

PRESS RELEASE

UNAIDS calls for shared responsibility to meet AIDS investment gap in francophone countries

New report highlights progress and gaps in the AIDS response and calls for increased investment from countries and donors

KINSHASA, DRC, 12 Oct 2012—Member states of the International Organization of La Francophonie (IOF) have made progress towards the goals of the 2011 United Nations Political Declaration on AIDS, according to a new report from UNAIDS entitled “*Decision Point La Francophonie: No new HIV infections, no one denied treatment.*” Results vary widely and—among IOF countries in sub-Saharan Africa—progress is lagging in key areas such as preventing new HIV infections among children and scaling up HIV treatment.

“The end of the global AIDS epidemic now appears to be attainable,” notes President Abdou Diouf, Secretary-General of La Francophonie. He adds: “This report reveals that the fruits of success are not equally distributed within the French-speaking world—an illustration of the fundamental inequalities that exist both within La Francophonie and in the wider world.”

A total of US \$2.6 billion will be needed annually by 2015 to address the AIDS response in IOF countries of sub-Saharan Africa, according to the report, released on the eve of the 14th Summit of the La Francophonie in Kinshasa. Based on current investment trends, the estimated AIDS funding gap for these countries will be US\$ 1.5 billion. Filling this gap will require a significant boost in investment from both international donors and countries, the report finds.

“The international community must meet its commitments for francophone Africa, and high-income francophone countries must take the lead,” said Mr Sidibé. “At the same time, low- and middle-income francophone countries must also increase their share of investments based on economic strength and disease burden.”

Bridging the investment gap

According to the report, low- and middle-income IOF countries in sub-Saharan Africa have the capacity to scale up domestic AIDS resources by increasing health spending in line with economic growth and by reallocating HIV resources according to each country’s relative burden of disease.

Based on these assumptions, IOF countries in sub-Saharan Africa could boost annual domestic AIDS spending by at least US\$ 120 million by 2015—a 70% increase over current funding levels. The report calls on international partners to fill the remaining investment gap of approximately US\$ 1.4 billion—a 160% increase over current funding commitments.

HIV treatment

An estimated 826 000 people in low- and middle-income IOF countries were receiving HIV treatment in 2011, up from just 26 000 in 2003, according to the report. Increased access to HIV treatment in IOF countries resulted in a nearly 30% decline in AIDS-related deaths between 2004 and 2011.

Despite commendable progress, an estimated 970 000 people are still waiting to access life-saving HIV treatment in IOF countries—accounting for 14% of the global treatment gap. Moreover, there are wide disparities in treatment coverage: two IOF member states, Rwanda and Cambodia, have reached more than 80% coverage of antiretroviral therapy while some countries provide less than 5% coverage.

Taken as a whole, IOF countries in sub-Saharan Africa achieved 43% coverage of HIV treatment in 2011 compared to 59% coverage in non-IOF countries in the region. Among IOF countries in the region, just one in five pregnant women living with HIV has access to antiretroviral therapy for her own health and only 15% of children eligible for HIV treatment are receiving it.

Preventing new HIV infections among children

Programmes to prevent new HIV infections among children are gaining momentum across sub-Saharan Africa. Among IOF countries in the region, there was an estimated 34% decline in new HIV infections between 2005 and 2011—from 73 000 to 48 000.

Despite progress, an estimated 450 000 children are living with HIV in low- and middle-income IOF member states of sub-Saharan Africa; coverage of HIV medicines to prevent transmission of HIV from pregnant women to their children in these countries remains low, at 36%. This compares to 62% coverage among non-IOF countries in the region.

A roadmap to accelerate progress

Speaking at today's press conference, UNAIDS Executive Director Michel Sidibé urged francophone leaders across the globe to collectively push forward the AIDS response in IOF member states. "It is decision time for *La Francophonie*," said Michel Sidibé. "While our actions so far are laudable, they will not take us to the finish line. We must redouble our efforts for the AIDS response and act decisively," he added.

For the 29 francophone countries in Africa, the African Union's *Roadmap on Shared Responsibility and Global Solidarity* has defined the steps needed in financing, health governance and access to medicines to help countries build long-term, sustainable solutions to HIV. The *Roadmap*—launched under the leadership of President Boni Yayi of Benin—was endorsed in July 2012 by African Heads of State and Government.

In 2011, an estimated 3.1 million people were living with HIV in low- and middle income IOF countries in sub-Saharan Africa, accounting for 10% of the global total. HIV prevalence varies widely among member countries in sub-Saharan Africa—from less than 0.3% to 5% of the adult population.

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Contact

UNAIDS Geneva | Saira Stewart | tel. +41 22 791 2511 | stewarts@unaids.org

UNAIDS Kinshasa | Jeanne Seck | tel. +221 77 440 5053 | seckj@unaids.org

UNAIDS

The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners to maximize results for the AIDS response. Learn more at unaids.org and connect with us on Facebook and Twitter.