



Reviewing the UNGASS Declaration of Commitment on HIV and AIDS The Need for Microbicides

The 2001 UNGASS Declaration on HIV and AIDS. In June 2001, the world made an historic commitment to mobilizing a comprehensive response to the global challenge of HIV and AIDS, including action to address stigma and vulnerability, prevention, care and treatment. The declaration noted the crucial importance of developing new tools, such as microbicides, to broaden and improve options for people, particularly women, to prevent HIV transmission.¹ The level of public sector investment in research and development (R&D) for preventive vaccines and microbicides was established as one of four high-level indicators of global commitment and action for a comprehensive response to HIV and AIDS.²

With no cure for HIV/AIDS yet found, further research and development is crucial.

UNGASS Declaration 2001,
para 70

The 2006 Review: In June 2006, world leaders will gather to assess progress in meeting these commitments and set the direction for the global response to HIV and AIDS for the next five years and beyond. Global resources for HIV and AIDS have increased since 2001 and an ambitious new commitment to achieving as close as possible to universal access to a comprehensive set of treatment, prevention and care services has been made (UN Gen. Assembly Resolution, 23 Dec. 2005). At this time of recommitment, it is crucial that investment in new prevention tools, such as microbicides and vaccines, remains a central part of a comprehensive and sustainable response to HIV and AIDS.

Supporting Microbicides at the 2006 UNGASS Declaration on HIV and AIDS Review

Member States can provide crucial support for investment in much needed new prevention technologies, such as vaccines and microbicides, during the UNGASS review events taking place 31 May to 2 June:

- Recognition of the importance of microbicides and vaccines to a sustainable response to HIV and AIDS in the General Assembly Political Declaration on HIV and AIDS to be agreed on 2 June, and support for the increased resources for new prevention technology R&D as an integral part of a scaled up HIV and AIDS response.
- Recognition of the need for microbicides and vaccines in Member State interventions during the high-level meeting on 2 June, panels, roundtables and other related events.

In Africa, AIDS has a woman's face.

Kofi Annan
New York Times
22 December 2002

Why are new prevention tools needed?

Women and girls bear the brunt of the HIV/AIDS epidemic. In sub-Saharan Africa, young women aged 15 to 24 are three times more likely to be infected than young men. In several southern African countries, more than three-quarters of all young people living with HIV are women. More than 17.5 million women are now living with HIV and AIDS globally, and the number continues to rise. In 2001, the UNGASS Declaration specifically noted the disproportionate impact of HIV and AIDS on women and girls.³

Current prevention options are not enough. Being female, married and poor are often the most significant risk factors for acquiring the infection, particularly in sub-Saharan Africa. The ABC approach (Abstinence, Being faithful and using Condoms) does not sufficiently meet women's prevention needs. Among young

¹ UNGASS Declaration: *para* 70.

² UNAIDS (2005). Monitoring the Declaration of Commitment on HIV and AIDS: Guidelines on the Construction.

³ IBID: *para* 2, 14 and 59.

women surveyed in Harare (Zimbabwe), Durban and Soweto (South Africa), 66 percent report having one lifetime partner, and 79 percent had abstained from sex at least until the age of 17. Yet, 40 percent of these young women were HIV-positive.⁴ Many had been infected despite staying faithful to one partner. The options of abstinence and being faithful are unlikely to protect married women or those who face sexual violence on a regular basis. Using male and female condoms requires the active consent of a male partner, which may not always be forthcoming. Furthermore, abstinence or using condoms will not allow women to bear children, an important social aspiration in many societies. New prevention options that are female-initiated, such as microbicides, are critically needed.

Prevention is essential to a comprehensive and sustainable response to the epidemic. Welcome new strides are being made to increase treatment and care to people living with HIV across the world. As the world gets better at providing treatment it must get *better* at preventing HIV transmission if a rapid and unsustainable increase in HIV prevalence is to be avoided. Increased coverage by existing prevention programmes is important, but must be complemented by the development of new tools that better meet the varying prevention needs that people have during their everyday lives. As women are both more biologically susceptible to HIV infection during sex and often have limited control over their sexual and reproductive choices, new tools that better meet their needs and approaches that support women's choices are essential.

Microbicides are products that can be applied topically to the vagina to reduce the transmission of HIV during sexual intercourse. Microbicides are currently being developed and tested to provide new female-initiated prevention options. They may take a number of different forms, such as a gel, cream, film, suppository, sponge or vaginal ring (which could release the active ingredient gradually) and act in a variety of ways to prevent HIV transmission. With sufficient investment and commitment, microbicides could provide a crucial addition to current prevention options and help substantially increase the effectiveness of HIV-prevention efforts.

Five first-generation microbicide candidates have entered large-scale efficacy trials around the developing world. With these microbicide candidates in large-scale efficacy trials and a new generation of microbicides in safety studies, microbicides could be available in five to seven years. However, increased and continued investment is required if the potential of microbicides is to become a reality.

Investment in microbicide research, development and advocacy must double. In 2004, US\$140 million (€116 million) was committed to microbicide research, development and advocacy worldwide. It is estimated that **annual investment must double to US\$280 million (€231 million)** per year for the next five years to ensure timely development of a safe and effective microbicide—and remain at approximately US\$260 million (€215 million) a year until satisfactory microbicides are licensed.

Global leaders have recently demonstrated increasing support for research and development of microbicides. At the XV International AIDS Conference in Bangkok, Thailand, UN Secretary-General Kofi Annan called on the world to ensure women have full access to practical prevention options, including microbicides. In 2005, at the UN General Assembly Special Session on HIV/AIDS meeting in June and at the UK G8 Summit in July, heads of state agreed that microbicide and vaccine research are an essential part of a comprehensive and sustainable response to the AIDS epidemic. UNAIDS also recognised the importance of new prevention technologies to any expanded and more effective HIV prevention response.⁵

⁴ UNAIDS, AIDS Epidemic Update, December 2005, page 9.

⁵ UNAIDS (2005). Intensifying HIV Prevention. UNAIDS Policy Position Paper.

The International Partnership for Microbicides (IPM) was established in 2002 to accelerate the development of safe, effective, accessible and affordable microbicides for women in developing countries to prevent the transmission of HIV. IPM is a non-profit product development partnership (PDP) that brings together public and private sector resources to microbicide development and to ensure future access for women in developing countries. IPM is a global leader in microbicide product development and serves as a resource for the microbicide field. IPM is also a co-convenor of the UNAIDS Global Coalition on Women and AIDS (GCWA). For more information on microbicides and IPM, please visit www.ipm-microbicides.org or contact Luciana Maxim at +1-301-608-2221 or lmaxim@ipm-microbicides.org.