PRESS BRIEFING BY SPECIAL ENVOY FOR HIV/AIDS IN AFRICA NOON PRESS BRIEFING, UN, JANUARY 3, 2002

The HIV/AIDS pandemic could be driven back in Africa over the next year if several countries met targets they set more than 30 years ago for official development assistance (ODA), Stephen Lewis, the Secretary-General's Special Envoy for HIV/AIDS in Africa, told correspondents at a Headquarters press briefing today.

As far back as 1979, countries of the Organization for Economic Cooperation and Development (OECD) pledged 0.7 per cent of their gross domestic product (GDP) to ODA, but current levels only reach 0.22 per cent, Mr. Lewis said. "That's an appallingly low level of official development assistance. It's quite tragic in its implications."

The difference between .22 per cent and 0.7 per cent would be roughly an additional \$110 billion to \$120 billion per year, he added. Five countries had reached it -- Norway, Denmark, Sweden, Holland and Luxembourg -- but not a single member of the Group of Seven industrialized countries was even close, he said.

He said that it was estimated at the International Conference on Sexually Transmitted Diseases, from 9 to 12 December in Burkina Faso, that Africa needed \$5 billion of a required \$7 billion to \$10 billion to fight AIDS now. However, the continent had nowhere near that amount and a fraction of the missing ODA funding would make a huge difference.

If financial needs were met, virtually everything else was in place to turn the tide on HIV/AIDS in Africa during 2002, he said. "The AIDS curse still has terrifying proportions, but in the minds of those who are integrally involved everything is virtually in place to subdue the pandemic this year."

International conferences were constantly highlighting what must be done to beat AIDS, and African leaders were more united than ever before with many making needed budget shifts, he noted. Anti-viral treatment would begin this year in such countries as Botswana and Nigeria, and several countries, including Uganda and the United Republic of Tanzania, would soon be manufacturing anti-viral drugs themselves. Countless non-governmental organizations were working on prevention and care, the private sector was expanding coverage for employees and dependents, and programmes to prevent mother-child transmission were cropping up in several nations. "The voices of people living with AIDS are heard everywhere", he said. "Insistent, irresistible, clamorous demands for treatment."

He said that almost all countries now had national AIDS programmes, gender and stigma were being constantly discussed, and the global funds (for tuberculosis, malaria and AIDS) should start distributing funds within the first quarter of the year. The conference in Burkina Faso unveiled several startling grass-roots activities across the continent, which ranged from peer counselling to orphans and care, he said. "Anyone who is jaded or cynical is quickly overcome when exposed to this extraordinary variety of initiatives."

Two weeks ago, he found several hopeful signs during a trip to Nigeria, he added. The country had just completed a new study showing its prevalence rate for HIV/AIDS to be 5.8 per cent, or more than 3 million people infected. That was a huge number, but the rate was dropping and Nigeria was showing some ability to hold the pandemic back. The country began retroviral treatment last week, using generic drugs it had bought from India. Costs were decreasing and Nigeria hoped to treat 10,000 to 15,000 people with three types of drugs over the first year and then to expand the number of treated and range of drugs.

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"One of the problems in Nigeria, which will happen elsewhere, is that there are more people who fit the criteria for treatment than there are, immediately, drugs to treat them", he said. "How one chooses is obviously difficult for the centres where treatment is provided."

A correspondent asked whether funding for HIV/AIDS from the West had dropped since the 11 September attacks on the United States. Mr. Lewis replied that funding had been eclipsed and levelled off to about \$1.5 billion after those attacks. However, the feeling now was that funding was turning around and contributions were picking up.

Asked about the impact of the recently adopted United Nations budget on the global fund, Mr. Lewis said the bulk of funds for HIV/AIDS came from agencies, and there was no sign of a decline in the monies they were receiving.

Responding to another question, Mr. Lewis said African countries had taken their commitment to devote 15 per cent of their budgets to health seriously. "They don't pretend they can make a significant dent on the pandemic without outside resources. A remarkable amount of money has been found since 11 September to respond to those events, and it seems to many of us that significant amounts of money could be found to deal with the pandemic, which loses 6,000 to 8,000 lives per day and must somehow be confronted."

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