# One World ~ One Hope



90% of all people with HIV are in developing countries



#### ONE WORLD - ONE HOPE



"AIDS has become
a permanent
challenge to
human ingenuity
and solidarity.
Together, let us take
up this challenge
and work in
unity towards a
safer world."

## When spider webs unite, they can tie up a lion.

#### - Ethiopian proverb

Since the AIDS epidemic began in the late 1970s, well over 20 million people have become infected with HIV. Around a quarter of them have died so far, and in the absence of a cure the others are likely to develop AIDS and die too. AIDS has become a permanent challenge. No individual or country is beyond the reach of HIV. But the spread of the virus is fuelled by poverty, the inferior status of women, and other societal factors.

Today, 90% of all people living with HIV are in developing countries. Sub-Saharan Africa, with three in five of all HIV-infected people alive today, remains the most affected part of the world. In hard-hit cities of Africa, half or more of the hospital beds are filled by people with AIDS.

But Asia, where the epidemic is far more recent, is set to overtake Africa as the region with the most new infections. Home to more than half the global population, Asia already suffers more AIDS cases a year than North America, and more than twice as many as Western Europe. As these young and middle-age adults fall ill and die, the impact extends not just to their family but to the community and nation, and even beyond. In the most affected countries, hospitals are overwhelmed with AIDS patients; schools, farms and factories are losing skilled employees; children are being born infected or are orphaned as their parents die of AIDS; households and communities are impoverished.

There is now evidence that efforts to care for people living with HIV & AIDS and to help others to remain uninfected have been successful. Better drugs and simple approaches to treat the most common symptoms of AIDS have been found. In some Western European countries the number of new HIV infections

has stabilised and even declined. Particularly effective approaches are a combination of several elements: they enjoy government backing, are protective of human rights, they are adequately resourced and grounded in community action.

Although a cure and a vaccine remain elusive, successful ways have been found to care for people living with HIV and AIDS and help others to remain uninfected. Sex education, for example, has encouraged young people to take precautions when they become sexually active. Access to clean needles and other support has made it possible for drug users to reduce their own HIV risk and consequently the risk of passing the virus on to partners and children. Communities of all kinds have provided care for their affected members while promoting newer, safer ways of coping with the lifetime risk of HIV. Priorities include HIV barriers (e.g. vaginal creams which would be usable by women), vaccines, ways of improving the quality of life of people with HIV, and research on the reduction of risk of HIV infection, on vulnerability to HIV and its impact. Assistance is provided in such areas as blood safety (to prevent HIV spreading through transfusions), behaviour change strategies, legal responses, medical care for curable sexually transmitted diseases, social marketing of condoms, and strategies to address the two-way links between AIDS and development.

While there has been some success in confronting AIDS, world-wide the response has been inadequate to keep pace with the growing HIV and AIDS problem. To match the expanding epidemic, we need an expanded response. Alongside increased and improved action in the health sphere, we need to do more about the underlying social and economic conditions that leave people few real options for protection. We need to strengthen the ability of individuals and communities to deal with AIDS as a new reality. And we need to incorporate AIDS issues into social and economic development.



#### WORLD AIDS DAY

#### People all over the world must unite to halt the epidemic, and support those affected by AIDS

On 1 December 1996, people around the world will observe World AIDS Day for the ninth time. The Joint United Nations Programme on HIV and AIDS (UNAIDS) has chosen the theme "One World ~ One Hope." as a call for a truly expanded response to the AIDS epidemic.

The theme emphasises the need for people everywhere to put aside their differences and to work together to face the challenge of slowing down the epidemic and alleviating its impact. At the same time it reflects a universal aspiration to find the means to prevent and cure HIV & AIDS, and the hope that comes from knowing that there are approaches that have proved to be successful in caring for people affected by HIV & AIDS and preventing the spread of HIV. No individual or country is beyond the reach of HIV and its impact. Whatever the continent, whatever the culture, whatever the standard of living, people are affected and at risk. UNAIDS estimates that there are over 20 million people currently living with HIV & AIDS and over five new infections every minute.

HIV & AIDS is a global problem that cannot be treated in isolation in a world where contacts between communities, travel and migration are constantly on the rise. HIV & AIDS therefore requires a global response. Many poor countries depend on the resources of richer countries for support in their fight against HIV & AIDS. But industrialised countries may benefit from innovative strategies for prevention and care found in developing countries.

While there is hope, much more still needs to be done. Our challenge is to ensure that the successes that are achieved are widely known and can benefit the entire international community. The implications of the HIV & AIDS epidemic needs to become a priority consideration in the definition of social and economic development policies. The response to the epidemic must be expanded in scope, quality, and in terms of the funding that is made available.

The Joint United Nations Programme on HIV and AIDS (UNAIDS), based in Geneva, Switzerland, is an unprecedented joint venture in the United Nations family. It strives to maximise the United Nation's efficiency and impact in the field of HIV and AIDS by pooling the experience, efforts and resources of six organisations. UNAIDS - UNICEF), UNDP, UNFPA, the UNESCO, WHO. It thus brings together expertise in sectors from health to economic development.

To be effective, an expanded response to HIV and AIDS must involve many different government departments and ministries. Partnerships with grassroots organisations, universities and private industry must be strengthened. Contact with non-governmental organisations, AIDS service organisations and people living with HIV are also essential for understanding and relaying the concerns of those affected by the epidemic. An expanded response must draw in all the sectors that can affect the course of the epidemic, or are affected by it. Among these are tourism, education, agriculture, transport and trade. And it needs coordinated support from the many organisations of the United Nations family. UNAIDS strives to bring these partners together. It helps individuals, communities and countries to join the alliance against AIDS. Drawing on practical experience from around the world, UNAIDS identifies sound policies and strategies for prevention and care, what can be called "international best practice". It also supports research to develop new tools and approaches.

UNAIDS helps government departments, community groups and other partners to build up the capacity to manage their own response to the epidemic.

Technical support is directed above all to developing countries and economies in transition.

Both internationally and within countries, UNAIDS speaks out for ethical and effective initiatives carried out with adequate resources and by a wide range of partners, including non-governmental and grass-roots organisations and people whose lives are affected or threatened by the epidemic.

A key UNAIDS perspective is that of ethics and human rights. In its role of global policy developer and standard-setter, UNAIDS must tackle important issues such as confidentiality and travel restrictions related to HIV status, ethics in AIDS, HIV and pregnancy, and informed consent for HIV testing.

Building on a modest resource base, UNAIDS is a catalyst for commitment to a safer world.



"People around the world hope for a cure, for a vaccine, for an end to discrimination against people living with HIV/AIDS and an end to denial,"

#### WHAT IS A RED RIBBON?

### It is a symbol of AIDS awareness an expression of support for people affected by the epidemic.

The red ribbon was conceived in 1991 by a group of artists in the United States who wanted to draw attention to AIDS. Since then the ribbon has become an international symbol of AIDS awareness and a visual expression of support for people affected by the epidemic. It is being worn by increasing numbers of people around the world to demonstrate their care and concern about HIV and AIDS – for those who are living with HIV, for those who are ill, for those who have died and for those who care for and support those directly affected.

The Red Ribbon is intended to be a symbol of hope—that the search for a vaccine and cure to halt the suffering is successful and the quality of life improves for those living with the virus. The Red Ribbon offers symbolic support for those living with HIV, for the continuing education of those not infected, for maximum efforts to find effective treatments, cures or vaccines, and for those who have lost friends, family members or loved ones to AIDS. But the Red Ribbons are not enough. The Red Ribbon is only a useful symbol in the long run when attached to words and deeds that actually make a difference.

If you are offered a Red Ribbon, you are asked to take it and wear it as a tribute to the millions of people living with or affected by HIV and AIDS worldwide. Anyone can wear a Red Ribbon. You don't have to be gay, or HIV positive or living with AIDS to demonstrate that you have an understanding of the issues surrounding HIV and AIDS.

The Red Ribbon project is a grass-roots effort. There is no "official" Red Ribbon. You can make your own to wear. Wearing a Red Ribbon is the first step in the fight against HIV and AIDS. It can be worn on any day of the year, but especially on World AIDS Day. The next step is to do something more.

This World AIDS Day leaflet is sponsored by the Birchgrove Group to recognise that HIV & AIDS is a clobal issue that effects us all.

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The Birchgrove Group is a Special Interest Group of The Haemophilia Society, Charity Number: 288260

People often ask me why I wear a Red Ribbon. Some people ask the question simply to find out what the ribbon means, but other people are really asking a hidden question: they wonder what experience in life has moved me so that I would want to wear a Red Ribbon. They are asking why I, a white heterosexual female, would choose to take an often unpopular stand, instead of quietly going about my life. They are asking about my husband, BJ. BJ made me his wife, but AIDS made me his widow.

Why do I wear the Red Ribbon? I wear it because I can. I am still alive, still able to carry the message about the reality and urgency of AIDS and how HIV can be prevented. I carry this message for those whose voices can no longer be heard but whose presence can still be felt. I carry the message that Persons Living with AIDS are people first and foremost. People who have families and loved ones, people who have dreams and hopes and fears, people who laugh and cry, people who deserve the same respect as you and I.

When I wear the Red Ribbon, I am demonstrating my compassion and care for people living with HIV and AIDS, my determination that those who have already died from AIDS-related causes will not be forgotten, my support for the ongoing efforts of all AIDS service organisations and researchers, my respect for the dedicated caregivers, and my desire to tell others about how to halt the spread of this obscene disease.

I can think of many other reasons to proudly wear the Red Ribbon, and these reasons have names and faces: Bill, the first PWA I knowingly met; David, the quiet man; Daphne, who fretted about who would care for her children; Tony who hung himself in desperation; Curtis, who had such a big heart; Little Jessica, whose panel in The Memorial Quilt haunts me to this day; Ryan White, whose unyielding courage showed the world that AIDS might sap his strength but never bend his spirit; and BJ, my sweet, gentle husband, who never passed up an opportunity to speak to groups and to "put a face on AIDS." AIDS finally robbed him of his speech, his mobility, his bodily functions, his smile – but never his dignity.

There are those who believe the Red Ribbon has lost its meaning, that it's only an empty symbol now. I disagree! As long as my Red Ribbon gives someone the opportunity to ask me a question about AIDS, or gives someone the strength to go through another day encouraged by this small sign of support and solidarity, then its message is very clear.

The Red Ribbon simply means that I care.









