

AIDS 2008 highlights stigma and discrimination

The XVII International AIDS Conference (AIDS 2008) took place August 3–8, 2008, in Mexico City, Mexico. Organized under the theme of *Universal Action Now*, the gathering sought to highlight the need for continued urgency in the worldwide response to HIV/AIDS and to push for action and commitment on the part of all stakeholders. It was the largest conference ever to hold in Latin America.

As an active player in the global battle against the pandemic, OFID was a key partner in the conference, sponsoring the attendance of around 100 developing country participants and taking part in the sessions and exhibition. The experience was seen as a valuable opportunity not just to keep abreast of the latest developments, but also to network and explore ways and means of optimizing OFID's ongoing contribution to the worldwide effort.

Some 24,000 delegates from over 190 countries attended AIDS 2008. Participants were drawn from across the entire HIV/AIDS spectrum: from scientists, advocates and community leaders, to policy makers and donors. They faced a challenging agenda – to evaluate progress and scale-

structural barriers were preventing the implementation of evidence-based interventions. Until leaders in both government and civil society could separate personal morality and political expediency from the action required to halt and begin to reverse the epidemic, universal access targets would not be met.

Nevertheless, AIDS 2008 did prompt some key commitments, notably among political leaders of the host region. Already, ahead of the conference, education and health ministers across Latin America and the Caribbean announced an agreement to address sexual health education reform among young people. Similarly, the Coalition of First Ladies and Women Leaders in Latin America pledged to eliminate maternal to child transmission. Mexican President, Felipe Calderón delivered an impassioned speech at the conference's opening session, vowing to fight homophobia and other barriers to meeting universal targets within Mexico.

Through some 500 sessions, 156 satellite meetings and the submission of thousands of scientific papers, the conference reported numerous new developments and challenges. These included, among others, advances in clinical management;



Universal Action Now was the theme of the AIDS 2008 Conference.

Photos: IAS/ Mondaphoto

up action towards the Millennium Development Goal target of providing universal access to HIV prevention, treatment and care by 2010.

Conference outcomes

The overriding message to emerge from the five days of discussions was that a combination of inadequate resources, unmet commitments and

the potential impact of antiretroviral therapy (ART) on reducing HIV transmission; the negative effect of differential access between children and adults to HIV diagnostics and care; human rights' protection as a central role in the response to AIDS; and, increasing focus on innate immunity and the body's inflammatory response to HIV as a rich source of new therapeutic targets.

Opening statements

The conference had opened with an inaugural address by Dr. Pedro Cahn, Conference Chair and President of the International AIDS Society (IAS). A host of other political leaders and HIV/AIDS advocates joined him on the podium. They included José Angel Cordova Vilalobos, Mexican Secretary of Health; Ban Ki-moon, Secretary-General of the United Nations; Margaret Chan, Director-General of the World Health Organization; Dr. Peter Piot, Executive Director of the Joint United Nations Programme on HIV/AIDS; Denzil Douglas, Prime Minister of St. Kitts & Nevis; and María Teresa Fernández de la Vega, First Vice-President of Spain.

In his speech, Dr. Cahn highlighted some of the obstacles hindering the global AIDS offensive and urged the international community to “do better” in its response. “Too many lives depend on us; too many lives have already been lost; countless

UN Secretary-General Ban Ki-moon called for greater respect and tolerance towards people living with HIV and AIDS.



Photo: IAS/Mondaphoto

more are in peril,” he said, pointing to funding, research and human rights as areas of particular weakness.

UNAIDS Executive-Director Dr. Peter Piot agreed that much more had to be done, but expressed encouragement at some of the successes to date. “For the first time fewer people are dying of AIDS and fewer people are becoming infected with HIV,” he said. “This is cause for great encouragement, but it is not cause for complacency and it is certainly far too early for declaring victory, because the end of AIDS is nowhere in sight,” he added.

Stigma and discrimination

Central to the five days of deliberations were discussions on how to tackle the underlying drivers of HIV risk and vulnerability; namely, gender inequality, human rights violations and HIV-related stigma and discrimination. Widespread consensus emerged that fear of violence, discrimination and unwarranted prosecution prevent many people living with or at risk of HIV from seeking testing and treatment. These vulnerable groups include injecting drug users, sex workers and men who have sex with men, as well as women and youth.

“In far too many places, stigma and discrimination continue to fuel counterproductive laws and policies that undermine prevention and treatment scale-up”, said Dr. Luís Soto Ramírez, Local Co-Chair of AIDS 2008. “Confronting such policies head-on, and demanding that they be changed, is a central component of any HIV prevention strategy. HIV is a viral infection, not a moral infection and even less a political one,” he added.

His views were echoed by UN Secretary-General Ban Ki-moon, who called on politicians around the world “to speak out against discrimination and protect the rights of people living with and affected by HIV, for schools to teach respect, for religious leaders to preach tolerance, and for the media to condemn prejudice in all its forms.”

Combining prevention and treatment

Another key outcome of the conference was the concept of “combination prevention,” a term coined to describe the holistic approach to curbing HIV transmission: deploying multiple concurrent strategies that address structural, behavioral and biomedical factors that increase vulnerability to HIV.

“We have finally accepted the fact that an effective vaccine is not going to be around any time soon,” said Dr. Julio Montaner, AIDS 2010 International Chair and IAS President 2008–2010. This acceptance, he said, had moved the prevention field onto “a very sophisticated level,” where traditional measures, such as awareness and safe practices, were complemented by antiretroviral treatment as part of an enhanced combination package.

The potential of highly active antiretroviral therapy (HAART) as an aid to HIV prevention was highlighted in a study presented at the conference by



OFID's exhibition stand at the Conference was a focal point for networking and the dissemination of information on OFID's AIDS interventions.

Photo: Arij Senussi/OFID

experts from the British Columbia Center for Excellence in HIV/AIDS. According to the study, an increase in HAART coverage could dramatically decrease the number of new infections and save money for healthcare systems around the globe.

Funding issues

AIDS 2008 also put to rest criticism that too much money was being channelled into HIV/AIDS and that national health systems were suffering as a result. In fact, the reverse was true, according to experts at a special session held to discuss the complementary nature of improving health systems in developing countries and broadening access to HIV prevention and treatment.

“We know that building clinics and laboratories, training healthcare workers and working with ministries of health to deliver HIV programs means stronger health systems for everyone,” said Dr. Cahn. Efforts were ongoing, he pointed out, to integrate tuberculosis, sexual and reproductive health, primary care and perinatal health into HIV services, thereby benefiting everyone in need. “The truth is that in many places for millions of people, for the first time there is a nurse and a doctor and a lab for a patient living with HIV, and he or she will have someone to care for

them,” Dr. Cahn said, adding, “It is a time for collaboration, not competition.”

Final comments

AIDS 2008 closed with a call on UN Member States to follow up on their commitment to achieve universal access to HIV prevention, care and treatment by 2010, and in doing so to actively include the most at risk populations – as identified at the conference – in the HIV/AIDS response.

The XVIII International AIDS Conference will take place in Vienna, Austria, July 18–23, 2010. ●