As new AIDS cases begin to plateau or decrease in developed nations, the pandemic has taken alarming aim at the developing world. Throughout sub-Saharan Africa, Southeast Asia, the former Soviet republics and the Americas, new cases are on the rise, especially among the poor, the young and females.

With a rate that could be compared to some of Africa's most out-of-control AIDS epidemics, one in every 20 Haitian residents is infected with the HIV virus. The tiny country accounts for only 24 percent of the population in the Caribbean but shoulders a massive 61 percent of the region's AIDS cases, according to the most recent statistics from the United Nations AIDS program (UNAIDS). Officials worry that Haiti is leading the way to a rapid spread of the virus throughout the Caribbean and Latin America in a pattern that reflects the epidemic's tragic toll on sub-Saharan Africa.

AIDS prevention programs that target the young have proved successful in combating HIV infections.-- Courtesy British Broadcasting Corporation

In many sub-Saharan African countries, as much as 25 percent of the population has succumbed to the disease, reducing life expectancies, wiping out the working class and leaving behind thousands of orphans. But experts warn that Africa is not the only region where AIDS is becoming a crisis.

After sub-Saharan Africa, the Americas suffer the highest rate of HIV in the world. A recent study by the Trinidad and Tobago-based Caribbean Epidemiological Center indicates that nearly two in every 100 Caribbean residents between the ages of 15 and 50 are infected with HIV, the virus that leads to AIDS. In some major hospitals throughout the region, AIDS already is the No. 1 killer. And new cases will develop even more quickly as the virus, which first struck urban middle class adults, spreads to rural communities and to poorer and younger population groups.

Originally associated with homosexual men and intravenous drug users, the AIDS epidemic in recent years has shifted to younger people, especially girls and babies, and from middle-class victims to poor populations with little or no access to health services. "This is what is worrisome," said Dr. Fernando Zacarias, coordinator of the AIDS/STD program for the Pan American Health Organization. "Once it becomes the disease of the poor, the people with the resources won't see it as their problem."
Officials in poor American countries are particularly concerned that women are increasingly becoming the victims of the disease. AIDS used to claim two men for every woman in Trinidad and Tobago. Today, seven out of eight young AIDS victims are female. In Honduras, 58 percent of all new AIDS cases between 1994 and 1997 were female. No other region in the world, aside from sub-Saharan Africa, boasts higher ratios of female AIDS victims.

Led by Africa and the Americas, the trend is reaching global proportions. Worldwide, women aged 15 to 49 represented 43 percent of all new HIV infections in 1998, up from 40 percent a few years ago. In some areas of the Americas, younger girls are at particular risk of infection by older men who rape or molest them. In Trinidad and Tobago, most male victims are aged 40 to 50 and most females are 15 to 25, suggesting that "older men are having sex with young girls and infecting more than one of them," Trinidad Health Minister Hamza Rafeeq said at a recent meeting of American nations.

For anatomical reasons, women are about four times more vulnerable than men are to sexually transmitted diseases, including HIV. But their lower social and economic status in many societies also increases their risks. And nowhere, perhaps, is this more obvious than in Latin America and the Caribbean where a culture of "machismo" makes it acceptable for married men to have more than one sexual partner. Women who speak out against their husbands' infidelity may be beaten.

They are often at the mercy of their husbands to use condoms, according to Germaine Hanquet, an AIDS adviser for Doctors without Borders in Honduras. Only 14 percent of Brazilian heterosexual men used condoms in 1996, according to AIDSCAP, an AIDS-prevention program. To make matters worse, the Catholic Church, a major influence in many American nations, discourages the use of condoms.

"It's very much connected to machismo and the position of women in society," Hanquet said. "We have to teach them they don't have to accept everything from a man. They should be able to protect themselves." Many married women, and women of childbearing age in the Americas are being infected -- a situation which leads to the infection of newborns and to an increase of AIDS orphans.

In some American nations, up to 15 percent of AIDS patients are children infected by their mothers and born with the disease, according to the Pan American Health Organization. In Antigua, the chances that a child will be born HIV-positive are put at one in three.
Once drug addicts and homosexuals were most at risk of becoming HIV-infected. Now the virus is beginning to spread to the general population in some American countries. The cycle continues as children orphaned by parents who die of AIDS take to the streets, adding to an already high population of street children. In countries such as Haiti, where there are 40,000 AIDS orphans, the consequences are having serious social consequences. Once on the streets, AIDS orphans are more likely to become HIV-infected themselves by using intravenous drugs or engaging in the commercial sex business to survive. On the streets, girls again are most vulnerable as they become victims of prostitution or rape.

As the nations of Latin America and the Caribbean struggle to stop the spread of AIDS, developed countries, are beginning to see the virus plateau or even decrease. For example, the United States -- which leads the world in AIDS cases -- saw its AIDS mortality rate drop 21 percent in 1998, according to the National Center for Health Statistics.

But developing nations lack the resources to carry out the prevention programs that could lead to a downturn of the epidemic. These countries already are over burdened with costly natural disasters. And at an estimated cost of $15,000 per year to treat one patient, supporting an entire AIDS population could easily consume the health budget of many developing countries. As a consequence, most people who have AIDS in these countries never receive medications that could keep them alive longer or prevent mothers from passing HIV on to their newborns.

Despite the grim situation, some American countries are providing hope that the virus is not unstoppable. In Brazil last year, the government began promoting the women's condom -- a program that has begun to decrease the rate of HIV infection there, according to Dr. Zacarias. And throughout the Americas non-governmental organizations (NGOs) and others are finding ways to combat the illness.

UNAIDS is developing plans for countries throughout the region to target populations most affected. "Gender is being given special emphasis," said Tale Kvalvaag, a spokesperson for UNAIDS in Latin America.

In Guatemala, the government has realized that it can't cure everyone of the virus. Instead, it is using its few resources to target newborns by treating pregnant women with
AZT, a drug that helps prevent HIV from spreading to the fetus. Doctors without Borders is working with schoolchildren to discourage machismo among young men and to encourage women to protect themselves and to use condoms. A similar program decreased the AIDS rate in Uganda from 24.5 percent to 13.4 percent between 1989 and 1998.

But for some cities in the Americas, it is almost too late, according to Dr. Zacarias. For example, in San Pedro Sula, one of Honduras' largest cities, five percent of the population -- excluding commercial sex workers, drug addicts and homosexuals -- is infected. It has already begun to destroy the city's workforce and to cause an explosive orphan problem. Still, for most of the America's there still is time to fight the epidemic.

"We have a window of opportunity that now is no longer than five years," Zacarias said.

"We know exactly what needs to be done from the scientific and technical aspects. What is needed is more resources, political commitment and NGO support … Everybody needs to take this threat seriously."