Back to the Future

Can a new AIDS initiative carve out strategies to topple the epidemic by 2031, its 50th anniversary? The countdown is on.

December 1, 2008 By Kellee Terrell

Looking back on 2008, the world of AIDS had some hits and some serious misses. The good news: the President's Emergency Plan for AIDS Relief was reauthorized (to the tune of $48 billion) and the U.S. travel ban against HIV-positive visitors was (almost completely) lifted. Bad news included the failed AIDS vaccine and microbicides clinical trials and a string of court cases across the country that stigmatized and criminalized HIV. In addition, the revised HIV prevalence rate in the United States was acknowledged to be 40 percent higher than previously reported, and for every two people who accessed antiretrovirals, five people became infected. Clearly, we have a long way to go to overcome the epidemic. In response, a group of the world's top AIDS thinkers is contemplating what needs to be done differently—not just today, but for a world of tomorrows.

The group committed to looking ahead is known as AIDS2031. The research and policy group—sponsored by UNAIDS, The Bill and Melinda Gates Foundation and Google to name a few—has assembled the world's leading AIDS researchers, activists, economists and epidemiologists to partner with HIV-positive people to evaluate what's working and what's failing in the fight against AIDS. Their goal is to develop new long-term approaches that'll make a bigger impact on the epidemic by the year 2031, the 50th anniversary of HIV. "In 2006, as people were focusing on the 25th anniversary of the disease, [there was] so much emphasis on the past, [and] there was little talk about the future," Heidi Larson, AIDS2031's executive director, told *POZ*. "So a group of us sat down and realized that the work merited a deeper look, something more than just short-term. We knew that we couldn't predict the future, but we wanted to influence it."

AIDS2031 announced this past January that the "deeper look" entailed developing nine working groups, which are now conducting extensive research and analysis of key issues such as funding, programming responses, science and technology. They will also investigate newly identified (and under-researched) factors contributing to the spread of HIV such as social drivers and lack of leadership. "We promote gender equality and empowerment of women," says Geeta Rao Gupta, the co-convener of the social drivers group and the president of International Center for Research on Women (ICRW). These efforts make women less vulnerable to infection. For example, she says, "[In some countries] women have survival sex or depend on men for money, so [negotiating] condom use can be difficult." One possible solution? "Support legal efforts to make sure that women have property rights [and resources] to be able to provide for themselves," Gupta says,

though she acknowledges that will require more work and new methodologies.

Those involved with AIDS2031 hope that outside groups and public health advocates around the globe will apply AIDS2031's multi-disciplinary approach to their own efforts. "There is no one magic bullet to fixing this problem," Gupta explains. "It is going to require a combination approach of several things happening simultaneously to make real change," she said.

AIDS2031's summary report, titled "The Agenda for the Future" and due in late 2009, will outline the group's recommendations and goals. To develop the report, AIDS2031 members will conduct a number of panel discussions, think tanks, public conversations and youth summits. They will also hold web-based discussions to spread the word about their work, check the pulse of the community and rev up support for their long-range goals.

So far, the initial work has sparked praise, but some criticize AIDS2031 for focusing on the future at the expense of the present. Larson assures that is not their intention. "We are not saying let's drop one issue for the other," she says. "What we are doing is looking at what we can do differently now, [to discover what may] lead to a better future."

Can AIDS2031's multifaceted approach truly shift how we address the pandemic over the next 23 years? If so, then in what ways will the epidemic look different on its 50th birthday? Or will focusing on future plans distract us from successfully addressing more immediate needs? While it's too early to tell, one thing's for sure: What we have done to date hasn't yielded the results we'd hoped for. So, perhaps it's high time we looked a little further into the future even if only to redirect our efforts in the here and now.

Sounding Off
AIDS2031 welcomes the HIV-positive community's input. So we asked you which issues should be a priority and what changes should be made by the year 2031. Here's what some of you thought :

Robin Langdale, Seattle, diagnosed in 1986
I would like to see more progress toward a cure or an AIDS vaccine. We are in a maintenance stage of the disease, and that is profitable and comfortable. Also, I hope that our society's attitude will change. Right now, our country is so uptight. We must talk about things a majority of us might find uncomfortable, such as fear, denial, immortality, sex and drugs. Oh wait, did I just say S-E-X?

Alicia Lowe, San Jose, diagnosed in 2002
I would like to see people better educated about HIV and AIDS. When I talk to people about my HIV status, they automatically think I have AIDS—even after I try to explain to them what the difference is, they're still confused. We all need to have good insurance to cover our medications and other health-related expenses. While the Ryan White CARE Act and ADAP are good—they just are not enough.

Monte Wolf, Washington, DC, diagnosed in 2004
We have to be a lot more creative about ways to reach people with regard to HIV prevention. As

an activist and advocate, I have found that both HIV-positive and negative people are very responsive to and can gain insight and education from arts-based outreach such as theater, music, spoken word and film programs. It’s like getting your medicine without swallowing the huge bitter pill—no pun intended.

Johnny Guaylupo, Brooklyn, diagnosed in 1998
Hopefully in the year 2031 more doctors will feel comfortable enough to work with diverse communities and be able to speak about sensitive issues such as sex, drugs and homosexuality. Also, scientists should stay strong and united with the community to ultimately do what’s best for us—not for corporations. And most important, the AIDS community needs to stick together and continue the fight. If we do, then maybe when 2031 comes around, we’ll call AIDS a terrible disease that killed may people, but one we now have under control.

For more info, visit aids2031.org

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