

SPEECH

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Defining a road map to zero

It is an honour and a pleasure for me to take the floor on behalf of the World Bank and the Global Fund.

Today is an historic moment for all of us. It is historic because it is uncommon that we can gather people from all different parts of the region—and the high-ranking leaders of Russia—to discuss issues of AIDS, and to reflect on our strategy for the future.

After listening to these different leaders, it is clear that this meeting is happening in a time of global transformation. The world is characterized today by seismic political shifts occurring in different places.

We are also seeing a new power emerging. This region is experiencing a level of economic growth that no one could have predicted even 12 to 15 years ago. At the same time, this change is calling for a new kind of global governance.

This global governance must be undertaken with a spirit that will help us to share responsibility; to build on our shared values. This means protecting people—making sure that the rights of those who need services will not be marginalized or neglected.

From my personal view, this is an opportunity to define a new road map for this region. One that will stop HIV transmissions and help this region develop a new action plan for achieving the vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths.

Sustaining the arc of progress

This will be possible because of the arc of progress we are seeing in the AIDS response. Global Fund resources have been made available to millions of people, and countries like yours have also been contributing. Today we can say that these resources have produced results. HIV has moved from a death sentence to a chronic condition.

Zero new HIV infections. Zero discrimination. Zero AIDS-related deaths.

Believe it or not, just 10 years ago, when we were at the UN General Assembly negotiating the Declaration of Commitment on HIV and AIDS, people were saying to us, “Do not put poor countries into the Declaration. Don’t even talk about making treatment available to them, because it will not be possible. It will be too expensive. It will cost \$15,000 per person per year.”

Today, 7 million people are on treatment in poor- and middle-income countries.

In those days, we had only a handful of countries that were model HIV success stories—China, Senegal and Ghana. Today 56 low- and middle-income countries have managed to stabilize or reverse their numbers of new infections. This is the progress we need to sustain. It is not time to stop.

We are also seeing young people taking up leadership of the prevention revolution. They have reduced their new infection rates by almost 25% in the most affected countries. That happened because we changed our approach. We do not deal with young people as passive beneficiaries of programmes anymore. We deal with them as actors of change. We equip them with the skills and knowledge to be able to negotiate their sexuality in a responsible manner.

We are also seeing science making progress. I am happy to have with us today the Vice President of Spain, where they are seeing positive progress towards a vaccine. I know that in this country you are also working on a vaccine. Our researchers are also trying to discover new, better types of treatment. And I encourage you to continue to do that.

Recently we have had a great breakthrough in the science of HIV. We know that if we put people on treatment early, we can reduce their risk of transmitting the virus by up to 96%.

It is not time to start discussing if this is too costly. What will be very costly for the world is if we do not invest in ending this epidemic. Inaction is unaffordable. If we do not pay now, we will pay forever.

Without any doubt, if we continue to have 400,000 babies born every year with HIV in Africa, we will not be able to stop the epidemic.

But I am happy to say that the progress I have been describing is happening right here in your region. It is happening in your country. In Russia, you have increased access to treatment almost 16 fold. Programmes to prevent vertical transmission are reaching more than 90% of women.

You are stopping children from becoming infected with HIV and dying from AIDS. Two days ago I was visiting a clinic near Saint Petersburg that cares for children who have been orphaned by AIDS and for pregnant women living with HIV. I was so proud to see that at this clinic, the children are healthy. Babies are born without HIV—there is zero HIV transmission in this clinic.

There I met with Dr. Evgeny Voronin—many of you have probably had a chance to meet him. I can say it was, for me, a moment of hope. To see those children—orphans living with HIV—happy, and having access to school. That is very important.

Roadblocks remain

However, I want to say that it is not time to be complacent. It is time to mobilize this moment to transform our approach to HIV in the region.

Eastern Europe and Central Asia are areas of great concern to me. It is the only part of the world where we are not seeing a decline in new infections. It is the opposite. We are seeing the fastest-growing epidemic in the world.

In 10 years, the number of people living with HIV has tripled. Women and girls—and this makes me scared—are becoming more and more the face of HIV in this region. When we see an epidemic increasingly touching and affecting women, we have to be scared, because then we know we will have tremendous difficulty in stopping it.

Tuberculosis and HIV co-infection, and TB resistance, is another very serious problem. We need to be able to have in our future strategy a way to deal with this issue.

I want to say again—and I agree with both of you, Vice President and Minister Lavrov—that we will not stop and reverse the trend I was just describing if we do not address one of the most critical issues.

I heard you, and I understand the difficulties of dealing with drugs. It is certainly a major political and security challenge. But we will not stop HIV if we continue to have more than 60% of all new infections occurring among people who inject drugs. The epidemic will move from that community into the general population. That is the trend we have seen in all different parts of the world.

I have been reflecting on what we can do about it. I know you are still debating the options in your countries. But experience and science is showing us that if we do not take a holistic approach, including harm reduction and substitution therapy, we will not stop this epidemic.

I remember being in China when there was zero tolerance for people who inject drugs. I also saw this in Indonesia, in Malaysia and in different parts of the world. I can tell you from experience, these countries finally realized that they could not stop the transmission. HIV was growing among people who used drugs.

Today China has completely changed its policy. They now have the biggest harm reduction programme in Asia. They are dramatically reducing the number of new infections among drug users.

I know that universal access is close to your heart. Because I know it is an issue of social justice. It is an issue of redistribution of opportunity. But we will never make universal access a reality if we do not have programmes for people who inject drugs, for men who have sex

with men or for sex workers. Because they are the one who are most at risk. And if they do not have these services, we will not stop this epidemic.

I want to conclude by saying that I believe this meeting is the beginning of something extraordinary, thanks to the leadership we are seeing.

I want to thank you, Mr. Dvorkovich for your personal commitment, because this meeting would never have happened without you. And I know that from the beginning you were convinced that this issue should be treated as a political issue, not just a technical matter. And I want to thank you for helping us to organize this forum and for bringing all of these leaders around the table.

Finally, may I say that at the High Level Meeting in July, Russia was instrumental in negotiating and making sure that we had a Political Declaration.

Going forward, I would like us to consider three goals that will give intent to our historic moment:

- One: No babies born with HIV in Eastern Europe and Russia by 2015.
- Two: Zero HIV infections among drug users.
- Three: zero deaths due to HIV-TB co-infection.

Thank you.

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