



7th International Congress on AIDS in Asia and the Pacific
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Press release

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AIDS drug access increasing in the Asia and the Pacific, but future care needs daunting for region's health systems

Kobe, Japan – Recent progress in delivering antiretroviral (ARV) drugs to people living with HIV/AIDS in Asia and the Pacific has been impressive. But the 8.2 million people living with HIV in the region present a major future care need that national health systems are not ready to absorb in the coming years.

The '3 by 5' target – to provide three million people in low- and middle-income countries with ARVs by the end of this year is providing an important impetus in the overall international efforts towards expanded access to care and treatment services.

The experiences reported this week during the ICAAP congress provide further evidence that large-scale HIV treatment access is achievable, effective and increasingly affordable, even in the poorest and most challenging settings. At the same time, the challenges of expanding coverage beyond current levels and building sustainable systems to support it remain a significant challenge.

In Asia, the region with the second highest need for AIDS treatment, the number of people receiving ARVs has increased three-fold from 55,000 to 155,000 in the past 12 months. Despite this significant progress, the overall proportion of people in the region with advanced HIV infection receiving ARVs remains low, mirroring the global average of around 15%. That means that around one million Asians with HIV who would currently benefit from ARVs do not have access to them. The additional seven million people with HIV in the region – but who do not yet need ARV or other care options – will each inevitably reach the stage where they also require AIDS-related care services in the coming years.

“There is still a significant gap, and the three million target is likely not going to be achieved by the end of the year. But we have shown that the equation is still valid,” said Dr Jack Chow, Assistant Director General of the World Health Organization (WHO) and head of their HIV/AIDS, Tuberculosis and Malaria programme. “I think there is a profound opportunity to demonstrate in a creative way that if you introduce teams with educators, citizen leaders and journalists to educate the community in a variety of needs, the uptake will be high and rapid when the programme rolls in,” he added.

In India, the Asian country with the largest current and future AIDS care needs, around 65,000 people are taking ARVs. That leaves a further 700,000 for whom ARVs are out of reach. In Thailand, where the delivery of ARVs has been the most effective in the region, about 40% of those who would already need ARVs do not have them.

“We have given a promise to people that ARVs will be made available, and we are clearly not keeping up that promise,” said Dr NM Samuel, who runs the Department of Experimental Medicine and AIDS Research in Chennai, India. “If we are unable to provide ARVs on a regular basis to people who require them, can we then seriously think about alternatives, like ensuring prophylaxis and treatment for [HIV-related] opportunistic infections on a regular basis, or providing nutritional supplements. Or are we going to wait another three years for so many more people to die before these measures come into effect?”

The current gap in all kinds of HIV/AIDS care provision in the region represents a common failure to meet not just the 3by5 target, but the key goals agreed to by all governments in the Declaration of Commitment on HIV/AIDS during the UN General Assembly Special Session (UNGASS) in 2001. In that commitment, leaders from Asia and the Pacific promised, by 2005, to “...develop and make significant progress in implementing comprehensive [HIV/AIDS] care strategies... required to provide access to affordable medicines, including anti-retroviral drugs, diagnostics and related technologies, as well as quality medical, palliative and psychosocial care.” Once again, just one year ago, in July 2004, 38 governments from the region reiterated that commitment through a ministerial meeting and resulting statement titled *Access for All: Political Accountability*.

In the opening session of the ICAAP congress Dr Peter Piot, Executive Director of the Joint United Nations Programme on HIV/AIDS drew attention to the lack of sufficient action to make these commitments a reality: “These figures show that the vast majority of countries are doing too little on AIDS overall and in particular on protecting and supporting those who are most at risk.”

In mid-2006 a comprehensive review of national performance against the specific targets of the UNGASS Declaration of Commitment on HIV/AIDS will be completed and the level of action on HIV/AIDS by all countries will be placed under a spotlight.

“The likely failure of 3by5 to reach its target is not just another missed target. It is an indictment of leaders in rich and poor countries that failed to back it and save the lives that needed saving,” said Leonard Okello, International HIV Coordinator at ActionAid International one of the African delegates attending the ICAAP congress. “The G8 meeting next week has the chance to correct this. They now need to give their backing to a target of universal access for all who need it by 2010 and make sure this happens,” he added.

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