Reassessing AIDS Measures

What is the issue?

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Observing December 1 as the World AIDS day, it should be taken note that after 2011, the decline in new infections had not been very impressive.

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What are the global measures?

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- Specific themes are chosen every year to drive home the messages of prevention, treatment and fighting stigma and discrimination associated with AIDS.
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- This year's theme is ‘know your status’ which signifies universal testing followed by treatment of those who are tested positive.
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- In the last 30 years, no other disease control programme has attracted such global attention as AIDS.
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- Other initiatives and measures include
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i. a UN General Assembly Special Session (UNGASS) on AIDS in 2000
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ii. a UN Security Council resolution treating AIDS as a security issue
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iii. a special Global Fund to finance AIDS programme along with TB and Malaria (about $20 billion for AIDS programmes alone)
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- But the real game changer was the strong involvement of civil society.
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- This especially included marginalised communities like sex workers, transgender population, gay men, people who use drugs and people living with HIV/AIDS.
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How did these benefit?

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- The cumulative effect was a greatly reduced mortality due to AIDS related illnesses.
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- From a high of 1.5 million in 2000, it was reduced to 9,40,000 in 2017.
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- The incidence of HIV, the new infections occurring every year, has also registered an impressive decrease.
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- It has come down from 0.49 per thousand adults in 2000 to 0.33 in 2010.
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- But instead of going forward and ensuring the reduction of new infections, the global programme lost direction around that time.
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What happened thereafter?

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- Both prevention of new infections and saving lives of infected people should be twin priorities.
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- But the emphasis has decisively shifted to treatment alone.
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- An entire spectrum of anti-retroviral drugs came into the market.
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- Also, donors started investing in treatment programmes focussed on generalised epidemic countries in sub-Saharan Africa.
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- UNAIDS has kept 90-90-90 as their top priority focussing on testing, treatment and viral suppression.
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- [By 2020, diagnose 90% of all HIV-positive persons, provide antiretroviral therapy (ART) for 90% of those diagnosed, and achieve viral suppression for

90% of those treated]
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- But somewhere in this process, the agenda of reduction of new infections among key populations lost the needed attention.
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- More worryingly, the legal environment surrounding these populations has turned increasingly hostile.
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- E.g. Same sex relations, transgender identity and sex work have all come under increasing pressure of criminalisation.
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- But Global Commission on HIV and Law had emphasized that improving the legal environment alone could save up to 1 million new infections every year.
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- Moreover, access to affordable prevention devices like condoms, needles and syringes greatly suffered in the last six to seven years.
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- Funds for prevention programmes have dried up and the meagre amounts earmarked never reached the implementers.
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- Several civil society organisations that were doing well lost momentum for want of adequate financial support.
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- Resultantly, prevention interventions were left in the hands of inexperienced programme managers.
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What was the result?

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- The rate of decrease of new infections started slowing down since 2011.
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- It has virtually stayed still in the last three to four years.
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- The cumulative decrease of new infections from 2010 to 2017 was just 18%, a little more than 2% per year.
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- Global HIV incidence still stands at high 1.8 million as revealed by UNAIDS in its latest estimate.
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- Certainly, it is hard to get to the global fast track targets of reduction of new infections by 85% by 2020.

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- Also, logically, the goal of ending AIDS by 2030 appears much farther away.
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What does it call for?

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- The need of the hour is hard core programming for prevention, principally focussing on populations vulnerable to HIV.
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- Prevention messages on responsible sexual behaviour and harm reduction should be taken to the masses.
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- Global managers need to advocate equitable allocation of resources for preventing new infections and treatment of the affected.
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Source: BusinessLine

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