

The Node is a bilingual publication dedicated to global HIV/AIDS issues by Red Ribbon Centre, the UNAIDS Collaborating Centre for Technical Support

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ACTION AGAINST AIDS MUST ADDRESS EPIDEMIC'S INCREASING IMPACT ON WOMEN, SAYS UN REPORT

BANGKOK, 14 July 2004 – Action against HIV/AIDS that does not confront gender inequality is doomed to failure, according to a report released today by the Joint United Nations Programme on HIV/AIDS (UNAIDS), the United Nations Development Fund for Women (UNIFEM) and UNFPA, the United Nations Population Fund.

Noting that women are now nearly half of all people infected with HIV, the report documents the devastating and often invisible impact of AIDS on women and girls and highlights the ways discrimination, poverty and gender-based violence help fuel the epidemic.

The report, Women and HIV/AIDS: Confronting the Crisis, reveals that 48% of all adults living with HIV are women, up from 35% in 1985. Today, 37.8 million people are infected worldwide: 17 million of them are female. The situation is even more alarming in sub-Saharan Africa, where women make up 57% of those living with HIV, the virus that causes AIDS. Young African women aged 15-24 are three times more likely to be infected than their male counterparts.

Without AIDS strategies that specifically focus on women, there can be no global progress in fighting the disease. Women know less than men about how to prevent infection and what they do know is often rendered useless by the discrimination and violence they face, according to the report.

"Promoting concrete actions that address the reality of women's lives and help decrease their vulnerability to HIV is the only way forward," said Dr Kathleen Cravero, Deputy Executive Director of UNAIDS. "We must reduce violence against women, ensure greater access to HIV prevention and treatment services and protect their property rights."

Confronting the Crisis focuses on key areas identified by the Global Coalition on Women and AIDS – an international pressure group – as critical to an effective AIDS response. The Coalition is a broad-based initiative launched in 2004 to stimulate concrete action to improve the daily lives of women and girls infected and affected by HIV and AIDS.

These critical areas include HIV prevention, treatment, care-giving, education, gender-based violence and women's rights. Women have the right to education and information needed to protect themselves, and to female-controlled protection methods. They have the right to economic independence and access to land, property and employment. They have the right to be free from harmful traditional practices and violence. They have the right to exercise control over their own bodies and lives.

"The ABC approach - Abstain, Be faithful, use Condoms is not a sufficient means of prevention for women and adolescent girls," said UNFPA Executive Director, Thoraya Obaid. "Abstinence is meaningless to women who are coerced into sex. Faithfulness offers little protection to wives whose husbands have several partners or were infected before marriage. And condoms require the cooperation of men. The social and economic empowerment of women is key. The epidemic won't be reversed unless governments provide the resources needed to ensure women's right to sexual and reproductive health."

Despite the odds stacked against them, many women have become leaders in the battle against HIV/AIDS. Confronting the Crisis offers a number of stories of women from across the globe who have undertaken innovative action to face the epidemic. These women are battling to change AIDS policies and strategies, and calling for funding to be directed to meeting women's needs and circumstances.

"Gender inequality has turned a devastating disease – AIDS – into an economic and social crisis," said Noeleen Heyzer, Executive Director of UNIFEM. "The crisis requires the infusion of serious resources into programmes and policies that promote gender equality and women's empowerment. These must be grounded in the knowledge and experiences of women living and working in communities affected by HIV/AIDS. Women are not just victims, they are agents of change. Infected and affected women's voices must be heard and their leadership invested in. To end this triple threat of HIV/AIDS, gender inequality and poverty, women must have the right to economic independence and access to land, property and employment, and a life free of stigma, violence and discrimination."

Note to editors:

Some of the women whose stories are featured in Confronting the Crisis include:

Kousalya Periaswamy, living in India, was widowed and left

HIV positive at 19 by a husband who only told her he was infected a few weeks after their marriage. She braved social disapproval and began speaking out to encourage positive women like herself to come forward. The group she helped to start, the Positive Women's Network of South India, now has thousands of members, providing counselling, social services - and hope - for many women and girls.

[Ms Periaswamy is attending the IAS conference and may be available for interview]

In Sierra Leone, armed militiamen abducted Khadija Bah, 19, and made her their sexual slave after murdering her parents and husband. She escaped, made her way to the capital, Freetown, and like thousands of others with no means of support, she turned to sex work to survive. At a centre run by the Women in Crisis project, started by iAuntie Julianaî Konteh, Khadija found a safe place where she could talk about her trauma, learn to protect herself against HIV, and learn skills that would allow her to give up sex work.

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LIONS RED RIBBON FELLOWS 2004



The two Lions Red Ribbon Fellows from Yunnan. They are Miss He Huilin (fourth person from left) and Dr. Yang Xinping (fifth person from left).

The first group of Lions Red Ribbon Fellows of this year has finished their two-week attachment in Hong Kong in late August, with the sponsorship from the Lions Club International District 303 (Hong Kong and Macau). They were Dr. Yang Xinping and Miss He Huilin from Yunnan.

Dr. Yang is a clinician from Kunming Infectious Disease Hospital, the only HIV treatment centre in Kunming. He has been working on HIV and AIDS since 2000. Yunnan is one of the provinces hardest hit by HIV. Over 80% of infections were transmitted through injecting drug use. However, the training and facilities in the diagnosis and treatment of opportunistic infection, such as Pneumocystis carinii pneumonia, CMV infections, were insufficient. Only a few trained doctors were taking care of nearly 50,000 HIV-infected patients in Kunming. They also have limited experience in treating HIV infected children. They have provided highly active anti-retroviral therapy (HAART) for HIV-infected patients but the effectiveness of treatment was affected by the price of drug, side effects and adherence. The objective of this attachment was to exchange and compare the experiences of HIV management in Hong Kong and Kunming.

Miss He is the manager of "HomeAIDS", a non-governmental organisation in Yunnan. "HomeAIDS" is a collaborative programme between The Salvation Army Hong Kong & Macau and Yunnan Red Cross Society, funded by AusAID and The Salvation Army Australia. It launched in 2002 and served as an education and facilitation centre. It recently also launched a patient self-help group in the hospital where Dr. Yang is working and provided support to HIV-infected patients. Miss He would like to take reference from local

experience in health promotion and self-help group.

During their stay in Hong Kong, doctors and nurses of the Integrated Treatment Centre and Princess Margaret Hospital shared their experiences on HIV management, HAART and adherence programme. They discussed with Dr. Susan Chiu of HKU about the management of HIV infection in children. Dr. Yang was impressed by the caring attitude of medical and nursing personnel in Hong Kong. They also learnt from local experiences in health promotion through discussions with various local nongovernmental organisations including AIDS Concern, Hong Kong AIDS Foundation, The Society for AIDS Care, Action for REACH OUT and C.H.O.I.C.E. Medical social worker from the Special Preventive Programme and representatives from Alliance for Patients' Mutual Help Organizations and Community Rehabilitation Network shared local experiences in organising patient self-help group with them.

Dr. Yang and Miss He conducted a seminar in Red Ribbon Centre to share the situation in Kunming and their experience in HIV prevention and care on 24th August 2004. Over 20 local workers attended and they were interested in the effort on HIV control in Kunming.



Dr. Yang Xinping from Kunming Infectious Disease Hospital inYunnan shared his experiences during the seminer held in Red Ribbon Centre.

Dr Michael Chan

REPORT OF THE XV INTERNATIONAL AIDS CONFERENCE IN BANGKOK 2004

Anyone who works in HIV and AIDS prevention must attend the International AIDS Conference (IAC) once in their career! Although many regard the conference simply as a carnival event that lack technical "substance" of HIV and AIDS science, epidemiology, treatment and care; it's certainly one of the most unforgettable memories that one may experience in their entire life.

This year, the biannual meeting was held in Bangkok, Thailand; a place well known of its exotic foods, nightlife and heavy congested traffic. With the latter in mind, traveling to Impact Center, the premise where the conference was held, would be a nightmare especially during the office hours. The Impact Center is an elegant, gigantic structure and its sheer size may have reflected the ambitions of the Thail to host international events. If you think that the conference programmes were confusing,



Six persons who work in HIV and AIDS prevention attended the International AIDS Conference (IAC)which was held in Bangkok, Thailand in July 2004

finding your way through the Impact Center would be a challenge to you.

IAC welcomed its participants by a grand opening ceremony with local Thail musicals and performances. Foods and drinks were served but unfortunately not up to the Thail standard. The movie show at Lido Theatre; downtown officiated by Richard Gere was also a great attraction for all of us. For those hardworking fellows, they might choose to attend the workshops of IAC during the evening hours. Everyone would find some activities that they might be interested to participate.

Activities organized by the conference included plenary lectures, symposium, special lecture, leadership workshops and skills building workshops. These events started from 8. 30 to 17.30. The contents of these events covered the areas of basic science; clinical research, treatment and care, epidemiology and prevention, social and economic issues; policy and programme implementation of HIV/AIDS.

The main theme of this year's conference is "Access for All" which resonant the WHO commitment of " 3 by 5". To make sure 3 million AIDS sufferers access to antiretroviral therapy by year 2005 is something easy to theorize but difficult to realize. This is why one of the plenary speakers of the conference quite rightly said "When efforts are greater than the crisis; HIV/AIDS will retreat". Ideology and slogans are not enough but actions, commitment and dedications from all parties involved in HIV and AIDS work are crucial for the successful control of this pandemic. The next conference in Toronto will testify whether this year's conference theme and WHO commitment are achievable.

BEIJING - HONG KONG PUBLIC HEALTH FORUM



Dr. P.Y. Lam, JP (Director of Health, Department of Health, the Government of the Hong Kong Special Administrative Region) gave a speech at the Beijing-Hong Kong Public Health Forum held in Beijing, China.

On 19 and 20 July 2004, a Public Health Forum was held to promote exchange and enhance communication between professionals and officials of Hong Kong and Beijing. Over 120 participants joined the forum, featuring presentations on, among other things, the prevention and control of HIV/AIDS.

Dr SS Lee of the Centre for Health Protection, Hong Kong, discussed the components of the public health programme targeting drug users in Hong Kong. He began with the organization of surveillance activities, including reporting, unlinked anonymous screening and voluntary testing of drug users. The role of methadone maintenance was highlighted, which is currently delivered through the network of some twenty methadone clinics in the territory.

Dr Lee explained that methadone clinics have become a "hub" for effecting HIV prevention in drug users. More recently, a Universal HIV Antibody (Urine) Testing Programme using urine samples was piloted, which was then rolled out

in January 2004 to cover a majority of methadone users. The clinics are also the centre for coordinating outreaching activities, condom distribution and behavioural monitoring.

Dr Guan Baoying of the Beijing Municipal Health Bureau went on to describe the HIV programme in the city. The City is in the process of realizing the pledges of Chinese leaders in enhancing the effectiveness of HIV prevention and care activities. Under the "Four free, one care" strategy, free VCT (voluntary Counselling & Testing), means of preventing mother to child transmission, treatment for poor, and support for orphans would be provided.

The Forum was the first of its kind for the two health authorities. Ten participants from Hong Kong had joined the event. They came from the Department of Health, Hospital Authority, and Auxiliary Medical Services. At the closing ceremony, it was agreed to maintain the network and to see that regular exchanges take place to uphold the health of people in the Hong Kong SAR and the capital city Beijing.



The Beijing- Hong Kong Public Health Forum on the prevention and control of HIV/AIDS was held in Beijing, China from 19 to 20 July 2004



The Office of the United Nations High Commissioner for Refugees (UNHCR) makes a unique contribution to the Joint UN Programme on HIV/AIDS.



The UNAIDS logo is renewed to include its latest co-sponsoring organization-Office of the United Nations High Commissioner for Refugees (UNHCR). The UNHCR has various ongoing HIV/AIDS programmes including voluntary counseling and testing and prevention of perinatal HIV infection, in place to reach refugees and their surrounding host communities.

The Joint United Nations Programme on HIV/AIDS (UNAIDS) is an innovative joint venture of the United Nations family. The Programme brings together the efforts and resources of ten UN system organizations to help the

world prevent new HIV infections, care for those already infected, and mitigate the impact of the epidemic. The ten UNAIDS cosponsoring organizations are: Office of the United Nations High Commissioner for Refugees (UNHCR), United Nations Children's Fund (UNICEF), World Food Programme (WFP), United Nations Development Programme (UNDP), United Nations Population Fund (UNFPA), United Nations Office on Drugs and Crime (UNODC), International Labour Organization (ILO), United Nations Educational, Scientific and Cultural Organization (UNESCO), World Health Organization (WHO), and World Bank.