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AIDS remains the leading cause of death and lost work days in the most productive age groups in Asia

Countries need to craft a new response – calls the Independent Commission on AIDS in Asia

New York—Even after two decades, AIDS remains the most likely cause of death and work days lost among 15-44 years-olds in Asia warns the independent Commission on AIDS in Asia. These findings were released today in a report entitled “Redefining AIDS in Asia – Crafting an effective response” by an independent Commission, consisting of nine members across Asia and led by Dr C. Rangarajan, Chief Economic Adviser to the Prime Minister of India.

The report was presented to the United Nations Secretary-General Ban Ki-moon. The Secretary General commended the Commission on this unique achievement, and appealed to the Governments and civil societies of Asian countries to adopt the Report and implement its recommendations seriously. "Asia is home to some of the fastest-growing economies in the world, and holds the key to social and economic emancipation and development for millions of poor people," the Secretary-General said. "But we will never see equitable progress if some parts of the population are still denied basic health and human rights -- people living with HIV, sex workers, men who have sex with men, and young people who inject drugs. I look to Asian Governments to amend outdated laws criminalizing the most vulnerable sections of society, and take all the measures needed to ensure they live in dignity. By implementing the recommendations of the Commission, Asian countries can avert massive increases in infections and death, prevent economic losses, and save millions of people from poverty. Such leadership is critical in Asia today."

Nearly five million people are living with HIV in Asia, with 440,000 people acquiring the infection in 2007 and 300,000 dying from AIDS related illness in the same year. At this rate, the study contends, an additional eight million people will become newly infected by 2020.

Dr. Rangarajan underscored the importance of the Commission's findings and recommendations. "Over the past 18 months, the Commission has collected, reviewed and synthesized the scientific evidence surrounding the epidemics in Asia to recommend a more effective response." The Chairman went on to highlight three central findings to the Commission's work. First, the Commission found that the existing global classification of low, concentrated and generalised epidemics does not reflect the situation in Asian countries, and recommended formulation of a new classification, which describes epidemics according to the biological and behavioural trends. Dr. Rangarajan also highlighted that the current allocation of the existing resources has not focused on effective priority interventions which can have an impact on the epidemic and reduce new infections. The Commission recommends that an annual investment of only \$0.30 per capita on focussed prevention programmes can reverse the epidemics. Finally, despite the significant household-level impact of AIDS, the Commission found that impact mitigation programmes for affected

households were absent from most country level responses in Asia.

Welcoming the report, Dr Peter Piot, Executive Director of the Joint United Nations Programme on HIV/AIDS (UNAIDS) expressed his appreciation for the Commission's efforts to bring a new perspective on the Asian epidemic, including its pragmatic recommendations. "The findings of this report demonstrate the diversity of the AIDS epidemics in Asia and the need for countries to understand what is driving their epidemics and how to reach populations most at risk of HIV infection," said Dr Piot. "Focused prevention efforts are an essential part of scaling up to universal access to HIV prevention, treatment, care and support."

According to the report, if Asian countries fail to mount a largely scaled up priority response in Asia they will have to incur dramatic costs due to their inaction. This will mean that:

- Almost 8 million adults and children in Asia-Pacific will be newly infected between 2008 and 2020.
- The annual death toll will increase to almost 500,000 by 2020.

"The Report of the Commission defines a new role for civil society irrespective of the political structure in Asian countries. Community organisations of People Living with HIV and marginalised groups like sex workers, drug users, men who have sex with men and transgenders must be involved not just in delivery of services but at policy making level" says Frika Iskandar, AIDS activist in Asia and an HIV-positive woman, sitting on the Commission. During the proceedings of the Commission, Iskandar led a civil society survey, which synthesized on-line responses from hundreds of representatives of community groups who were involved in AIDS related work throughout Asia. "I am speaking for 600 individuals and organisations in the community, who have responded enthusiastically to the Commission's call," she explained.

Striking an optimistic note the Commission observes that if Asian leaders implement a priority program right away:

- The number of people newly infected by 2020 can be kept to 3 million, less than half the number of new infections expected otherwise.
- The death toll can be kept to less than 300,000 in 2020, saving the lives of more than 200,000 people each year.

By spending between half a dollar to one dollar per capita, depending on the prevalence rate in the country, 80% coverage of HIV prevention, treatment, care and livelihood security programs can be achieved, the Commission observes. Asian countries have the resources, the technology and organisational capacity for a vastly scaled up response to the AIDS epidemic. What is required is political will of the Governments in Asia and meaningful involvement of community-based organisations in the response.

Contact:

New York—Mark Aurigemma | +1-646-270-9451 | mark@aucomm.net
Bangkok—Jeannie Hallacy | +66-86-003-2316 | hallacy@loxinfo.co.th