

HIV/AIDS

Time to Deliver

BY AUGUSTUS NASMITH, JR.

"Do you close your eyes to the pain in the world?" Glenn Marais sang plaintively at the August 18 closing ceremony of the XVI International AIDS Conference in Toronto. The more than 26,000 conference participants do not. Seeing and experiencing the pain, they unite in uncommon global solidarity and purpose to confront the huge challenges of HIV/AIDS. Striving for human fulfillment, motivated by unconditional love and caring for others, characterizes those at the conference.

As does outrage at the continuing suffering and death from abuse, denial, ignorance, greed, stigma, discrimination, and voids in leadership and responsibility. Thus, the conference theme: "Time to Deliver," AIDS holds a stark mirror to horrific human failings. Why doesn't the pain provoke more outrage and action everywhere?

Twenty-five years after the identification of the Human Immunodeficiency Virus (HIV) that causes Acquired Immunodeficiency Syndrome (AIDS), the world pandemic continues, even though it is physically quite easy to block transmission of the virus. Culturally, it is not easy. Globally, more than 20 million deaths have occurred. Today, some 40 million worldwide are living with HIV/AIDS.

In the devastated societies in sub-Saharan Africa, political leaders still fail to lead, and their counterparts throughout the developing world are as criminally slow to wake up. In the Caribbean, the epidemic continues unchecked. HIV is also spreading throughout the former Soviet Union, China, the Indian sub-continent, south-east Asia, Pacific islands and in much of Latin America. Denial is so strong in northern Africa and the Middle East that there are not even accurate statistics, let alone programs.

Of the heartrending pain of AIDS, the impact upon children in the developing world cannot be ignored. More than 18 million under the age of 18 are orphans, with 12 million of these in sub-Saharan Africa. Many young adults have been child orphans themselves; brought up by grand-

parents or extended family caregivers, or living in the streets. Infected children may be the last to be considered for treatment, for when treatment is rare, children are often presumed fated to die anyway.

Stigma Stalls Efforts

Stigma and discrimination cripple all. Many avoid learning their health status and act sexually as if they and their partners could not be infected. The U.S. experienced the worst of stigma in the earlier days of the epidemic, but many of us don't realize the degree to which stigma and discrimination still exist in the workplace, in

the Iraq war has cost thus far. The President's Emergency Plan for AIDS Relief (PEPFAR), pledging \$15 billion over five years to bilateral efforts for 15 designated countries, has been significant. However, I agree with those who argue that greater dedication to the multilateral Global Fund to fight AIDS, tuberculosis and malaria would be more helpful.

Implementation of what is known could stop HIV in its tracks right now! Sadly, in addition to the ignorance, denial and abuse by men throughout the world, supposed leaders in the Vatican and the Bush administration thwart prevention programs

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health care settings, and in political and religious arenas. Perhaps most devastating to people with AIDS is when the ostracism is internalized, leading them to avoid health care.

Approximately one million live with HIV in the U.S., and 40,000 new HIV infections per year reflects our own inadequacies. Rates have increased in marginalized populations of African Americans, Hispanic Americans, and young gay men. Intravenous drug users and prisoners are neglected. We are a wealthy country, but without universal health care, many with HIV/AIDS struggle to obtain medicine and basic living costs. Sixth-tenths of one percent of our population is infected. Imagine how it is in poor countries where the infection rates may be ten times ours. Unless you have been in the stifling or freezing one-room homes without running water or electricity, witnessed those bedridden, or the children grateful to have one meal a day, it is hard to imagine.

Moralistic Measures Not Helpful

In president Bush's proposed 2007 fiscal budget, approximately \$20 billion is designated for domestic AIDS-related funding, and less than \$4 billion for international efforts. This is about 1% of what

of condom use and needle exchange. Moralistic "abstinence only" approaches are allies of the virus. In the Islamic world, those in power deny the realities of sex work and that men have sex with men. Such denial fuels the spread of HIV into all sectors of society, for HIV is blatant proof that the marginalized and often despised members of the human family are actually linked to us in interconnected circles of sexual contact.

As Melinda Gates put it, "If you are turning your back on sex workers, you're turning your back on the family, the mother of four."

But there are also "success" stories. Some years ago, the visionary Brazilian government guaranteed medical care, including necessary drugs, to all those infected with HIV. The predicted increase of infections was cut in half! If people know that their society cares, they are less crippled by fear and hopelessness, and thus, more likely to protect themselves and others.

The Cost of Treatment: Progress and Challenges

Just a few years ago, the cost of antiretroviral drug therapies (ARVs) was so prohibitive that in the developing world only a miniscule elite could afford them. Grassroots activism and solidar-



Gus Nasmith (Rutland), Christine Oyaro (Women Fighting AIDS in Kenya - WOFAK), David Hooks (Pittsfield) following Toronto candlelight vigil August 17, International AIDS Conference, Toronto. PHOTO BY AMIR HANUSIC

ity brought about by international AIDS conferences, and the UN General Assembly Special Session (UNGASS) on HIV/AIDS in 2001, have dramatically reduced prices

lives go beyond provision of ARVs, but the dam of the "impossible" has been broken.

Needed: Health Care, Food and Water

For effective prevention and care, we must reverse brain drain and build the critically needed corps of health care workers in the developing world. In addition to more clinics, the people need adequate food and clean water. Is this further reason not to see the pain? Not when UN estimates are that only 66 cents per person per day would provide what is necessary!

Those meeting the challenges of AIDS have shown, as conference Co-Chair Mark Wainberg of Canada put it, "... that partnerships that link science, medicine, community and political activism can translate into action." If we open our eyes to the pain in the world and refuse to be crippled by fear and hopelessness, we can enjoy a freed positive state of mind.

It is "time to deliver," not only to prevent the spread of, and care for those living with HIV/AIDS, but to achieve the good of which we are capable. Howard Zinn's credo is immune-enhancing: "... to live now as we think human beings should live, in defiance of all that is bad around us, is itself a marvelous victory." Our justified outrage and response become an invitation to human fulfillment for all.

When we care for others, we care for ourselves. ▼

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