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Bracing for the AIDS Crisis in Eurasia

By Nicholas Eberstadt

With his \$15 billion "Emergency Plan for AIDS Relief," unveiled in the State of the Union address, President Bush has altered both the level of commitment and the depth of resources in the worldwide struggle against the HIV/AIDS pandemic. This new plan will focus on just 14 countries in Africa and the Western Hemisphere (Haiti, Guyana and a dozen sub-Saharan states). The rationale for this intense concentration is, quite simply, international arithmetic: Of the roughly 40 million HIV-positive people worldwide, fully half are thought to live in these 14 targeted countries.

The emergency plan is thus an attack against the HIV pandemic as we know it today. But AIDS is a fast-moving and utterly global plague. Its front lines tomorrow will not necessarily be the spots where we are preparing to wage major campaigns today. In fact, there is reason to believe that the locus of the worldwide AIDS problem is shifting--from sub-Saharan Africa to the Eurasian landmass (defined here as Asia plus Russia). Devastating as the African AIDS epidemic has been, HIV breakout in Eurasia threatens to be more disastrous.

According to the United Nations, roughly 30 million HIV sufferers today are sub-Saharan Africans, and some 8 million people are living with HIV in Eurasia. And these Eurasian figures may be too low. A recent study by the U.S. National Intelligence Council, for example, suggests that the totals for three Eurasian countries alone--Russia, India and China--may already be as high as 12 million, with up to 2 million HIV sufferers in Russia and China each and as many as 8 million in India.

It took less than a decade for the sub-Sahara's estimated HIV-positive population to jump from 8 million to today's 30 million. There is still no reliable means for accurate long-term HIV projections, but expert opinion is already contemplating mind-numbing totals for Eurasia in the years immediately ahead. By 2010, the intelligence council study argues, there could be nearly 50 million people living with HIV in just three of Eurasia's countries. Just seven years hence, in this grim imagining, as many as 8 million Russians could be stricken with HIV--more than one-tenth of the reproductive-age population. In China, the corresponding number for 2010 might be as high as 15 million. India's HIV count in 2010 could be 25 million.

If one looks a bit further into the future, the reverberations of HIV in Eurasia could be even worse. Even a relatively "mild" HIV epidemic could result in suffering of an entirely new magnitude. For the quarter-century spanning 2000-25, projections based on this "mild" scenario envision more than 40 million AIDS deaths just for Russia, India and China. That would be almost twice the death toll from the worldwide AIDS pandemic up to this point. In sub-Saharan Africa, the AIDS catastrophe has been mainly humanitarian; the economic and political repercussions of the disaster have been minimal because Africa is marginal to the modern world economy and the global power balance.

Not so Eurasia, which is a major and growing center of economic and military power. The now-unfolding HIV epidemics in Russia, India and China could directly and tangibly darken economic prospects for any and all of these countries. For the outside world, the costs of local AIDS disasters in each of these Eurasian centers would certainly be measured in terms of lost trade opportunities. And perhaps in other terms as well: We cannot forget that these three states maintain massive conventional armies and nuclear arsenals.

Effective national AIDS campaigns require top-level commitment and leadership. Unfortunately, despite some positive stirrings, the highest authorities in Russia, China and India still seem largely in denial about their mounting domestic HIV crises.

The Bush administration would be well advised to devote more of its anti-AIDS energies into rousing these three governments to embrace HIV strategies of their own. Prevention is said to figure prominently in the president's plan. Across Eurasia, preventive actions today can still reduce the scale of the AIDS emergency we will face tomorrow.

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