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## **HIV/AIDS IN AFRICA: THE U.S. RESPONSE**

**The facts on HIV/AIDS in Africa are staggering.**

Africa has been hit harder by HIV/AIDS than any other region in the world.

Every day in Africa, AIDS kills 4,400 people.

Every day in Africa, 4,700 people are infected with the HIV virus.

More than two-thirds of people living with HIV are in sub-Saharan Africa.

In 2007, some 1.7 million Africans were newly infected with HIV, bringing the region's total to 22.5 million.

11.4 million African children have already lost one or both parents to AIDS.

The disease is not limited to adults: 2.2 million children in sub-Saharan Africa are living with HIV, accounting for 90 percent of global HIV pediatric cases.

Most of these children are infected by their mothers during childbirth because few HIV-infected pregnant women have access to antiretroviral medication that can drastically reduce mother-to-child transmission. Once born with the disease, only 13 percent of these children have access to HIV treatment.

Businesses are losing their workers, governments are losing their civil servants, families are losing their breadwinners. As a result, entire communities are devastated and economies that are already crippled by poverty, debts and unfair trade policies are further compromised.

**The U.S. response to HIV/AIDS in Africa has been a real success. PEPFAR and the Global Fund are saving lives.**

More than 1.3 million people in sub-Saharan Africa are now on treatment, a ten-fold increase since December 2003 thanks in large part to these two initiatives.

PEPFAR focuses on 15 focus countries, 12 of which are in Africa. PEPFAR focus countries are – Botswana, Cote d'Ivoire, Ethiopia, Guyana, Haiti, Kenya, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Tanzania, Uganda, Vietnam, Zambia

PEPFAR provides ARV treatment for 1.45 million people globally and the Global Fund provides ARV treatment for 1.4 million people globally.

PEPFAR provides care for 6.7 million people with HIV, including more than 2.7 million orphans and vulnerable children.

PEPFAR provides services to prevent mother-to-child transmission of HIV during 10 million pregnancies.

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PEPFAR provides voluntary counseling and testing sessions for more than 30 million men, women and children.

### **But HIV/AIDS is still outpacing our efforts and we need to go further.**

Despite our progress, only 28 percent of those in need of ARVs are receiving them. More needs to be done in the prevention, treatment, and care of those affected by HIV/AIDS. This year, the U.S. Congress will be considering an extension of the PEPFAR program. ONE supports an extension and expansion of the PEPFAR program that will scale up funding to meet these needs. Specifically, the new legislation should:

- Provide treatment for at least 3 million in need;
- Prevent 12 million new infections;
- Provide care for 12 million including 5 million orphans;
- Commit the U.S. to provide 33 percent of the Global Fund to Fight AIDS, TB, and Malaria's resources starting with \$2b in FY2009 and FY2010;
- Commit to train and support between 100,000-140,000 new health professionals in an effort to work towards a goal of achieving 2.3 health workers per 1,000 people; and
- Enhance the focus on prevention by including comprehensive list of options for prevention that can be utilized depending on local needs.

ONE estimates that a fully funded and fully scaled up effort to fight HIV/AIDS as well as scaled up efforts to address tuberculosis and malaria would cost at least \$54 billion over five years.

The U.S. also contributes to the fight against AIDS through its support for the Global Fund to Fight AIDS, Tuberculosis and Malaria. Since its establishment, the Global Fund has signed 520 grants worth \$9.8 billion across 132 countries. Of this total, \$4.7 billion has been dispersed. The U.S. is the lead donor to the Fund, pledging \$2.7 billion between 2001 and 2007.

These investments have produced remarkable results against these three diseases. Since its inception, the Fund has delivered:

- Life-saving antiretroviral treatment for 1.4 million people;
- DOTS (Directly-Observed Treatment) for 3.3 million people with tuberculosis;
- 46 million insecticide treated nets to protect families from malaria; and
- 44 million anti-malaria treatments.

### **Why do Americans support funding for PEPFAR and the Global Fund?**

While the moral case stands alone as a reason to act, the U.S. also has economic and security reasons to fight this emergency. As we've seen in the case of Afghanistan, devastated, unstable states can become breeding grounds for terrorists. Seeing Africa as our neighbor, and acting now to stop the spread of AIDS, is not just the moral thing to do – it's the smart and practical action as well.