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Media Statement from the International AIDS Society

NEW HIV ESTIMATES CONFIRM THAT HIV/AIDS IS STILL A LEADING CAUSE OF DEATH WORLDWIDE

New global HIV estimates, released this week by the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the World Health Organization (WHO), underscore the continued severity of the HIV pandemic. An estimated 33.2 million adults and children are living with HIV at the end of 2007, including 2.5 million newly infected. More than two million men, women and children died of AIDS-related complications over the past year, bringing the cumulative number of deaths to more than 20 million.

The new estimate of global HIV/AIDS prevalence is a reduction from the 2006 estimate of 39.5 million. While this is good news – there are less people living with the life-threatening virus - these revised estimates mostly reflect the better use of monitoring tools, new surveys and more sophisticated modelling of the epidemic. HIV/AIDS is the subject of some of the most sophisticated measures of any disease tracked globally. New measuring techniques in India alone account for 3 million fewer infections (down from 5.7 to 2.5 million). The data also reflect the positive impact of HIV prevention programmes in a small number of countries.

The epidemic is not homogeneous. Sub-Saharan Africa bears the brunt of the pandemic, accounting for more than two-thirds (68%) of persons living with HIV and more than three-quarters (76%) of deaths in this year. In other parts of the world, the epidemic remains concentrated in key populations, including men who have sex with men, injecting drug users and sex workers. In these populations, infection rates are often as high as 50%. In the Eastern European region, including Russia, infection rates have increased by over 150% since 2001, and show no signs of abating. Half of all infections worldwide are in women, particularly young women, who in many parts of the world remain powerless to control their own sexual lives in the face of violence and lack of protection of basic human rights.

A number of critics have accused the UNAIDS and WHO of distorting figures in the past to push for increased funding to fight AIDS. This seems an unnecessary and petty position. The fact is, the evolution of HIV prevention, treatment, and care over the past quarter century is one of the great successes of medical science. Committed and sustained research efforts, combined with an increasing political and social mobilization, have provided the evidence on which approaches to programming are based. These same scientific efforts are now resulting in new prevention technologies and drugs, and new strategies to manage and deliver both. They are also allowing us to see a clearer picture of the epidemic.

The new data also indicate that increased resources provided in the past five years through the Global Fund to Fight AIDS, Tuberculosis and Malaria, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR), the Bill & Melinda Gates Foundation, and many other bilateral

donors and private foundations, with leadership from UNAIDS, its co-sponsoring organizations, governments and civil society are beginning to show positive results in some countries. Access to life-saving antiretroviral treatment has increased worldwide, saving millions of lives. Sadly, still less than 30% of those who need the medications have access. These increased resources for fighting AIDS are also beginning to have a positive impact on the health systems of the poorest countries. Country-level programmes funded through the Global Fund and PEPFAR have helped build systems and services that support not only millions of people living with HIV/AIDS, but also reach into communities burdened with tuberculosis, malaria and a host of other preventable diseases.

The release of these new HIV estimates is an opportunity to examine where we are in the global response to HIV. Unfortunately, at the end of 2007, lack of political will continues to hold back the response, particularly in the groups most vulnerable to HIV. In 2006, the governments of the world came together at the United Nations General Assembly to review progress on fighting the disease. Experts, including the International AIDS Society, were shocked that the declaration resulting from this meeting failed to name the marginalized communities most affected by the disease – gay men and other men who have sex with men, injecting drug users and sex workers. Public health imperatives dictate that religious, ideological or moral attitudes must never be used as an excuse to ignore the realities of a preventable disease that has affected the entire world.

No one working around the world on HIV/AIDS wants anything other than to see the global statistics on HIV/AIDS drop to zero. Unfortunately we are a long way from achieving that dream. The gap between what is urgently needed and where we are today is nothing short of a crime against humanity. The time for universal action is now.

Based in Geneva, Switzerland, the International AIDS Society's 10,000 plus members are professionals involved at all levels of the global response to HIV/AIDS.