

FOR IMMEDIATE RELEASE

DONORS DENY LIFE-SAVING PROGRESS ON AIDS, TUBERCULOSIS AND MALARIA

As World AIDS Day approaches, cuts to the Global Fund particularly painful

Ottawa, November 30, 2011 - Today civil society organizations in Canada and around the world are calling on donor countries to the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund) to make good on their commitments to the Global Fund without delay. People living with and affected by HIV, TB and Malaria and their supporters call on donor countries to immediately mobilize at least \$2billion to allow the continued scale-up of the response to the three diseases. Without this immediate funding, no new programs will be considered and we will miss a unique opportunity to end the epidemic.

Last week, the Board of the Global Fund was forced to take regrettable decisions that will undermine the unique opportunity now before us to effectively address, and even end, the three public health pandemics for which the fund is named. With many donor countries shirking their responsibilities to the Global Fund, the Board had no choice but to cancel the latest round of funding opportunities and exclude many countries from being eligible to apply for current renewals in funding as well as future funding opportunities. This will ultimately end in needless suffering and death for many people worldwide, particularly in developing nations.

“The dire situation now facing the Global Fund and its millions of beneficiaries is extremely discouraging, to say the least. Donor countries – despite often making bold and visionary statements – appear to lack any ambition and have sent a message to some of the world’s poorest people that they are no longer a priority” said Nicci Stein, Executive Director of the Interagency Coalition on AIDS and Development (ICAD).

This major setback to the Global Fund, whose work has consistently shown exceptional value for money, comes at a time when groundbreaking scientific evidence shows that the AIDS pandemic can be stopped. A study funded by the U.S.-based National Institutes of Health showed that anti-retroviral therapy is 96% effective at reducing transmission of HIV, as well as treating HIV infection itself; it is also known that this therapy has a positive impact on the lives of those living with HIV/TB co-infection. All told, a total of 2.5 million deaths have been averted in low- and middle- income countries due to the introduction of anti-retroviral therapy.

“Since January 2011, the Global Fund has been plagued by donors’ knee-jerk reactions to sensational and often incorrect media reports of financial irregularities, months after reports of those same issues were posted on the Global Fund’s own website and discussed at length by its Board,” noted Richard Elliott, Executive Director of the Canadian HIV/AIDS Legal Network. “This frenzy has been used as an excuse by some donor countries to freeze funding, and others have stalled making pledges. It is unwarranted and unfair.”

In some ways, Canada has been a model donor. In September 2010 at the Millennium Development Goals Summit, Prime Minister Stephen Harper pledged three further years of funding to the Global Fund, with a 20% increase over previous commitments. To fully honour this current commitment, Canada must make full annual payment by December 31, 2011.

“Canada has taken a measured response to global public health, and we know that Prime Minister Harper is concerned with accountability – an area of exceptional strength for the Global Fund. We therefore trust that Canada will keep its commitment to pay its 2011 tranche straightaway and continue to urge other donors to tangibly show their support,” said Jean-Francois Tardif, Executive Director of Results Canada. “Without demonstrated support to the Global Fund, there will be an immediate and profound effect on the most vulnerable populations, including women and children in the world’s poorest countries.”

- 30 -

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GTAG (Global Treatment Access Group) is a working group of Canadian civil society organizations sharing information and undertaking joint activities aimed at improving access to essential medicines and other aspects of care, treatment and support for people living with HIV/AIDS and other health needs in developing countries.