



HIV/AIDS Treatment, Microbicide and Vaccine Advocates Release Plan of Action and Joint Statement of Commitment

Human right to health requires comprehensive global response to HIV/AIDS, say activists

BANGKOK, 14 July 2004 – AIDS activists from around the world, representing different movements, today called for concerted action aimed at ramping up HIV/AIDS health care services in low and middle-income countries.

The endorsement of the joint *Statement of Commitment* by numerous treatment, microbicides and vaccine organizations marks the launch of a global effort to coordinate among these three movements. The *Statement of Commitment* and 12-point *Plan of Action* targets improvements in health care services, including access to current and future HIV/AIDS treatments and prevention products, at the local and community level, as well as boosting public and private research into both treatment and prevention products. They urged activists fighting for HIV/AIDS treatments, microbicides and vaccines to reflect the synergy between prevention and treatment by combining advocacy efforts on areas of common interest.

“This is an historic moment. Today, advocates from three different streams of AIDS activism are declaring a shared commitment to building the comprehensive global response necessary to realize the human right to highest attainable standard of health for all people living with or affected by HIV/AIDS,” said Richard Elliott, Director of Legal Research and Policy at the **Canadian HIV/AIDS Legal Network**. “Activist movements for HIV/AIDS treatments, microbicides and vaccines have all burgeoned in recent years. But we must not fall into the trap of advocating for prevention at the expense of treatment, or treatment at the expense of prevention. We need a comprehensive response.”

The *Plan of Action* released today is a tool to help governments, industry, and civil society organizations meet the moral and human rights imperative to accelerate research, development and access in each of these areas.

“Rapidly expanding the development and accessibility of new HIV prevention technologies is critical to reducing infections in the coming years,” said Saul Walker, Policy Advisor with the **International AIDS Vaccine Initiative**. “Even a partially effective vaccine could reduce infections by as much as 60 percent. This would have a dramatic impact on a disease expected to take 70 million lives by 2020. Treatment strategies will not succeed if prevention efforts are failing, as there will always be more people requiring treatment. But prevention strategies are less likely to succeed if treatments are not accessible.”

Jonathan Berger, head of the Law and Treatment Access Unit of the **AIDS Law Project, South Africa**, echoed that treatment access supports HIV prevention efforts. “Where treatments are accessible, the nexus between AIDS and death is broken,” he said. “When people with HIV/AIDS are able to live longer and healthier lives, hope is restored and stigma is reduced. As a result, people are more willing to come forward for testing and are more likely to access prevention services. Treatment

access provides a supportive context for peer-based prevention work with and by people living with HIV/AIDS.”

But he stressed that treatment access is not sufficient in and of itself. “Governments must also ensure an environment conducive to widespread access to voluntary HIV testing. Effective HIV prevention work cannot be promoted and sustained in the absence of a legal framework that respects, protects, promotes and fulfils people's fundamental rights to dignity, equality and autonomy.”

Activists must also advance for access to prevention options that individuals can use without relying on their sexual partner. Microbicides – topical gels that could reduce HIV transmission when applied vaginally – would give women who are unable to control their partners' use of condoms or other safer sex practices the ability to protect themselves against HIV. Microbicides could also help protect men who have sex with men.

“Even a partially effective microbicide could prevent millions of infections, so efforts to test microbicides in clinical trials must be intensified,” said Megan Gottemoeller, Global South Programs Coordinator at the **Global Campaign for Microbicides**. “We need to expand treatment delivery and prevention research comprehensively, by expanding community-level health services, strengthening human resources and expanding community mobilization efforts that support both goals.”

The **Joint UN Programme on HIV/AIDS (UNAIDS)** welcomed the call from activists. “UNAIDS attaches great importance to the work of civil society. Community advocacy and this kind of collaboration across sectors, is critical to mobilizing the political will and resources and to boost efforts to develop and eventually deliver prevention technologies and necessary treatment” said Dr. Purnima Mane, Director of Social Mobilization and Information. She emphasized that “UNAIDS will also advocate that, as the global community scales up treatment, we should ensure that women have equal access. Women’s right to health and their lives are particularly at stake in this epidemic. Access to microbicides is a central aspect of this year’s World AIDS Campaign, which focuses on women, girls and HIV/AIDS. And ultimately, an effective preventive vaccine is critical to safeguarding all.”

The release of the *Statement of Commitment and Plan of Action*, as well as a 24-page *Issues Paper* and in-depth *Background Paper*, is the culmination of a year-long project aimed at promoting Joint Advocacy on HIV/AIDS Treatments, Microbicides and Vaccines. The project brought together representatives from government, civil society organizations, and international agencies to work together in developing a joint agenda, and was led by the Canadian HIV/AIDS Legal Network. Funding for this project was provided by the International AIDS Vaccine Initiative (IAVI), UNAIDS, the WHO-UNAIDS HIV Vaccine Initiative, the Canadian International Development Agency (CIDA), Health Canada, and the International Partnership for Microbicides (IPM).

The *Statement of Commitment* and *Plan of Action* are online in English, French and Spanish at www.aidslaw.ca.

Canadian HIV/AIDS Legal Network (www.aidslaw.ca)

The Legal Network was founded in 1992 to promote the human rights of people living with and vulnerable to HIV/AIDS, in Canada and internationally, through research, legal and policy analysis, education, advocacy, and community mobilization. The Legal Network is one of Canada's leading advocates for action on HIV vaccines and global access to treatment.

International AIDS Vaccine Initiative (www.iavi.org)

IAVI is a global not-for-profit organization working to accelerate the development of a preventive AIDS vaccine. Founded in 1996 and operational in 23 countries, IAVI and its network of collaborators research and develop vaccine candidates. IAVI also works to assure that a vaccine will be accessible to everyone who needs it. IAVI's major financial supporters include the Bill & Melinda Gates Foundation; the Rockefeller, Sloan and Starr foundations; the World Bank; BD (Becton, Dickinson & Co.); the European Union; and the governments of Canada, Denmark, Ireland, the Netherlands, Norway, Sweden, the United Kingdom and the United States.

Global Campaign for Microbicides (www.global-campaign.org)

The Campaign works to accelerate product development, facilitate widespread access and use, and protect the needs and interests of users, especially women, through advocacy, policy analysis, and social science research.

AIDS Law Project, South Africa (www.alp.org.za)

The ALP provides free legal research, education, advice and litigation services to advance the rights of people living with HIV/AIDS. Founded in 1993 at the Centre for Applied Legal Studies (University of the Witwatersrand), the ALP is a UNAIDS Collaborating Centre and one of the world's leading treatment advocates.

Joint UN Programme on HIV/AIDS (www.unaids.org)

The Joint United Nations Programme on HIV/AIDS (UNAIDS) is an innovative joint venture in the United Nations family which strives to maximise the United Nations' efficiency and impact in the field of HIV/AIDS by pooling the experience, efforts and resources of ten organizations.

Speaker Biographies

Richard Elliott has been the Director of Policy & Research for the Canadian HIV/AIDS Legal Network since January 1999. He is a co-founder of the Global Treatment Access Group (GTAG) and played a key role in the campaign for Bill C-9, Canada's law to enable the export of lower-cost generic medicines to developing countries. He has been a member of the Ministerial Council on HIV/AIDS since 2001 and chairs its International Issues Committee. Prior to joining the staff at the Network, he served on its Board, while a lawyer in private practice in Toronto. He has coordinated student legal aid clinic services to low-income people with HIV/AIDS, served on the Boards of the HIV & AIDS Legal Clinic Ontario and the Prisoners with HIV/AIDS Support Action Network, and been involved with other human rights organizations.

Purnima Mane, the Director of Social Mobilization and Information for UNAIDS, is an internationally renowned social scientist whose areas of expertise include gender issues in international health, especially in AIDS. Purnima was Associate Professor at the Tata Institute of Social Studies, where she worked for over 12 years. She moved to the Global Programme on AIDS, WHO in Geneva in 1994 and later to UNAIDS where she pioneered work on gender and AIDS, managed the Executive Office and coordinated the budget and work plan process until 1999.

Purnima then became Vice President and Director of the International Programs Division at the Population Council in New York. In 2003, she joined the Global Fund to fight AIDS, Tuberculosis and Malaria as the Chief Fund Portfolio Director and Director, Asia. Purnima has co-authored and edited four books including one of the first books on social and cultural aspects of AIDS in India and is a founder-editor of the journal Culture, Health and Sexuality. An Indian national, Purnima received her PhD in women's studies from the Tata Institute of Social Sciences, Mumbai, India.

Jonathan Berger is the head of and a researcher in the Law & Treatment Access Unit (LTAU) of the AIDS Law Project, University of the Witwatersrand, South Africa. The LTAU aims to use law and legal action to increase access to essential medicines for preventing and treating HIV infection and AIDS-related illnesses, as well as to challenge all barriers that limit access to treatment. It works largely in consultation with and on behalf of South Africa's Treatment Action Campaign (TAC).

Before completing his LLM thesis on international trade law, patents and access to treatment for HIV/AIDS at the University of Toronto, Canada, Jonathan worked as a law clerk for Justice Kate O'Regan of the Constitutional Court of South Africa. A former legal education and advice officer at the South African National Coalition for Gay and Lesbian Equality (NCGLE), Jonathan is currently the chairperson of the board of the Lesbian and Gay Equality Project (successor to the NCGLE).

Saul Walker, a Policy Advisor at the International AIDS Vaccine Initiative (IAVI) has worked for the past four years at the National AIDS Trust (NAT), the UK's leading HIV policy organization and IAVI's first partner organization. At NAT, his work involved both domestic and international policy issues. During the past 18 months, Saul led NAT's vaccine advocacy programme. He was particularly active in IAVI's efforts to build global support for AIDS vaccine R&D and access in the UNGASS Declaration of Commitment. Saul has been a member of the Board of Trustees of the Terrence Higgins Trust, Europe's largest AIDS Service Organisation, and is currently a Trustee of NAM Publications, one of Europe's leading providers of community-based HIV information. Saul graduated from the University of Cambridge and holds an MA in Philosophy and Social Theory from the University of Warwick.

Megan Gottemoeller, MPH, is the International Programs Coordinator for the Global Campaign for Microbicides, an international coalition working to accelerate access to microbicides through mobilization of civil society. From 1992-1995, she worked in Central America documenting and analyzing the social impact of globalization, particularly on women and reproductive health. After receiving a Master of Public Health degree at Tulane University School of Public Health and Tropical Medicine in 1997, she designed and facilitated health education events and exchange programs in Latin America and with the Latino community in Louisiana. For the last six years, she has turned her attention to issues of global HIV/AIDS, STD prevention, and gender equity. With the Global Campaign, Ms. Gottemoeller conducts training and outreach and supports growing advocacy networks in Africa and India. She also leads the Global Campaign's initiative on community involvement in clinical trials.