

Community Rendez-Vous

NGOs strengthen North-South networks

Wider-ranging NGO networking will be one of the earliest results of the Community Rendez-Vous, the series of symposia a skill-building sessions that took place in the course of the 12th World AIDS Conference.

"There's been a better understanding of each other's needs," says Winstone Zulu of Zambia, who reported to the Rendez-Vous' closing plenary last night.

"The Northern community groups are very willing to network better with those in the South, because our needs are obviously different," Zulu told *The Bridge*. "The

needs of PWAs in the South are more for nutrition and drugs while, here in the North, it's more a question of human rights."

Zulu expresses disappointment that there wasn't more crossover between panelists in the scientific and community sessions. He's also concerned that the continuing emphasis on antiretroviral therapy will lead to the closure of counselling and support services for persons living with HIV/AIDS. "There's still a need for drop-in centres, where people can be advised and counselled," he stresses.

But he's pleased that community participants have come up with a set of specific resolutions, directed at the co-organisers of the Conference.

"At past Conferences, the community resolutions have been too

general," he says, "so then you go to the next Conference and pass them all again." The more focussed approach this year means community participants will be looking for specific progress when they arrive in Durban in two years.

Community Rendez-Vous resolutions included:

- A recommendation that AfriCASO and UNAIDS improve information dissemination to community-based organisations and individuals, and to optimise the use of electronic networks for that purpose;

- A call for all Conference co-organisers, especially ICASO and UNAIDS, to include migration issues in their Asia/Pacific networking, and to recognise treatment access as a "fundamental, non-negotiable priority;"

- A recommendation that Durban 2000 sessions on marginalised groups be designed and presented by community representatives, rather than organisations or researchers working with those communities;

- A commitment on the part of LACCASO, GNP, ICW and the AIDS Working Group of ILGA to co-organise a community forum at the 1999 Pan-American AIDS Conference in Brazil;

- The observation that current HIV/AIDS networks must be expanded to reflect cultural, religious, economic and sexual diversity;

- A call for UNAIDS to work with the Office of the High Commissioner for Human Rights to document HIV-related human rights abuses and best practices.

The Bridge is the official daily newspaper of the 12th World AIDS Conference. It appears each morning of the Conference, to provide a snapshot of onsite sessions and a forum for discussion of key Conference issues.

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Vox Populi

What will you do when you get home to bridge the gap?

"Our goal is to find preventive measures and to put them into practice, whether in the North or South. For us, the gap is between knowing how to protect yourself and not knowing." – *Atlanta, USA*

"We have to use available resources more efficiently. We have to make the best of what we've got and shouldn't expect miracles or wait for someone else to come in and solve

our problems." – *Dakar, Senegal*

"What will I do? Work, work, work. The gap has to do with the lack of knowledge about AIDS. If everyone knew more about it, we could improve prevention, have earlier diagnosis and give patients a better quality of life." – *Riberao Preto, Brazil*

"There's a big difference in scientific knowledge between the North

and South, but there's also a gap between available scientific knowledge and practical technologies. Doctors need to explain HIV in a way that patients and the community can understand, which will help ensure prevention." – *Fajara, Gambia*

"I will go back to my Christian community and promote the need for generosity and charity towards the sick, so that they can gain access to the most basic medications. As a priest, I see enormous indifference towards those afflicted with AIDS... Rich people must become more interested in health care for the poorest, to create a chain of true solidarity." – *Abidjan, Côte d'Ivoire*

"We'll continue trying to get sponsorship for a comic book project to give information on caring for people with HIV/AIDS. The biggest gap is in educating men so their families are better protected from HIV. Thai men often seek sex services outside the home. They think a person who looks healthy can't be infected with HIV. We have to change the thinking of the younger generation." – *Bangkok, Thailand*

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for STDs, there was no difference in HIV incidence between the two groups.

Calculations presented by Ron Gray of the Rakai project showed that treating STDs could have reduced HIV incidence by at most 15%, a change not detectable by the trial. "Most HIV transmission [in this population] probably occurs irrespective of STD co-factors," he said, which is characteristic of a mature epidemic with a high HIV rate.

The value of intervening earlier in the evolution of an HIV epidemic is underscored by results from the Mwanza project reported three years ago. STD treatment decreased

incidence of new HIV cases by about 40%. That initiative not only provided treatment but took a holistic approach, setting up STD referral centres, training health care workers in the syndromic approach, supplying STD drugs, providing supervisory visits and promoting clinic attendance.

William Kassler of the US Centers for Disease Control and Prevention favours the Mwanza approach. He noted that many American STD clinics lack capacity, staff and resources. He suggests the US should pay attention to Mwanza and improve these services in order to reduce the incidence of HIV in certain populations.