



UNAIDS
JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

UNHCR
UNICEF
WFP
UNDP
UNFPA
UNODC
ILO
UNESCO
WHO
WORLD BANK

Statement

UNAIDS concerned about effects of violence in Kenya on people living with HIV and potential risk of new HIV infections

Recent violence in Kenya could pose setbacks to AIDS response

Nairobi/Geneva 11 February 2008—The Joint United Nations Programme on HIV/AIDS (UNAIDS) is concerned about the short and long-term impact of the recent disruption in Kenya on the country's response to the AIDS epidemic.

In recent years, Kenya has made significant progress in responding to AIDS with trends showing a clear decline in HIV prevalence—estimated to have dropped to 6.1% (5.2% – 7%) in 2005 from a high of 10% in the late 1990s. Critical HIV services have also been scaled-up resulting in a greater awareness of HIV transmission and a significant increase in access to antiretroviral treatment. However, UNAIDS is concerned that the recent events in the country could pose potential setbacks to Kenya's AIDS response.

Immediate concerns are for people following antiretroviral treatment regimens, particularly those who have been displaced by the violence or who have not been able to access treatment. There are also concerns that the displacement and violence (including sexual and gender-based violence) has made people more vulnerable to the risk of HIV infection.

“Although concerted efforts have been made by the Kenyan authorities and partners to minimize disruption in people accessing antiretroviral treatment and other essential HIV services, we are still very concerned,” said Dr Erasmus Morah, UNAIDS Country Coordinator in Kenya. “While it has been reported that many people receiving treatment took enough supplies of their drugs to take them through the December holidays, we also know that some people left their homes in a hurry, without their medication and/or treatment records,” he added.

One of the main concerns over prolonged disruption to antiretroviral treatment and anti-TB treatment is the potential development of resistance to the drugs. There is an urgent need to assess the extent of treatment disruption and adequacy of the current response.

There are also reports of high levels of sexual and gender-based violence, and that disruption to social and family networks has forced some women and children to engage in commercial and transactional sex in exchange for shelter, food or protection. These reports not only raise serious human rights concerns but also fears of an increase in new HIV infections. Efforts will need to be focused to increase HIV prevention and address the protection of women and children and victims of sexual and gender-based violence.

“It is too early to say what the full impact the recent events will have on Kenya's AIDS epidemic, this may only become apparent much later,” said Dr Morah. “UNAIDS will continue to support Kenya through this difficult period to help ensure that Kenya sustains its response to the epidemic and continues the advances it has achieved in recent years.”

Contact

Sophie Barton-Knott | UNAIDS Geneva | +41 22 791 1697 | bartonknotts@unaids.org

UNAIDS is an innovative joint venture of the United Nations, bringing together the efforts and resources of the UNAIDS Secretariat and ten UN system organizations in the AIDS response. The Secretariat headquarters is in Geneva, Switzerland—with staff on the ground in more than 80 countries. Coherent action on AIDS by the UN system is coordinated in countries through UN theme groups, and joint programmes on AIDS. UNAIDS' Cosponsors include UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and the World Bank. www.unaids.org

Uniting the world against **AIDS**