According to the World Health Organization's 2004 “3 by 5” Progress Report, providing antiretroviral therapy (ART) to people in developing and transitional nations has moved from ambitious vision to emerging reality. In the second half of 2004, the number of people receiving this life-saving treatment rose from 440,000 to an estimated 700,000. The upsurge marks a critical step forward in the global battle against the HIV/AIDS pandemic, but it important to recognize that this number represents only 12 percent of the 5.8 million individuals who are currently in need of therapy and the tiniest fraction of the 40 million who are HIV-positive.

The sheer magnitude of the HIV/AIDS epidemic is unprecedented and, as such, requires an equally extraordinary response. In the past year, governments, international donor organizations, the private sector, and faith- and community-based organizations rose to meet the “3 x 5” challenge and efforts to stem the ever-rising tide of the epidemic are gaining momentum as never before. Increased financial commitments are making it possible to train more care providers and mobilize community stakeholders with the goal of scaling up effective treatment and prevention programs. Nevertheless, the task of building the capacity necessary to provide comprehensive care and support services remains one of the greatest obstacles in the ongoing war being waged against a disease that has already claimed the lives of more than 20 million people worldwide.

In Eurasia, where HIV/AIDS is growing at a rate faster than any other region in the world, people can no longer put off dealing with the epidemic by buying into the myth that AIDS is only an African problem or a disease that affects drug addicts and prostitutes. In the region today, HIV is thriving on the past 12 years of socio-economic transition and has made its way into the heart of communities large and small, urban and rural. The fact that young people are at the core of the epidemic in the former Soviet Union foreshadows additional burdens to come as more people are stripped away from the workforce and more women in their reproductive years contract the virus.

Strong leadership and effective collaboration are crucial elements in the battle against HIV/AIDS, yet only a handful of high-level, multidisciplinary working groups exist in Eurasia. In order to get ahead of the epidemic before it balloons out of control, political and public health authorities, clinicians, allied health professionals, and a broad spectrum of civic leaders must work together to ensure a comprehensive, integrated, team approach to HIV/AIDS care and prevention is designed and implemented.

Speaking at the XV International AIDS Conference in Bangkok, UNAIDS Executive Director Peter Piot described the need to build institutional and human resource capacity that can deliver treatment and prevention as effectively 20 years from now as it can today. “The time for strategies imposed from the outside is long gone. We need to address locally-defined needs and allow staff to do their work, but the reality in many countries today is quite different,” he said, explaining, “There are scores of AIDS donor missions, numerous evaluation frameworks, rival coordination mechanisms, an epidemic of workshops and meetings, and piles of paperwork and this fragmentation has real costs in terms of both money and lives.”

With a more than 20 years of experience accumulated and millions of people in need of treatment, wasting time by duplicating efforts cannot be tolerated. Instead, countries and communities must build on programs that have proven effective in other settings, adapting them to their own unique situation. For this reason, partnerships play a pivotal role in efforts to scale up treatment, support, and prevention programs.

This issue of CommonHealth focuses on building capacity to provide care and support to people living with HIV/AIDS. The articles found within these pages deal with topics ranging from the epidemiology of HIV and palliative care models to pediatric ART regimens and psychosocial support for people living with HIV/AIDS. Each one clearly demonstrates the importance of providing comprehensive clinical and social services for those living with or affected by the disease. By creating a comfortable, non-judgmental atmosphere in which HIV-positive patients can receive the care they need without feeling abused or stigmatized, AIHA partners can help improve the odds that they will seek—and adhere to—treatment and live longer, healthier lives.