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PRESS RELEASE 15TH MAY 1991

"JOURNALISTS RELUCTANT TO FOCUS ON WHO HIV/AIDS FIGURES"

HIV/AIDS

Global Figures and the Developing World

The Rt. Hon. Lynda Chalker MP, Minister for Overseas Development addressing the All-Party Parliamentary Group on AIDS at Westminster yesterday said that the WHO estimated that there would be 40 million HIV infections globally by the year 2000. Mrs Chalker was particularly concerned with the effect of AIDS on both the health care and economies of African countries. The UK had worked closely with the WHO's Global Programme on AIDS since 1987, she said. Britain was its third largest donor having provided £17 million. This year £4.5 million had been pledged. The Overseas Development Agency had committed £3 million to date for research to increase knowledge of HIV spread in developing countries.

The Minister reiterated that the predominant mode of transmission globally was via sexual intercourse; both heterosexual and homosexual. According to the WHO, as of early 1991 approximately 70% of all global HIV infections were estimated to have been spread by sexual intercourse between men and women. ODA grants had been increased to the International Planned Parenthood Federation and the WHO Population Programme. Mrs Chalker stressed the importance she attached to population planning and the use of condoms.

The Minister also stressed that discrimination leading to secrecy on the part of the sufferers compromised health campaigns. "Fighting discrimination must be an essential part of education campaigns", she said.

Teresa Kaijage, founder of WAMATA a self-help group for people with HIV and AIDS in Dares Salaam, Tanzania, felt that orphan care in the developing world should be linked to family care. Organisations concerned with orphans had to look to relatives of orphans. There was always a poor relative who could be given

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assistance to look after children. This was perhaps harder than funding a big institution but far better for the care of the child. According to WHO 10 million children will be infected with HIV by the end of the decade; also more than 10 million children will be orphaned during the 1990's as their parents die of AIDS.

Ms Kaijage described a UNICEF funded study in Tanzania of families affected by HIV/AIDS showed that average households numbered 5-10, with many children under 18. Household incomes were US \$5-20 per month and the cost of caring for someone with AIDS US \$5-20 per week. Therefore, families automatically got into debt if affected by AIDS. Less than \$5 per head per year was spent on healthcare in many African countries said Sue Lucas, UK NGO AIDS Consortium for the Third World.

Professor Roy Anderson of Imperial College, London had a message for the UK press. Unlike the US press, journalists in the UK were reluctant to focus on the alarming figures, he said. In terms of mortality there was no comparison between the Kurdish problem and that of AIDS however the former received a disproportionate amount of press coverage. According to the WHO in some major urban centres of East and Central Africa between 25 - 33% of all men and women aged 15-49 had been infected. In these cities during the 1990's the adult mortality rate might more than triple and AIDS deaths might reduce expected population growth by more than 30%.

However, virtually no publicity was given to these figures, so people did not appreciate how bad the situation was.

Costs of prevention were less than costs of care, said Professor Anderson "Small amounts of money spent now would produce disproportionately large effects in the future. Disproportionately large amounts spent in the future would have far less effect. The International Community needs to increase money spent on this problem now."

Care requirements depended on the incubation period of HIV which is thought to be 5-6 years in developing countries and 10-12 years in developed countries, he said. Other sexually transmitted diseases were not proved co-factors in HIV, he said. However linking the two for educational and counselling purposes was valuable.

NOT EMBARGOED

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