

SOUTH ASIA'S NEW COMMITMENT TO FIGHT AIDS MARKS TURNING POINT, SAYS UNAIDS EXECUTIVE DIRECTOR

South Asia's low HIV prevalence masks growing epidemic among high-risk groups

Kathmandu, 19 April 2004 – Despite the low HIV prevalence in South Asia, the epidemic continues to spread unabated, particularly among high-risk groups. In an effort to accelerate and strengthen the response to AIDS in the region, the South Asian Association for Regional Cooperation (SAARC) has taken a significant step forward by signing a memorandum of understanding with UNAIDS today. “By making AIDS a top priority, the partnership agreement between SAARC and UNAIDS marks another turning point in South Asia’s response to the epidemic,” said Dr Peter Piot, Executive Director of the Joint United Nations Programme on HIV/AIDS (UNAIDS). “Home to close to 50% of the world’s poor living on less than a dollar a day, South Asia is faced with a potentially explosive AIDS epidemic that could erupt unless existing HIV prevention and care efforts are scaled up immediately.”

The partnership agreement signed between the SAARC and UNAIDS focuses specifically on tackling the challenges of stigma and discrimination associated with HIV as well as scaling up HIV care, treatment and prevention services, which are significantly lacking in Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka, SAARC’s member countries. SAARC’s commitment to AIDS emerged from the Twelfth SAARC Summit held in Islamabad in January 2004, during which 2004 was declared the “SAARC Awareness Year for TB and HIV/AIDS”.

Over 5 million adults and children are estimated to be living with HIV in South Asia. The AIDS picture in the region remains dominated by the epidemic in India, where an estimated 4.5 million people are living with HIV, the second largest worldwide after South Africa. According to India’s National AIDS Control Organization (NACO), the epidemic is not confined to high-risk groups or in urban areas, but is gradually spreading into rural areas and the wider Indian population.

In neighbouring Bangladesh and Nepal, risky behaviour among young people is on the rise. “South Asia has a golden opportunity to prevent the AIDS epidemic from spinning out of control in the region,” said Dr Piot. “It must invest its human and financial resources in effectively turning the tide of AIDS. The cost of inaction will be much more severe a few years from now.”

For more information, please contact Akhila Sivadas, UNAIDS, New Delhi, (+91 112) 629 2787 or 622 9631, or Dominique De Santis, UNAIDS, Geneva, (+41 22) 791 4509, or. You may also visit the UNAIDS website, www.unaids.org, for more information about the programme.