



Independent observer
of the Global Fund

Mis-Steps in the Use of Treatment Numbers

The Global Fund and PEPFAR (the US President's fifteen-billion-dollar Emergency Plan for AIDS Relief, led by Ambassador Randall Tobias) have both made some mis-steps in claiming credit for their respective roles in financing the 700,000 people who are now receiving treatment for HIV/AIDS.

Even though the total of 700,000 is not in doubt, PEPFAR has created the impression that it is directly providing treatment to far more people than is in fact the case. And the Global Fund may have done the same.

The Fund, whose web site normally provides impressively detailed information about its activities, says that its grants have brought "130,000 [of the 700,000] people on treatment," but provides no country-by-country breakdown or other data to back this up. So it's impossible to know how valid that number is.

PEPFAR, on the other hand, not only says that it has "supported anti-retroviral treatment for approximately 155,000 [of the 700,000] men, women, and children in its first eight months," but it provides a breakdown by country. At first sight, this additional detail is a refreshing change for an agency whose hard-to-find web site normally tells almost nothing about PEPFAR activities.

But as one examines the PEPFAR statements and numbers in more detail, one cannot fail to conclude that PEPFAR is implicitly claiming credit for more than is justified.

For instance, Ambassador Tobias told Voice of America "Today we [PEPFAR] announced very significant progress in our programs to get people on treatment and specifically in the 15 focus countries that we are putting particular attention on. We now have 155,000 people receiving treatment.... We really are ahead of schedule in launching the scale-up of the president's program." Based on this and other statements, the New York Times reported "Ambassador Tobias said the United States is paying for the treatment of

155,000 people.”

But these statements go beyond what the PEPFAR documentation claims. For example, in its press release, PEPFAR said only that it “supported” the treatment provided to 155,000 people, not that it “got” these people on treatment. This is a much less strong claim. Indeed, it’s an almost meaningless claim, because anyone who gives \$1,000 to a major funding agency can say that he or she has “supported” millions of people.

Meanwhile in further documentation not mentioned in the press release, PEPFAR acknowledged that 68,000 of the 155,000 people who are “receiving treatment” thanks to the United States are also having their treatment supported by the Global Fund.

Furthermore, PEPFAR’s definition of whose treatment it is “supporting” is extremely broad. For instance, the PEPFAR documentation states that the 155,000 being supported by PEPFAR includes 32,839 in Botswana. Yet according to a WHO report, the estimated total number of people in Botswana receiving ARV treatment from all programs is... precisely the same number. Moreover, according to the WHO report, about 25% of these 32,839 people are paying for their own treatment through private doctors, or are being treated by their employers. And a further 45% were already receiving their treatment through public-sector treatment programs before PEPFAR distributed its first grants in the second quarter of 2004. Finally, some of those under treatment in Botswana are being treated with generic drugs, which thus far PEPFAR has not been willing to finance.

In eight additional countries – Cote d’Ivoire, Ethiopia, Guyana, Haiti, Mozambique, Namibia, Nigeria and Zambia – PEPFAR again says it is supporting treatment to every single person whom the WHO report says is under treatment.

The explanation for these strange figures is that some of the funding provided by PEPFAR does not go to local projects that “put pills in people’s mouths.” Instead, it goes to national projects – e.g. training of medical staff, or provision of lab facilities – that PEPFAR believes indirectly benefit all people who are on treatment in that country. It may be that the Global Fund takes a similar position regarding some of its own grants. This won’t be known until the Fund releases country-by-country treatment data which then can be compared with WHO’s data on total numbers of people on treatment.

The joint statement last week by WHO, UNAIDS, the Fund and PEPFAR was the result of a recent decision by the four agencies to use a common and clear methodology for measuring numbers on treatment. More work needs to be done on that methodology, and on how the numbers are used. Otherwise, press reports will continue to mistakenly suggest that a particular funder is single-handedly paying for the treatment of huge numbers of people when in fact that funder is only helping many of them indirectly or jointly with other funders.

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