAIDS report, on the other hand, estimated that the total number of HIV/AIDS cases in Bahrain at the end of 2001 was around 1,000, Table (1).

According to the Ministry of Health report published in June 2001, the major cause of HIV/AIDS transmission was through sexual

Table (1)
HIV/AIDS Number of Bahraini Cases

Indicator	1997	1998	1999	2000	2001
HIV	85	139	83	132	122
AIDS	14	11	8	8	7

Source: Ministry of Health, 2002

contact, which accounted for 90 per cent in 1997, 88 per cent in 1998, 95 per cent in 1999, and 85 per cent in 2000, Table (2). The age distribution of HIV/AIDS positive cases in 1999 was 17 per cent in the age 20-24 age bracket, 39 per cent in the 25-29 age bracket, and 18 per cent in the 30-34 age bracket.

Table (2)
Number of HIV cases by method of distribution

Indicators	1997	1998	1999	2000	2001
Hetero	78	122	79	108	119
Homo/Bi	0	0	0	3	1
IDU	2	6	1	2	0
Blood	4	7	3	2	1
Other	1	4	0	17	1

Source: Ministry of Health, 2002

Because of the traditional nature of Bahraini society, the most promising approach to a reduction of HIV/AIDS cases is a programme of community awareness and prevention, which is the necessary key to reducing infection rates and ultimately defeating AIDS. Even though it is unlikely that Bahrain will suffer the dramatic increases seen in some other parts of the developing world, nevertheless the low prevalence rates can be halted and reversed at a relatively low cost by investing in prevention and care before HIV/AIDS becomes a significant health issue.

Malaria and other Diseases

Neither malaria nor tuberculosis constitutes major health problems in Bahrain. Malaria is not endemic to the island and therefore only appears in patients who have contracted it elsewhere.

Bahrain has a relatively low prevalence of HIV/AIDS, however, this is not an excuse for lack of action.

Neither malaria nor tuberculosis constitutes major health problems in Bahrain.

Tuberculosis is declining slowly, Table (3), and although a significant majority of cases are expatriates, the contagious nature of the disease means that it can be passed to citizens. Up until 2000, all primary school children were vaccinated against TB. At present it is mandatory only for babies born in Bahrain of expatriate parents, but the Ministry of Health is trying to introduce a compulsory vaccination programme for all infants under the age of one.

Table (3)
Malaria and TB cases

Indicators	1991	2001
Number of those with malaria	192	79
Prevalence and death rate associated with TB %	1.9	1.5

Source: Ministry of Health, 2001

For individuals who suffer from tuberculosis, the biggest problem involves monitoring patients to ensure that prescribed medication is taken for the full term so that they do not contribute to the development of resistant forms of the disease. This requires adequate staffing, a perennial problem, and one which budget constraints make difficult for government health services to provide. The publication of an informational manual setting out the proper guidelines for diagnosis and treatment protocols may be a provisional measure for dealing with the spread of tuberculosis, in lieu of trained personnel who can provide the necessary care and monitoring.

Challenges to Achieving this Goal

The Kingdom of Bahrain is committed to halting and reversing the spread of HIV/AIDS. However, due to Bahrain's geopolitical status as an important tourist hub in the Middle East, and its diversified economy which encourages travel into and out of the country, a more sophisticated screening system for incoming tourists needs to be established. In addition, providing young people at especially high risk of contracting HIV with the information and support they need to prevent infection is of paramount importance.

It is believed that most people with HIV are unaware of their HIV-positive status. The widespread stigma and discrimination that HIV-infected persons and members of vulnerable

groups often experience, both from officials and general society in general, render people reluctant to seek prevention and information services. So far there has been a general dearth of measures promoting safer conduct among vulnerable groups and raising awareness among the general public, especially the youth. People have to be effectively empowered to be able to protect themselves and others by gaining access to adequate protection

Supportive Environment

In view of the increase of HIV/AIDS patients, the government has adopted certain preventive steps to stop its spread. The Ministry of Health, in cooperation with the World Health Organization, initiated a national programme with a work plan for prevention and control of HIV/AIDS that focused on screening of blood donors, training of AIDS counseling, periodic exams of persons with HIV/AIDS, and providing counseling for persons with HIV/AIDS and their close contacts. These actions, taken at the highest political level, if strongly enforced by the health officials, are expected to open up new opportunities for addressing HIV/AIDS.

Priorities for Development Assistance

Development partners could usefully focus their assistance in certain key areas include:

- Strengthen the capacities to help the National Aids Committee created by the government to implement the national HIV/AIDS strategy
- Develop a national capacity for HIV/AIDS surveillance. There is a need to improve the relevant health information systems, quality of data and analysis
- Conduct public awareness and education campaigns.

In order to control the spread of HIV/AIDS, a sophisticated screening system for tourists needs to be established.

Public awareness and education campaigns are of paramount importance in the prevention of HIV/AIDS.