

An inspiring week for the fight against AIDS!

Impressions from the 25th International AIDS Conference in Munich



During the week of July 22-26, 2024, more than 10.000 participants, many of them HIV activists and representatives from Civil society and key populations from across the world, gathered in Munich for the [25th International AIDS Conference](#). Motto of the conference was “Put people first”, a well-chosen slogan, that reminds us on the human perspective of the HIV response: people should always be at the centre of all efforts to end AIDS. The event organized by the [International AIDS Society](#) (IAS) is held every two years. It is the biggest gathering on HIV globally. Highest representative from the German Government were Chancellor Olaf Scholz, who delivered a [speech during the opening session](#) and Dr. Sabine Dittmar, Parliamentary State Secretary to the Federal Minister of Health. Peter Wiessner, advocacy and external relation officer from [Action against AIDS Germany](#) participated and summarizes his personal impressions from the event.

Quote:

“One person dies of AIDS every minute. One person every minute! That is something we must change. Our common goal is to end the AIDS epidemic by 2030. While we are making progress, there is still some way to go. That is why we keep on working – together and globally. As one of the largest donors, Germany contributes 1.3 billion Euro into the Global Fund to Fight AIDS, Tuberculosis and Malaria in the current cycle. And we will continue to support it. (...) We also support UNAIDS and the World Health Organisation and will continue to be a reliable partner.”

(Chancellor of the Federal Republic of Germany Olaf Scholz at the opening of the conference)

UNAIDS Report: “The [Urgency of Now: AIDS at a Crossroads](#)”

Prior to the actual conference a series of pre-conferences took place, organised by the [Global Network of People living with HIV](#) (GNP+) and others on various topics, such as PrEP (pre-exposure prophylaxis), community-led monitoring, HIV cure and vaccine research, integrated services and approaches, the role of faith-based organizations and aging with HIV.

Just ahead of the conference [UNAIDS](#) launched with a [press conference](#) its new report on the global HIV pandemic: “The Urgency of Now: AIDS at a Crossroads”. Action against AIDS Germany had the honour to moderate the press conference. The report highlights significant achievements, such as the reduction in new HIV infections and increased access to treatment but warns of the persistent challenges that threaten to reverse progress. Key issues include funding gaps, stigma, discrimination, and inequalities in access to healthcare. The report calls for immediate, intensified efforts and sustained political commitment to end the AIDS epidemic by 2030, emphasizing the need for innovative approaches, inclusive policies, and robust sustainable international cooperation. Success or failure will be determined by which path leaders take.

Winnie Byanyima, UNAIDS Executive Director presented the new data from 2023: 39,9 Mio people are living with HIV (PLHIV), 1,3 Mio were newly infected, 630.000 died on HIV related illnesses and 30,7 Mio had access to live saving HIV-treatment (which means that ¼ among all PLHIV still don't have access). The data shows big differences between adults and children: 77% of people older than 15 years but only 57% of children up to 14 years had access. There are still about 5,4 Mio people infected that don't know about their HIV status. It is important to note here that treatment and prevention are the same thing: people with a successful HIV-therapy and an undetectable virus-load cannot transmit the virus. The slogan used and celebrated within the global HIV community is [U=U](#) (undetectable equals untransmissible). One of the root causes of stigma and discrimination is the potential transmissibility of the virus: we know that PLHIV with access to treatment can live healthy lives and are no threat to others. The same applies for those with access to prevention and prevention tools, such as [PrEP](#). The information from UNAIDS is important for the creation of tailored HIV programs, since almost every country and region has its own HIV-epidemic, depending on the transmission routes, differences between key populations and (the lack of) political commitment.

Quote:

“End the discrimination faced by girls and women that is driving the AIDS pandemic especially in Africa. 3 out of 4 newly infected young people (ages 15–24) are girls, one is a boy. There is an injustice there. We must deal with the vulnerability of girls and young women.”

Winnie Byanyima, UNAIDS Executive Director.

Alarming trends are observed in the Russian Federation and the Eastern European region. Michel Kazatchkine, 2007 bis 2012 Executive Director of the Global Fund, reports in a [press conference](#), that the numbers of PLHIV raise from 40-50% since 2010. 2,1 Mio PLHIV are currently living in the region, the fastest growing number globally observed. Reasons are the lack of real political commitment: only about 50% have access to HIV treatment. 92% of all new infections take place among key populations, particularly people using drugs and men having sex with men. A dramatic development, caused by the lack of political commitment, harmful laws, limited funding and shrinking spaces for civil society engagement in the region.

Good cooperation at the German Pavilion

Germany was represented in the exhibition hall with a [German Pavilion](#), organized in close cooperation between the Federal Ministry for Economic Cooperation and development, the Federal Ministry of Health, the GiZ and representatives from various German NGOs, such as the [Deutsche Aidshilfe](#) (DAH). We appreciated the good cooperation in the preparation of activities at the Pavilion. The process itself is another good-practice example that Germany takes the integration of Civil Society seriously. In times of shrinking spaces, one would wish that other countries follow this path. There were plenty of deep-dive discussions at the well-designed pavilion. Among the topics addressed there were, among others, the [BACKUP initiative](#) from GiZ, the [Braking Down Barriers Initiative](#) of the Global Fund, [access to TB and HIV diagnostics with MSF](#), the [UNAIDS Date Update](#) and sex workers needs for their health, organized by DAH. It was encouraging to see that all discussions integrated voices from community members from the Global South. The principle of “[nothing about us, without us](#)” has been translated into reality. Big thanks to everyone involved!

The game changer for the global HIV response?

One of the hot topics throughout the conference related to the results of a study published in the New England Journal of Medicine: it found out that 2 injections of lenacapavir in a year effectively prevent HIV infection, which is a different approach than vaccination but comes close to it. The study was conducted in South Africa and Uganda with more than 5,000 HIV-negative participants, none of the 2,134 who received lenacapavir contracted HIV. [Winnie Byanyima called it a “miracle prevention tool”](#) and a “game changer” for the global HIV response at the opening ceremony. She urged the pharma company Gilead, who owns the IP rights and asks for \$US 42.000 for the treatment/year, to make it widely accessible and affordable. especially in Asia, Latin America, and Africa. The drug would give those who are not in a negotiation-power to use condoms or cannot regularly take pills due to stigma and discrimination an appropriate tool to prevent themselves from HIV.

This will only be possible when Gilead cooperates with the Medicines Patent Pool and when the price comes down. The production costs of the drug are at about 40 € for a yearly supply, as [Dr Andrew Hill, Liverpool University](#), presented at the conference. This case demonstrates again the need for transparency in pricing of drugs. It’s not the first time that Gilead takes advantage of its power: the same happened with the Hepatitis C drug sofosbuvir. Shareholder values and profit count more than the human right to health. I had the chance to ask Jared Baeten, leading Gilead representative, some “difficult” questions, related to the exact price and the list of countries considered for voluntary licensing agreements. This was useless because I did not get a precise answer. Gilead was not without reason the target of [protests by activists](#) throughout the entire conference.

AIDS Cure - the second “Berlin patient”

In the run-up to the conference, the second patient cured of AIDS was presented with too much fanfare, as a important milestone in the fight against HIV/AIDS. The patient achieved sustained HIV remission after a stem cell transplant, which was necessary due to cancer, from a donor with a rare genetic mutation that makes him insensitive to the virus. I don’t consider this as a real innovation: The concept was only confirmed once again. The procedure is far too dangerous to be used on a large scale. Unfortunately, we are still a long way from any real hope of a cure.

Germany’s commitment: “And we will continue to support it”

Chancellor Scholz gave an encouraging speech at the opening session of the conference which provided important impetus for achieving the health-related sustainable development goals, in particular ending AIDS as a threat to public health. This is important especially considering the existing [funding gap of yearly \\$US 9,5 million](#) for global efforts to end AIDS. It was welcomed that Chancellor Scholz announced to become a member of the UNAIDS Global Partnership for Action to

End HIV-Related Stigma and Discrimination. UNAIDS is currently facing a funding shortfall of US\$ 20 million of its US\$ 160 million operational budget. Germany's contribution to UNAIDS is € 6.75 million this year. The [fair contribution](#) should, according to calculations from Action against AIDS Germany, actually be €15 million, based on needs and financial strength.

The 8th replenishment conference of the Global Fund will take place next year, at which the funding for the next three years is to be guaranteed. For the last replenishment, the German government provided a total of €1.2 billion from the BMZ budget for the years 2023-2025. The target of €1.3 billion is to be financed through debt conversions (Debt2Health). To be able to continue the important work of the Global Fund, continued financing needs to be secured. The currently foreseen cuts in the budget of the Ministry of Development and Cooperation (BMZ) are not helpful in this regard, as Action against AIDS wrote in a [letter to Chancellor Scholz](#) welcoming his positive remarks at the conference.

Limitations

This report is of course a very selective summary, due to the interests of the author and the limited space available here. Of course, there would be more to write and it is certainly worth looking out for what others have to report.

Peter Wiessner, 31.07.2024

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