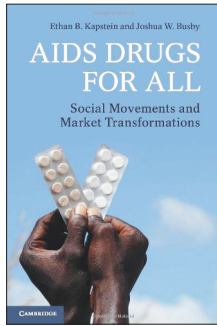


Book

Universal access to HIV care including antiretrovirals



AIDS Drugs for All: Social Movements and Market Transformations
Ethan B Kapstein,
Joshua W Busby
Cambridge University Press,
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The past decade has seen a momentous and unprecedented revolution in access to HIV care including effective combination antiretroviral treatment. 10 years ago the market for this expensive treatment was almost completely confined to people living with HIV in high-income countries. Since then, a transformation has happened, which has provided access to care to more than 10 million people living with HIV worldwide, most of whom live in middle-income and low-income countries. In *AIDS Drugs for All: Social Movements and Market Transformations*, Kapstein and Busby ask how this change happened, what were the mechanisms, was it inevitable, does it contain any negative consequences, and will it last?

The authors unravel the many strands they believe contributed to this profound change, and assess why the universal access to combination antiretroviral movement succeeded where other seemingly compelling cases have failed. For instance, why has the climate change lobby to date failed to corral a similar commitment to change from the key international actors; why have attempts to provide clean water or universal primary education to all been unsuccessful? Kapstein and Busby also examine the historical success of the abolition of slavery and the failure of its modern day equivalent, sex worker trafficking.

Kapstein and Busby argue that the universal access argument succeeded through a market transformation driven by a social movement focused on "strategic moral action", and that this consists of five key elements. First, the antiretroviral drug market had to be contestable. The authors explore the extent to which advocates had scope to question the conventional notion that antiretroviral drugs were private goods available only to those with the ability to pay to merit goods to which people had a right of access. This task could be seen as the quest to transform combination antiretroviral treatment from a high price, low volume product to a low price, high volume product. Second, the ability of advocates to frame a compelling case that access to combination antiretrovirals should outweigh the profits of the pharmaceutical industry had to exist. Third, success depended on the extent to which the various actors (eg, the pharmaceutical industry, AIDS activists, national governments, non-government organisations, the United Nations, UNAIDS, WHO, and the World Trade Organization) were able to define a coherent, consistent and compelling policy ask (ie, a goal that had clear moral weight and which made sense to the important target audiences). Fourth, a feasible strategy had to be put in

place to support the necessary changes. Finally, a new set of rules and intuitional arrangements had to be created to support the transformed market.

The book, while scholarly and erudite, makes for compelling reading, especially for people interested in the background arguments, tensions, wranglings, impasses, and obstacles that underlie the apparently seamless success of the movement. These details give the reader an intriguing insight into the machinations of the UN agencies, the pharmaceutical industry, the US Government, and various advocacy groups.

Is the present state of affairs durable and will we achieve the goal of universal access to care for all people living with HIV? The authors suggest at least two potential obstacles. First, the global economy is in a far more brittle condition than it was 10 years ago, and bilateral commitments to development aid and national commitments to institutions like the Global Fund to Fight AIDS, Tuberculosis and Malaria are flagging. Second, although access to the present set of drugs comprising combination antiretroviral treatment has been essentially agreed on by the pharmaceutical industry, later generation drugs developed since India (the location of most genetic manufacturers) entered the World Trade Organization and became TRIPS-compliant, might be viewed differently. Additionally, regional free trade agreements might bring changes to the way products like antiretroviral drugs are treated in the future.

The authors show how various influences and mechanisms have managed to produce such low prices that these might ultimately lead to counterproductive consequences, with suggestions that some generic producers are scaling back their antiretroviral business and few new companies are entering the market. Additionally, some argue that the pharmaceutical industry has little incentive to pursue innovation in HIV when they are likely to have little choice but to voluntarily license their intellectual property rights to a generic manufacturer, donate them, or price the products for sale in low-income and middle-income countries virtually at cost.

The book, although well written and logical in its flow, does contain some redundancy and might have benefited from some critical editing. However, as an integrated exegesis of a revolutionary social upheaval the book is an invaluable resource and helps define the necessary and sufficient conditions by which a large scale social transformation has arisen and might arise again in the future.

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