

GEORGE SOROS
Chairman

ARYEH NEIER
President

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Secretary-General Ban Ki-moon
United Nations
760 United Nations Plaza
New York, NY 10017
Fax: +1 212 963-4879

Dear Mr. Secretary-General,

I write to thank you on behalf of the Open Society Institute for calling attention to the fact that marginalized communities are being denied access to health care and human rights, often as a result of government policies and practices.

As you noted in reference to the newly released report from the Commission on AIDS in Asia, progress in eradicating AIDS will not happen until sex workers, people who inject drugs, and men who have sex with men are treated with dignity. These highly stigmatized populations are the most vulnerable to HIV, yet they continue to face a wide-range of human rights abuses that block them from accessing adequate prevention and treatment services.

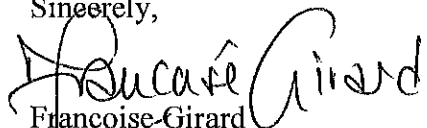
The report not only calls for the decriminalization of sex work, but counsels governments and other actors to, "Avoid programmes that accentuate AIDS-related stigma and can be counterproductive. Such programmes may include 'crack-downs' on red-light areas and arrest of sex workers." It also highlights the great cost-effectiveness of HIV prevention services for sex workers. Yet, in recent months, sex worker organizations worldwide have been unsuccessful in engaging UNAIDS and UNFPA in discussions as the agencies prepare a global Guidance Note on HIV and Sex Work. In contrast to the Commission on AIDS in Asia report, the draft Guidance Note emphasizes a call to reduce the number of women engaged in sex work. We believe the mission of UNAIDS should be to focus on reducing HIV transmission, which requires protection of the rights of sex workers and their access to HIV services, rather than the "rehabilitation" of sex workers. We have drawn the attention of UNAIDS Geneva and UNFPA New York to the newly released report, and would welcome a further discussion.

Just as with sex workers, government officials and law enforcement routinely obstruct harm reduction measures that are proven to reduce HIV risk behaviors among injection drug users. This is particularly troubling given that injection drug use accounts for the largest share of HIV infections in China, Russia, Ukraine, Central Asia, and much of Southeast Asia. Less than two percent of injection drug users in these countries have access to methadone or buprenorphine, even though these drug treatment medicines are on the WHO Model List of Essential Medicines.

We encourage you to review the functions of the International Narcotics Control Board to determine how the Board might best work with governments to protect the health and human rights of people who use drugs. Unfortunately, up to this point, the Board has focused solely on drug control at the expense of public health, and has urged national governments to do the same. The Board's obstruction of effective harm reduction programs, including needle exchange and medication-assisted treatment, stands in stark contrast to the UN's commitment to the human rights of people who use drugs and others vulnerable to HIV.

The Open Society Institute thanks you for your leadership on this issue. We look forward to continuing our work with the United Nations to address the global public health crisis of AIDS.

Sincerely,


Françoise Girard
Director, Public Health Program