

INTERNATIONAL CONGRESS ON AIDS IN ASIA AND THE PACIFIC

**KOBE, JAPAN
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The latest report by UNAIDS on HIV/AIDS in Asia and the Pacific was published to coincide with the 7th International Congress on AIDS in Asia and the Pacific (ICAAP) held in Kobe, Japan.

The Joint United Nations Programme on HIV/AIDS portrays the region as “at the crossroads”, faced by a choice between two diverging routes. One, to continue current HIV programmes and interventions: likely to result in a sharp increase in the number of new HIV infections. The other, to invest more, both financially and politically, in tackling HIV, which will “stop the epidemic in its tracks” – minimizing both its human and its economic costs”¹.

Jesuit Social Services Policy Director, Father Peter Norden, S.J., attended the Congress as part of the Jesuit East Asian Assistancy initiative to investigate the possibility of establishing a Jesuit network in the region, similar to that operated by the African Jesuit Aids Network, based in Nairobi, Kenya.

The UNAIDS report shows that around 8.2 million people are living with HIV in the region. The epidemic is concentrated largely in “vulnerable” populations: sex workers and their clients, injecting drug users, young people and mobile populations.

Without a larger response, it is a matter of time until HIV moves into the broader population if national and local responses are not intensified, the social “bridges” for that to happen are already in place.

Although 99% of Asian people may be HIV negative, the actual number of people living with HIV in our region is massive. Nearly as many people are infected with HIV in India, for example, as are in South Africa (around 5 million), but the Indian HIV prevalence is only 0.9%, compared with 21.5% in South Africa.

Global Summary of the HIV/AIDS Epidemic December 2004²

Number of people living with HIV/AIDS in 2004	Total	39.4 million
	Adults	37.2 million
	Women	17.6 million
	Children under 15	2.2 million
People newly infected with HIV in 2004	Total	4.9 million
	Adults	4.3 million
	Children under 15	640,000
	Total	3.1 million
AIDS deaths in 2004	Adults	2.6 million
	Children under 15	510,000

HIV/AIDS in Japan: what's the situation?

As the international congress met in Japan, it is timely to ask: how is the host country responding to HIV/AIDS?

According to the latest reports, Japan recorded its highest number of new HIV infections in 2004, up by 21% from the previous year.

Until the mid-1990s, Japan's HIV epidemic was characterized by infection from contaminated blood products. Today, however, more than 80% of new infections are transmitted through sexual intercourse, three quarters of these among men who have sex with men.

In Japan, the public and the media seem to have lost interest in HIV/AIDS. Misconceptions about modes of transmission and judgmental attitudes towards sexual behaviour remain a barrier to effective prevention.

In addition, a lack of cooperation among Japan's ministries and other sectors hinders the development of effective national policies.

The question is whether Japan will take a lead or remain silent, leaving a great number of its public ignorant of the urgency to control the further spread of the virus?

What's Happening in Papua New Guinea?

While virtually all national HIV epidemics in Asia and the Pacific are concentrated in discrete high-risk populations, Papua New Guinea is an exception.

There, the situation exhibits characteristics of a generalized epidemic. An estimated 1.7% of adults were living with HIV in 2004 according to a recent national report, and men and women are equally likely to be infected. More than 50% of adult men report multiple sex partners. The virus is spreading most rapidly in rural areas. The pattern more closely resembles that of the early years of many countries in sub-Saharan Africa.

The challenges of mounting an effective response to AIDS in Papua New Guinea are daunting – the country has a large number of ethnic groups, multiple languages, and a poorly developed communications infrastructure. Yet the complexity of these challenges must not deter national and regional leaders from implementing the prevention approaches proved to slow the rate of new HIV infections.

What about the most at risk populations in the Asian Pacific region?

Despite progress in some countries, Asia and the Pacific have yet to mount a response that is capable of reversing the epidemic. Coverage is one of the critical issues in prevention efforts. Previous experience indicates that with ensuring 60% of safe behaviour among key populations – sex workers and their clients, injecting drug users and men who have sex with men – the epidemic could be reversed among those groups.

But most countries in the region lack large-scale prevention programmes designed for the most vulnerable populations.

Sex workers in South and South East Asia covered by HIV prevention programmes:	19 per cent
Sex workers in the Western Pacific covered:	11 per cent
Men who have sex with men covered:	less than 2 per cent
Injecting drug users receiving services in South and South East Asia:	5.4 per cent
Injecting drug users in Western Pacific:	2.9 per cent
Condom use in at risk sexual activity in South and South East Asia:	8 per cent
Pregnant women offered an HIV test in South and South East Asia:	8 per cent

The availability of antiretroviral drugs is also very low in parts of the region. Thailand has the highest percentage of people with HIV receiving treatment, at 44% of those who need it. Whereas, in the Philippines, it is estimated to be around 0.1% of those in need.

What Can Be Done?

- Governments in Asia and the Pacific should move from commitment to action.
- National AIDS programmes should adopt a comprehensive approach to national responses that include a balance of HIV prevention, care and treatment, and programmes aimed to lessen the impact, based on local conditions.
- Countries should increase support to civil society organizations involved in seeking a national response
- The response to AIDS in Asia and the Pacific needs to become an international priority.

Peter Norden, S.J.
Jesuit Social Services (Australia)
7th July 2005

¹ UNAIDS. *A scaled-up response to AIDS in Asia and the Pacific*. Joint United Nations Programme on HIV/AIDS, Bangkok, Thailand; 2005.

² UNAIDS/WHO. *AIDS epidemic update December 2004*. Joint United Nations Programme on HIV/AIDS and World Health Organisation., Switzerland; 2004.