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**XVII International AIDS Conference in Mexico City:
Implications for Latin America and the Caribbean***By Katherine E. Bliss*

When more than 22,000 scientists, advocates, policymakers, and activists gathered in Mexico City from August 3 to 8, for the 17th International AIDS Conference, or “AIDS 2008,” it was the first time that the meeting had taken place in Latin America. Holding the event in Mexico enabled 6,000 people from Latin America and the Caribbean, where an estimated 1.9 million live with HIV/AIDS, to join the discussions before, during, and after the conference—more than had attended any previous session. With generally low adult prevalence rates and epidemics largely concentrated among men who have sex with men or commercial sex workers, the region is often viewed as less affected by HIV/AIDS than other parts of the world. The Mexico City conference showcased the region’s challenges and achievements in addressing HIV, particularly in reaching marginalized populations, and raised the profile of Latin America and the Caribbean in international HIV/AIDS discussions.

For host country Mexico, the conference provided an opportunity to show the international community how the nation has come to terms with an epidemic that in its early years was often overlooked because of homophobia and discrimination against the men who were its principal victims. Indeed, Mexican president Felipe Calderón’s opening night announcement that Mexico would no longer require foreign pharmaceutical firms to have Mexico-based factories in order to sell their products, including antiretroviral drugs, demonstrated the steps that Mexico is taking to achieve “universal access, now”—the overarching conference theme. Policymakers, including health and education ministers of Latin America and the Caribbean and the Coalition of First Ladies and Female Leaders of Latin America on Women and AIDS, took advantage of the conference’s location to focus attention on issues of special importance to the region, such as sexual education and the increasing feminization of the epidemic. Additionally, panels on such topics as the risk of HIV infection among Mexican migrants to the United States and the epidemic’s effects on indigenous communities highlighted regional themes within the larger conference agenda.

As plans for the Mexico City meeting got under way in 2006, Mexico’s then-Secretary of Health Julio Frenk noted that the site selection offered an opportunity to shine a light on the important policy contributions that Latin American countries have made to the HIV/AIDS field, including antidiscrimination legislation and an emphasis on achieving universal access to antiretroviral drugs. Conference cochairs Pedro Cahn, president of the International AIDS Society (IAS) and director of Fundación Huésped in Argentina, and Luis Soto-Ramírez, of Mexico’s Instituto Nacional de Ciencias Médicas y Nutrición, also envisioned the meeting as a chance to remind donors and policymakers that, despite many positive indicators compared to Africa or Asia, the region faces serious challenges with respect to HIV/AIDS and should not be “excluded from the global agenda.”

President Felipe Calderón’s opening night announcement that foreign drug companies would no longer be required to maintain a production facility in Mexico in order to sell products there generated considerable discussion throughout the week. Critics had long alleged that the policy known as the “derecho de planta” effectively protected Mexico’s pharmaceutical industry from competition and made drugs, including antiretroviral medications, more costly in Mexico than in other countries in the region. Calderón’s announcement pleased HIV/AIDS advocates, who argued that the measure, which for antiretrovirals is effective immediately, will make it easier for public programs to make medications more widely available. But the Asociación Mexicana de Laboratorios Farmacéuticos protested the measure, questioning the government’s ability to ensure the quality of generic drug imports from such countries as India and China and warning that the move could threaten the nation’s public health.

Plenary sessions featuring Latin American public officials and activists linked regional efforts to the larger policy reform process. Jorge Saavedra, head of Mexico’s Centro Nacional para la Prevención del VIH/SIDA (CENSIDA), decried policies that criminalize homosexuality and marginalize men who have sex with men within HIV/AIDS outreach efforts.

Saavedra noted that in Latin America, men who have sex with men are 33 times more likely to be infected with HIV than the rest of the population. He urged more funding, improved disease surveillance, protection of patients' rights, and activism to promote the political will for governments to meaningfully address the problem. The presentation by Elena Reynaga, founder and executive director of the Argentine Association of Female Sex Workers, marked the first time a representative of the sex worker community addressed the IAS conference during the plenary session. Reynaga insisted that funding programs targeting commercial sex workers should funnel monies to the women themselves to administer, arguing that many organizations do not actually understand the women's complex needs with respect to HIV/AIDS prevention.

Policymakers took advantage of the conference's location in the Mexican capital to focus on regional concerns. For the first time, ministers of health and education in Latin America and the Caribbean met to discuss ways to improve outreach regarding HIV prevention and treatment in schools, formalizing a declaration in which they agreed to fortify inter-sectoral strategies to integrate sexual education into mainstream educational processes and to link those programs to discussion of human rights and respect for diversity within society. Similarly, during the fifth meeting of the Coalition of First Ladies and Female Leaders of Latin America on Women and AIDS, participants offered up an 11-point "Proclamation on Women and AIDS" in which they decried the feminization of the epidemic in the region and advocated efforts to empower women to take responsibility for their sexual and reproductive health.

During the formal conference program, featured sessions on the state of the epidemic in Latin America and the Caribbean underscored the challenges faced by a region that in 2007 saw 140,000 new HIV infections and 63,000 AIDS-related deaths. Representatives from NGOs, international organizations, and academia noted that in some ways the epidemic in Latin America and the Caribbean is stabilizing, thanks to the region's significant progress in promoting universal access to antiretroviral drugs and because many countries have instituted important antidiscrimination campaigns. However, the persistent concentration of the epidemic among so-called high risk groups in some countries, and a tendency toward generalization in others, are cause for concern in a region where an estimated 125 million out of 516 million people do not have regular access to health services. Presenters also emphasized the importance of understanding the nature of the epidemic among vulnerable groups such as migrants and residents of indigenous communities, where HIV/AIDS services, they argued, should be offered in a more linguistically and culturally relevant manner.

With the international spotlight on Latin America and the Caribbean during AIDS 2008, it seems certain that the

region's accomplishments and challenges with respect to the HIV/AIDS epidemic are better understood by the many thousands of researchers, advocates, and policymakers who attended the conference. Ideally, this will translate into increased funding for the region. A welcome sign is that recent Global Fund policy changes may enable some upper middle-income countries with "concentrated" epidemics to secure funding to bolster HIV/AIDS services; under the new guidelines, such countries as Argentina, Chile, Costa Rica, Mexico, Panama, Uruguay, and Venezuela, among others, may now apply for money to bolster prevention, care, and treatment for vulnerable groups in which the HIV prevalence is above 5 percent.

Bold statements by regional policymakers condemning homophobia, urging the empowerment of women to manage their own sexual and reproductive health, and promoting sexual education within public schools show the willingness of leaders in Latin America and the Caribbean to reject images of the region's social conservatism and take the necessary steps to fight the HIV/AIDS epidemic. News that the epidemic is becoming more generalized within the most impoverished and socially marginal communities, however, underscores the importance of innovative outreach and treatment programs that reach people who do not typically enjoy access to health services.

As plans for AIDS 2010 in Vienna, Austria, get under way, the challenge will be to ensure that the regional networks that developed and the information sharing that took place in Mexico City in early August continue to raise the profile of the region's epidemic within international discussions and, more importantly, promote continued progress toward "universal access, now."

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