

PRESS RELEASE

World must drastically accelerate AIDS efforts or face more HIV infections and deaths than five years ago—says UNAIDS and *Lancet* Commission

New report 'Defeating AIDS—Advancing global health' shows that innovations in the AIDS response should be exploited to meet future global health challenges.

LONDON, 25 June 2015—Countries most affected by HIV must focus on stopping new HIV infections and expanding access to antiretroviral treatment or risk the epidemic rebounding, urges a major new report from the UNAIDS and *Lancet* Commission.

“We must face hard truths—if the current rate of new HIV infections continues, merely sustaining the major efforts we already have in place will not be enough to stop deaths from AIDS increasing within five years in many countries,” said Professor Peter Piot, Director of the London School of Hygiene & Tropical Medicine, Co-Chair of the Commission, and lead author of the report. “Expanding sustainable access to treatment is essential, but we will not treat ourselves out of the AIDS epidemic. We must also reinvigorate HIV prevention efforts, particularly among populations at highest risk, while removing legal and societal discrimination.”

While unprecedented progress has been made to increase access to HIV treatment globally, the report shows that the rate of new HIV infections is not falling fast enough. This, combined with high demographic growth in some of the most affected countries, is increasing the number of people living with HIV who will need antiretroviral therapy to stay alive.

“We have to act now. The next five years provide a fragile window of opportunity to fast-track the response and end the AIDS epidemic by 2030,” said Michel Sidibé, Executive Director of UNAIDS and Co-Convenor of the Commission. “If we don’t, the human and financial consequences will be catastrophic.”

While there is scope in many countries for greater shared responsibility by increasing funding for HIV, the report clearly shows the urgent need for substantial global solidarity to front-load investments. The need for investment is particularly acute in low-income countries with a high HIV burden.

Among the sobering findings from the report is that sustaining current HIV treatment and prevention efforts would require up to 2% of GDP, and at least a third of total government health expenditure, in the most affected African countries from 2014 to 2030 to fund HIV programmes. This clearly demonstrates that international support to the AIDS efforts in these countries will be needed for many years to come. However, there is also a pressing need to ensure that people are not left behind in middle-income countries, which can and must do more to sustain their HIV prevention and care programming in higher risk, often marginalised populations.

If the most is made of this five-year window of opportunity, HIV transmission and AIDS-related deaths could be greatly reduced and mother-to-child transmission virtually eliminated by 2030. This will not only require an increase in resources, but also a more strategic and efficient use of those resources.

HIV programmes have a maximum effect when used in combinations that are tailored to the needs and contexts of populations at higher risk and in geographical locations with high HIV prevalence, as is now the policy in countries such as Kenya. At the same time, synergies with mainstream health services are needed, and a long-term view to ensure sustainability of achievements, including high quality antiretroviral treatment.

Also recognising extraordinary innovation in the AIDS response, the Commission calls for leveraging lessons learned in the AIDS response to be applied to new and existing global health challenges.

“The movement created by the AIDS response is unprecedented—a system of checks and balances from a people-centred approach is one that more global health institutions should adopt. Identifying multi-sectoral stakeholders early will save time and money by ensuring the best solutions reach the right people,” said *Lancet* Editor-in-Chief and Co-Convenor of the Commission Dr Richard Horton.

The report is critical of countries that have become complacent, highlighting that some countries with previously stable or declining HIV epidemics have shown trends of increasing risky sexual behaviours among at-risk groups over the past five years, with new HIV infections on the rise. For example, recent studies have found clear evidence of resurgent HIV epidemics among men who have sex with men in Western Europe, North America, and Asia. In Uganda, national trends in new HIV infections have started to reverse and rise again after a decade of growing successes, in part because of a decreased focus on HIV prevention.

The report makes seven key recommendations, leading with the urgent need to scale up AIDS efforts, get serious about HIV prevention, and continue expanding access to treatment. Other recommendations include efficient mobilisation of more resources for HIV prevention, treatment, and research, and for robust, transparent governance and accountability for HIV and health. The AIDS response must continue to be grounded in human rights, and practical solutions are needed to expedite changes in laws, policies, and attitudes that violate the rights of vulnerable populations, and that stand in the way of an effective AIDS response.

The UNAIDS and *Lancet* Commission

The Commission, which was established in early 2013 by UNAIDS and *The Lancet*, brings together 38 Heads of State and political leaders, HIV and health experts, young people, activists, scientists, and private sector representatives to ensure that lessons learned in the AIDS response can be applied to transform how countries and partners approach health and development.

Co-Chairs

- H.E. Joyce Banda, Former President of the Republic of Malawi
- Dr Nkosazana Dlamini Zuma, Chair of the African Union Commission
- Professor Peter Piot, Director of the London School of Hygiene & Tropical Medicine

Report 'Defeating AIDS—Advancing global health':

www.thelancet.com/commissions/defeating-aids-advancing-global-health

Contact

UNAIDS Geneva | Charlotte Sector | tel. +41 79 500 8617 | sectorc@unaids.org

The Lancet | Daisy Barton | tel. +44 207 424 4949 | pressoffice@lancet.com

The London School of Hygiene & Tropical Medicine | Katie Steels | tel. +44 207 927 2802 | press@lshtm.ac.uk

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 towards ending the AIDS epidemic by 2030. Learn more at unaids.org and connect with us on Facebook and Twitter.

The Lancet

The Lancet's prestigious heritage as one of the world's leading medical journals continues to inspire its authors and editors today as they strive for medical excellence in all that they publish. *The Lancet* has an impact factor of 38.28. The journal is currently ranked second out of 153 journals in the general medicine category (2011 Journal Citation Reports®, Thomson Reuters 2012). The journal publishes medical news, original research, and reviews on all aspects of clinical medicine and international health; all journal content can be browsed in online Clinical and Global Health portals, and by specialty disciplines.

The London School of Hygiene & Tropical Medicine

The London School of Hygiene & Tropical Medicine is a world-leading centre for research and postgraduate education in public and global health, with 3900 students and more than 1000 staff working in over 100 countries. The School is one of the highest-rated research institutions in the UK, and among the world's leading schools in public and global health. Our mission is to improve health and health equity in the UK and worldwide; working in partnership to achieve excellence in public and global health research, education, and translation of knowledge into policy and practice. www.lshtm.ac.uk