



**AIDS 2006**

*Time to Deliver • Passons aux actes*

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**FOR IMMEDIATE RELEASE**

## **EFFECTIVE RESPONSE TO EXISTING AND EMERGING HIV EPIDEMICS REQUIRES COMMITMENT TO RIGHTS- AND EVIDENCE-BASED PROGRAMMES**

### **Greater Involvement of Affected Communities Key to Addressing Current Challenges in the Global Response**

**Toronto [14 August 2006]** Researchers, activists and political and civil society leaders opened the first full day of the XVI International AIDS Conference (AIDS 2006) with a unified call for a greater global commitment to HIV services and programmes guided by the needs, rights and active involvement of affected communities.

"There are still far too many instances where punitive laws, stigma, gender inequities and lack of access to needed prevention and care services conspire to fuel the HIV pandemic," said conference Co-Chair Dr. Mark Wainberg, Chair of the Toronto Local Host Board and Director of the McGill University AIDS Centre. "Today we issue a clarion call to leaders the world over to stand with affected communities to find meaningful solutions to the challenges at hand."

"Universal access to HIV prevention, care and treatment will remain elusive until there is a global commitment to programmes and policies driven by the human rights of affected communities," said Dr. Helene Gayle, Conference Co-Chair and President of the International AIDS Society. "Underlying issues such as poverty, gender inequality and homophobia continue to thwart efforts to expand access. Combating these entrenched obstacles is fundamental to an effective response to AIDS."

#### **Identifiable Factors Driving Emerging and Sustained Epidemics**

In the conference's opening plenary session, Dr. Chris Beyrer (United States) of Johns Hopkins Bloomberg School of Public Health examined the risk contexts of emerging and sustained HIV epidemics. He cited data and examples underscoring the urgent need to extend rights- and evidence-based services to injecting drug users (IDUs), men who have sex with men (MSM) and girls and young women in order to improve their social contexts and reduce individual-level risks of HIV infection.

According to Beyrer, HIV epidemics among IDUs in Eurasia are driven by greater availability of opiate and heroin due to production increases in Afghanistan, the limited use of evidence-based prevention programmes, and environments marked by harassment, high incarceration rates, human rights violations and social stigma. Beyrer also noted mounting evidence of severe, concentrated epidemics among MSM in parts of Asia, Latin America, Eastern Europe, and Africa marked by criminalization, discrimination, stigma and limited prevention services. UNAIDS estimates that, globally, fewer than one in ten MSM is reached by appropriate prevention and care services. Finally, Beyrer pointed to the gender inequities and social mobility patterns contributing to sustained HIV spread in Southern Africa.

### **Viral Variability Central to HIV Transmission and Disease Progression**

Dr. Julie Overbaugh (United States) of the Fred Hutchinson Cancer Research Center in Seattle highlighted accumulating evidence regarding risk of re-infection, which may have implications for the direction of future vaccine efforts. Overbaugh discussed the results from several recent studies which found that persons with preexisting HIV-1 infection are at continued risk of re-infection by another partner. These studies suggest that the immune responses to HIV-1 that arise during chronic infection may not be adequate to protect against subsequent infections.

Overbaugh also offered insights into variables that impact HIV transmission. She described a variety of factors related to the virus and the human host that may impact risk of HIV acquisition, including the recent observations that the types HIV variants being transmitted tend to be those with fewer sugars on the envelope protein coat of the virus particle. One role of sugars is to shield the protein from the host immune responses. She suggested that a future challenge to the field will be to understand why such viruses are favored for transmission, and noted that this research direction could provide important clues as to the very early dynamics between the virus and host that result in HIV infection.

### **Call for National HIV Strategies Addressing Spectrum of Women's Issues**

Louise Binder (Canada), Vice-Chair of Ontario's Voices of Positive Women and Chair of the Canadian Treatment Action Council, emphasized that while HIV among women and girls is a grave situation, it is not insurmountable. Binder cited community-based programmes in Rwanda and Limpopo, South Africa, and the role of women in the progress of microbicide research as concrete examples of successful women-led projects addressing HIV prevention, access to treatments, gender-based violence, poverty relief and economic security.

Binder called on all nations to develop a comprehensive HIV strategy that encompasses women's health and development issues, includes a plan to end gender-based violence, and is integrated into reproductive health systems. Binder urged that women living with HIV/AIDS lead the development of these strategies and called upon community and political leaders to openly support their interconnection with development strategies that ensure women are educated, trained and given access to microfinance.

### **Human Rights and Social Responsibilities**

Anand Grover (India), Co-Founder of the Lawyers Collective HIV/AIDS Unit, delivered the Jonathan Mann Memorial Lecture, named in memory of scientist Jonathan Mann, credited with building the World Health Organization's AIDS programme from the ground up. Grover examined the crucial need for the autonomy of people living with HIV/AIDS in making HIV-related policies and called for strengthening gains made in this area over the past 25 years. Mr. Grover argued that opt-out routine HIV testing is problematic as a public health strategy.

Grover also raised concerns about some strategies to prevent parent-to-child transmissions, which he stated are shortsighted due to infringing upon the rights of women. With the continuing expansion of treatment options, Grover highlighted the right to treatment as one of the central components of rights-based HIV initiatives in the years ahead. Grover expressed specific concerns about the availability of inexpensive generic drugs in five to ten years with India's agreement to comply with the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) regarding product patents.

## **Monday Special Sessions Highlight Roles of Creative Leadership, Women and Media in Global Response**

***Priorities in Ending the Epidemic;*** 10:45-12:15, Session Room 1; Journalist Charlayne Hunter-Gault will moderate a high-level panel discussion featuring U.S. President William J. Clinton and Bill Gates, Co-Chair of the Bill & Melinda Gates Foundation.

***Women at the Frontline in the AIDS Response;*** 12:45-13:45, Session Room 1; Judy Woodruff (United States) will moderate a panel featuring [put in alpha order with Melinda Gates (United States), Sheila Crump-Johnson (United States), Musa Njoko (South Africa) and Nafis Sadik (Pakistan) , who will discuss the leadership role of women in promoting responses to HIV/AIDS that benefit women and girls and will examine ways of fostering the greater involvement of women leaders in advocacy and activities for universal access to HIV/AIDS services.

***Media and AIDS: Spreading Information Faster than Disease;*** 18:00–20:00, Session Room 5; Actor and activist Richard Gere (United States) will open a session on the critical role of media in raising awareness, changing attitudes, and fighting stigma. Moderated by MTV's Bill Roedy (United Kingdom), the panel will discuss mobilization of the media after the 2004 launch of the Global Media AIDS Initiative by UN Secretary-General Kofi Annan. Media executives from Africa, the Caribbean, India and Russia, joined by a leading AIDS advocate, will preview campaign materials and share key challenges and achievements in their expanded response to HIV/AIDS.

### **XVI International AIDS Conference**

The XVI International AIDS Conference, organized by the International AIDS Society (IAS) and the AIDS 2006 Toronto Local Host, is the biennial gathering of the global AIDS community. The conference will feature the presentation of more than 4,500 abstracts and an array of community and cultural activities. Over 24,000 participants from more than 170 countries are in attendance.

IAS, the world's leading independent association of HIV/AIDS professionals with 10,000-plus members from 153 countries, convenes the world's largest meetings on HIV/AIDS--the International AIDS Conference and the IAS Conference on HIV Pathogenesis, Treatment and Prevention. The Local Host has been responsible for preparing Toronto and Canada as host city and country, as well as for a number of programme activities. The conference co-organizers are UNAIDS, Global Network of People Living with HIV/AIDS, International Council of AIDS Service Organizations, International Community of Women Living with HIV/AIDS and the Canadian AIDS Society.

### **Additional Resources**

For additional information, including programme information, abstracts, rapporteur and scientific summaries, and links to webcasts, podcasts, transcripts and presentations from key conference sessions, please visit [www.aids2006.org](http://www.aids2006.org).

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