

Global AIDS crisis: Profits punish poor

The Millennium Development Goals summit recently brought together the leaders of 140 countries to review the progress made in the decade since the eight development goals were set. Two thirds of the way to the deadline, the United Nations secretary general said: "we still have much more to do", a gross understatement. Starting to reverse the spread of HIV and access to treatment for all those who need it is one goal. SARAH WRACK examines the state of the world AIDS crisis and shows that achieving this goal by 2015 in a capitalist world is very unlikely.

THE DEATH toll from AIDS (acquired immune deficiency syndrome) to date stands at over 25 million. More than two million people are still dying every year despite massive medical advances in treatment.

Today there are 33 million people living with the human immunodeficiency virus (HIV) or AIDS across the world. When we hear figures such as that for every two people who start treatment for HIV, another five are infected it is easy to think that the battle against the disease is already lost.

But on closer inspection, it's clear that the spread, the level of fatality and the effect on society of HIV/AIDS are far from inevitable.

The way the disease has been handled by governments and the media has often made things worse for people suffering from it.

Denial and discrimination

ONE SHOCKING recent example was when the former president of South Africa, Thabo Mbeki, denied the scientifically established link between HIV and AIDS. His subsequent refusal to allow antiretroviral drugs (ARVs) to be used in public hospitals is thought to have led to the unnecessary deaths of 365,000 people.

Some countries even have laws which openly target people with AIDS. 22 countries in the world can deport foreigners based purely on their HIV status. Until the start of 2010, anyone with HIV or AIDS could be refused entry into the US.

Such measures seep into discrimination and prejudice at other levels of society too. There is evidence that in the US, Haitians are denied jobs and houses because there is a high rate of infection in Haiti. 27% of Americans say they would prefer not to work closely with an HIV positive woman despite transmission only being possible through the

exchange of bodily fluids.

In the UK 83,000 people are currently living with the disease. Of those, it is predicted that 30% are unaware of their condition. Improved treatment and prevention in recent years means there are now fewer deaths from the disease but there are still over 7,000 new cases every year.

In fact AIDS is the fastest growing serious health problem in the country. This brings into question why so many HIV and sexual health advice services are losing their funding from central government.

In Brighton, the number of people being treated for HIV is increasing by 15% every year, yet the sexual health advice service at Sussex University was the first closure announced as part of the recent round of cuts.

There is prejudice in the UK too. Many still associate AIDS with gay men despite there being a wide range of ways to contract it.

1,000 children have the disease because it was passed from their mother, 1,800 have contracted it from intravenous drug use and 700 from infected blood transfusions (the risk of which would be increased if privatisation of the service is carried through). For the last few years, more of the new cases contracted sexually come from straight, not gay sex.

Sub-Saharan Africa

OF COURSE, it is not in the western world that HIV/AIDS has had the most devastating effect. Sub-Saharan Africa is home to 10% of the world's population but 67% of HIV positive people live there. Life expectancy in the region is just 47 years and some research suggests that it could be 15 years higher without the impact of AIDS.

The problems caused by the disease are far reaching. For example, 14 million children in Sub-Saharan Africa have been orphaned by AIDS.



Drugs companies keep the price of treatment high.

There is unquestionably a cyclical link between poverty and AIDS too.

This is particularly because it is most common in young men who tend to be the most economically productive group and also because the treatment costs are so high. Some reports indicate that the Gross National Product (GNP) of the African countries worst affected by AIDS will decrease by 40% in 40 years.

On top of this, there have been various instances of HIV being used in combination with rape as a weapon in war.

During the Rwandan genocide, thousands of women were raped within a few weeks. They reported being told things like: 'we are not killing you; we are giving you something worse!' Examples like this prove that solving the AIDS crisis cannot be separated from battling the social, political and economic crises in Africa.

Eastern Europe

IN CONTRAST to most places where the epidemic took off in the early 1980s, Eastern Europe was not badly affected by HIV/AIDS until the collapse of Stalinism.

The socio-economic crises that followed forced people to find new ways to make money and drug use and prostitution (two of the main risk factors) became more and more common.

In fact, while the battle to slow the spread of the disease has been successful in almost every other region, the number of infected people in the former Soviet Union has doubled since 2001.

The response from governments in the area has been poor. For example, in Russia there are only 69 needle exchanges to cover over two million intravenous drug users and the public funding for them is being cut rather than increased.

The investment into antiretroviral drugs has also been neglected. Only 23% of those who need this sort of treatment have access to it which puts Russia behind many of the worst affected African countries in terms of their efforts to battle the disease.

Drug rip-off

A LOW level of access to ARVs is a common problem. There is no cure for HIV but with 'combination therapy' people can live a normal life for years before getting AIDS.

The drugs are expensive and the

price kept high by multinational pharmaceutical companies who own the patents. Recent studies show that treatment also requires nutritional intake that is simply not possible on the poverty diets existing in many of the worst affected regions.

There have been times when companies have taken legal action against the governments of countries who try to produce the drugs cheaply without paying the patent holder.

This purely profit-motivated way of organising health care puts millions of lives in poorer countries at risk.

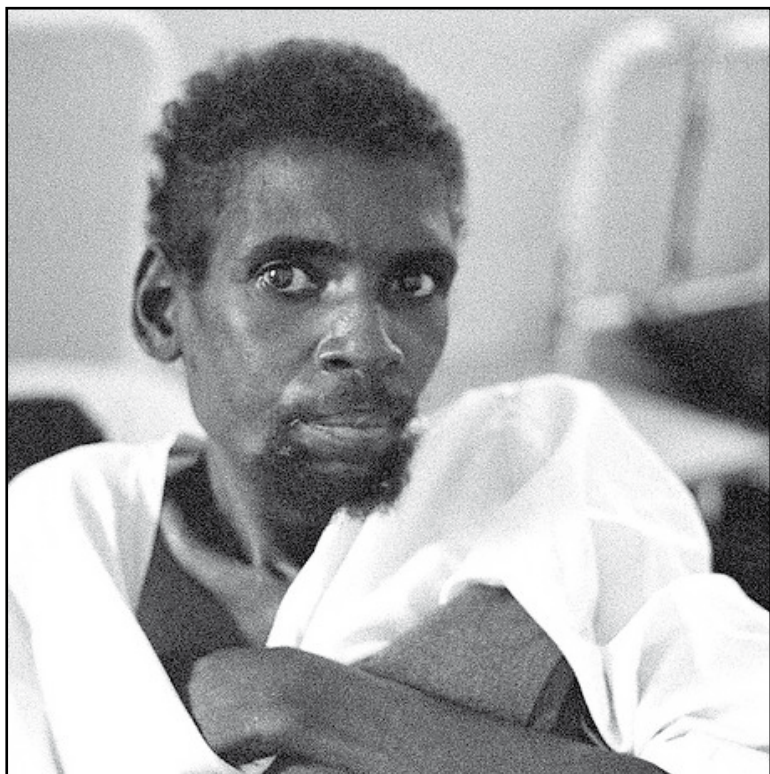
Socialism

IT WOULD be a mistake to say that socialism would instantly eradicate AIDS. However, as the capitalist politicians and businessmen battle to save themselves and their system from collapse, health care, particularly for an incurable disease like AIDS, is not high on their list of priorities.

In 2008, \$15.6 billion was spent on HIV/AIDS across the world but it is estimated that at least \$25 billion every year is closer to what's needed. Also, much of what is spent is wasted on reactionary schemes such as George Bush's ABC policy which emphasised abstinence and being faithful above condoms as the way to solve the problem.

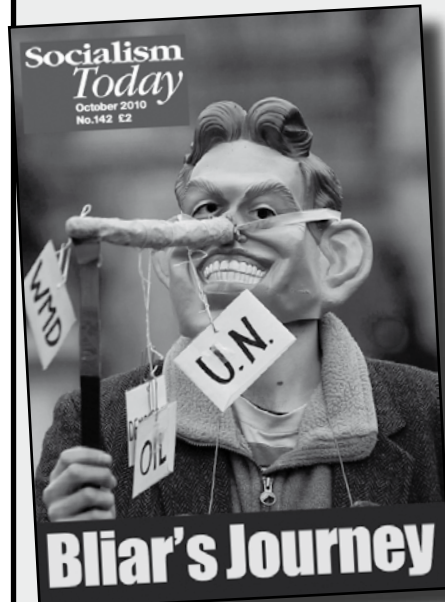
If working class people had democratic control of the wealth of society, it could be used where it is needed and AIDS would receive much more attention. Everyone who needs them could have access to ARVs. Every child could be taught a full, proper and scientific programme of sex and relationship education at school.

We could also invest in public services and in creating decent jobs for all, ending the poverty and desperation that can lead people to drug dealing and prostitution. And the possibility of better treatment or even a cure could be opened up by freeing scientists from the limits of researching only what makes profit.



33 million people are living with HIV or AIDS across the world.

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