

Agenda Item 179: Special Session of the General Assembly to review the problem of HIV/AIDS in all its aspects

Statement by Hon'ble Mrs. Shyama Singh, MP on November 2, 2000

Mr. President,

We hope that the Special Session of the General Assembly from 25 to 27 June next year to review and address the problem of HIV/AIDS in all its aspects, would result in concrete and action oriented outcome, building on the resolve expressed by our Heads of State and Government at the Millennium Summit, to have halted and begun to reverse, by 2015, the spread of HIV/AIDS, malaria and other serious diseases.

AIDS is a global problem with a strong African dimension. One in five adults in Africa face death in the next four years from AIDS. In an African country life expectancy will drop from a high of 61 years in 1990 to only 41 years next year. As the 20th century draws to a close, some 33.6 million men, women and children face a future dominated by a disease unknown just a few decades ago. Over the course of this year, 5.6 million people became infected with the HIV virus, which translates into approximately 16,000 new infections a day. An immediate and global fight is needed against the epidemic, because, quite apart from the enormity of the human suffering, it has a strong negative influence on the economic growth and development of the countries affected. A UN analysis indicates that by 2005 the GDP of many southern African countries would shrink by at least 14%; per capita income will drop by 10% and labour costs would rise due to morbidity and absenteeism, dimming the prospects of an African renaissance.

We in India are also grappling with the challenge of HIV/AIDS. While we have eradicated deadly diseases like small pox and guinea worm and are on the verge of eliminating leprosy, we are now confronted with a resurgence of malaria and tuberculosis, and the rising problem of HIV/AIDS, which some estimate as having infected around 3 to 4 million Indians.

Though we cannot prevent a common cold, precautions can prevent AIDS. AIDS is preventable through awareness. Awareness is the key to prevention. This must involve community leaders, NGOs and most importantly, the elected representatives of people at all levels. Our Prime Minister has requested Members of Parliament, Chief Ministers of States and others to take a personal interest in awareness-building campaigns, with the full participation of the elected representatives of local level bodies. The cinema can also be a powerful medium and its use is being actively explored. These initiatives need to be multiplied several times over.

The social stigma attached to sexually-transmitted infections is even more severe for HIV / AIDS. There have been reported cases where AIDS patients have been refused admission in hospitals and private nursing homes. The isolation of patients in wards creates the misunderstanding that it is a contagious disease, and causes panic among other patients. There have also been instances of discrimination in the work place, leading in some cases to loss of employment. These are problems faced worldwide by those who suffer from

HIV/AIDS. In India, the judiciary has issued judgements to ensure that HIV infected and AIDS patients are not discriminated against.

Treatment for HIV/AIDS is still prohibitively expensive. No effective vaccine has been developed. The multi-drug anti-retroviral therapy, popularly known as "cocktail therapy", if not administered by trained medical professionals, can have adverse effects. Understandably, when the average infected person does not have much access to or awareness of treatment options, patients turn to and are exploited by quacks. The only solution lies in making low-cost treatment options available. Generic drugs are available in, and from, India, at extremely reasonable cost, but the demand of rent from multinationals, in the guise of a flawed interpretation of the IPR regime, will not allow their use. Even the agreed provisions of compulsory licencing and parallel imports by developing countries are generally frowned upon, and cannot be implemented by the developing countries, except with the constant threat of retaliation by the developed countries in other sectors of trade. The Special Session must address this critical issue and ensure that the abjectly mercantilist use of intellectual property rights involving possible loss to health and damage to other socio-economic objectives which was never intended by the WTO negotiators, is not encouraged, and, in fact, reversed, so that treatment is available at reasonable prices.

Some proponents of a severely restrictive interpretation of the IPR regime have suggested alternatives, such as bank loans for purchase of HIV/AIDS drugs. As Kalumbi Shangula, the Permanent Secretary of Namibian Health and Social Services recently pointed out, "a fundamental problem for developing countries is that all drugs, not just anti-retrovirals, cost too much". It is this problem of the greed of major pharmaceutical companies, even in the face of public emergency, that needs to be addressed.

HIV does not kill by itself but by depleting the immune system and making the person vulnerable to other infections. Even a common infection of the respiratory tract could prove fatal. This opens a Pandora's box of co-infections with HIV/AIDS. With a high prevalence of tuberculosis (TB) in India, the problem of HIV-TB co-infection is overwhelming. Nearly 60% of HIV/AIDS cases are reported to be infected with TB bacilli. The treatment of TB among the HIV infected persons is a new challenge to the national effort in controlling this infection. Some of the drugs which are recommended for TB treatments pose complications in case of HIV-infected persons and had to be withdrawn in areas of high HIV prevalence. The issue of co-infection, especially with tuberculosis, should be high on the agenda of the Special Session.

Mr. President,

HIV/AIDS is a critical challenge but, unfortunately, there are others, notably those of tackling underdevelopment and eradicating poverty, and the problems of other infectious diseases such as malaria and tuberculosis. Efforts to combat HIV/AIDS should be additional to the efforts deployed to meet these challenges and not in their place. If not, we will succeed in neither tackling the HIV/AIDS epidemic nor the vast and silent emergency of poverty and lack of development that engulfs most developing countries and their peoples.