TOP 10 THINGS YOU SHOULD KNOW ABOUT HIV THIS WORLD AIDS DAY

1. Over half of all people in the world with HIV are accessing treatment, but that's not enough.
   As of July 2017, more than half of all people living with HIV have access to life-saving treatment for the first time in history. However, despite the fact that 20 million people have access to treatment, that still leaves the other half of people living with HIV without treatment. The epidemic won't end until treatment for all is available.

2. The world has agreed to global benchmarks that will achieve the end of AIDS by 2030-- but this is only achievable if we sustain political will and funding.
   It is no longer a pipe dream-- bringing an end to epidemic levels of AIDS is fully within our grasp, but only through strong political leadership, cooperation, and prioritizing full funding for PEPFAR and the Global Fund. In order to achieve the global benchmark of 90%-90%-90% (90% of all people with HIV know their status, 90% of those who know their status are on treatment, and 90% of those on treatment are virally suppressed), we need to launch a more robust response to reach those targets.

3. The US leads the investment in ending the global AIDS epidemic: when we invest more, so does the rest of the world.
   The US is wealthiest country in the world and biggest donor to the global AIDS response, and because of our commitment, other developed countries look to the U.S. for leadership. When we increase funding, other countries follow suit. Approaching epidemic control is only possible if we continue to lead the way in robust funding.

4. Funding for the AIDS response is a global effort-- and we are falling behind.
   Developed countries have played a critical role in providing funding and programing to stop the AIDS pandemic, but funding levels have remained the same since 2010, despite the science that says we can end AIDS. If we pay to scale up funding now, we will pay less in the long-run by preventing new infections.

5. Treatment is prevention, and it’s keeping communities safer and stronger.
   When people adhere to antiretrovirals every day, they live healthy lives with a nearly normal life-span. Science shows that with consistent treatment, the virus becomes suppressed and virtually cannot be passed to anyone else at risk. Providing treatment to everyone who needs it is not just keeping those with the virus healthy, it’s preventing new infections at the same time.

SGAC
STUDENT GLOBAL AIDS CAMPAIGN
6. PEPFAR and the Global Fund are creating durable health infrastructure for treating a host of ailments, not just HIV.

The support provided through PEPFAR and Global Fund has been key to increasing numbers of skilled healthcare workers, community health volunteers, and technical support on health programming providing services beyond HIV treatment and diagnosis. When health emergencies occur, like the ebola outbreak, countries are more equipped to control the emergency, curbing infection and disaster.

7. Medication is cheaper and better than ever before.

There have been meaningful improvements in the standard HIV drug regimen. Most recently, dolutegravir (DTG), the first single-pill, generic HIV treatment, is becoming available to low and middle-income countries. Treatment adherence is more likely with a simple drug regimen, and with the generic form there is no cost barrier to wide-distribution.

8. In sub-Saharan Africa, girls and young women are at especially high risk.

Women and girls between the ages of 15 and 24 are twice as likely as their male counterparts to become HIV positive. This high risk comes from a dearth of education, economic opportunity, access to adequate sexual and reproductive health services, and prevalence of gender-based violence. By supporting PEPFAR, we are supporting young women and girls to thrive.

9. Defending human rights is inseparable from ending the AIDS epidemic.

Key populations—sex workers, people who inject drugs, transgender women, men who have sex with men, and prisoners—face much higher rates of HIV and AIDS than the general population and are most at risk for contracting HIV. In 2016, outside of sub-Saharan Africa, key populations and their sexual partners accounted for 80% of new HIV infections. They receive the least funding, medical attention, education, and protections. Almost all of the funding for key populations is from multilateral funds, and global efforts to ensure the most affected receive adequate prevention and treatment are essential to controlling the epidemic.

10. HIV transmission is still criminalized in 72 countries and 30 US states.

Discriminating against people because of their HIV status is an unfortunately common practice both around the world and in the U.S. These policies deter people from getting tested, knowing their status, and receiving treatment. This puts whole communities at risk and makes controlling the epidemic even more challenging.