

Position paper on HIV prevention

AIDS remains an incurable disease with devastating effect on individuals, communities and nations. Although great progress has been achieved in accessibility of people living with AIDS to treatment and care, only 20% of those in need in developing countries today get antiretroviral therapy. The rate of new HIV infections continues to climb every year at an alarming pace, whereby women and young people are at particular risk. An estimated 4.2 million people became newly infected in 2005, exceeding by far the number of AIDS-related deaths in the same period.

aidsfocus.ch, the Swiss platform on HIV/AIDS and international cooperation, declares its adherence to the following position, and it supports appeals and campaigns that are in line with this position:

The prevention gap is a major threat to the comprehensive AIDS response, and it underlines that investing further in HIV/AIDS prevention is crucial. **Prevention, treatment and care are closely interlinked.** Successful HIV counselling, testing, treatment and care are a fertile ground for more effective and impacting prevention. On the other hand, strengthened prevention is needed to make HIV treatment more sustainable.

HIV **prevention is a demanding issue.** While there is consensus that the epidemic can only be curbed by strengthening current prevention efforts, opinions about which prevention strategies are to be given priority differ, according to the specific social, cultural, religious and economic setting. In general terms, **protecting and promoting human rights** (including the right to privacy, to information and the right of participation) and the dignity of PLWHA are an essential part of any comprehensive AIDS prevention strategy. Interventions should proactively **address culture**, be it by strengthening its promoting forces or by intelligently adapting detrimental norms, reluctance or behavioural aspects. Prevention efforts should also take into account a **gender sensitive approach**. For scaling-up HIV/AIDS prevention, broader involvement of people living with HIV/AIDS and of community-based social resources is recommended.

Multiple prevention approaches must be employed in combination in order to support individual behaviour change, influence the social norms regarding risk behaviours and address social, economic, legal and policy barriers to effective prevention. Prevention programmes that ensure that the whole spectrum of prevention options is available to those most at risk, including access to and use of condoms and sterile injecting equipment, have been shown to substantially reduce new HIV infection throughout the world.

In its policy position for intensifying HIV prevention, UNAIDS enumerates the **essential programmatic actions for prevention** as follows:

- Prevent the sexual transmission of HIV
- Prevent vertical HIV transmission from mother to child
- Prevent the transmission of HIV through injecting drug use, including harm reduction measures
- Ensure the safety of the blood supply
- Prevent HIV transmission in healthcare settings
- Promote greater access to voluntary HIV counselling and testing while promoting principles of confidentiality and consent
- Integrate HIV prevention into AIDS treatment services
- Focus on HIV prevention among young people
- Provide HIV-related information and education to enable individuals to protect themselves from infection
- Confront and mitigate HIV-related stigma and discrimination
- Prepare for access and use of vaccines and microbicides.

Prevention efforts should be an integrated priority of **addressing a population's health and developmental concerns**. Properly resourced and linked, HIV prevention can have a major impact on other national priority areas, such as reproductive health, gender inequality, the spread of sexually transmitted infections and tuberculosis, drug and alcohol use, mitigating the impact on children made orphans and vulnerable by AIDS, life-skills and education for the young generation.

aidsfocus.ch, Swiss platform on HIV/AIDS and international cooperation, November 2006

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