

Speech

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XIV INTERNATIONAL CONFERENCE PERSON LIVING WITH HIV IN FAMILY AND SOCIETY

Warsaw, Poland

28 November 2008

Speech by Deborah Landey, Deputy Executive Director, UNAIDS

Uniting the world against AIDS

Excellencies, Distinguished guests,

Ladies, Gentlemen

Szanowni Państwo

It is an honour and a pleasure to be here today, at the 14th Polish AIDS Conference. This is my first visit to Poland, and it is encouraging to see such a high level of interest in AIDS.

This interest comes at a critical point.

In just a quarter of a century, AIDS is one of the defining challenges of modern times. A true product of our increasingly globalized society, AIDS is now present in every region, in every country.

Today, 33.2 million people are living with HIV worldwide. Seven thousand people are newly infected every day. Half of them are women. Most are young adults in what should be the prime of their lives.

The World Health Organisation ranks AIDS as the sixth cause of death worldwide. The epidemic has left almost 15 million children as orphans. Its impact on individuals, families, communities around the globe is beyond compare. In response, world leaders have established a series of ambitious targets to tackle it.

The first came in 2000, when UN Member States included the "halting and reversing of the AIDS epidemic" among the Millennium Development Goals to be achieved by 2015.

Most recently, at the High Level Meeting on HIV/AIDS in New York last year, governments pledged to scale up towards universal access to HIV prevention, treatment, care and support by 2010 – the half-way point between the High Level Meeting and 2015.

Since then, UNAIDS has been supporting countries as they go through the process of setting national targets for HIV services. It's been a revealing exercise – highlighting how much more straightforward it is to set targets and cost programmes for treatment than it is for prevention.

It's not hard to see why. Preventing HIV transmission is a complex – and sensitive – task, that goes way beyond traditional health sectors.

And it's a key reason why it was so encouraging to see Poland adopt a national multisectoral AIDS plan.

Effective HIV prevention is becoming increasingly obvious: for every one person worldwide who starts taking anti-retroviral treatment, another five become infected with HIV. If we don't radically reduce infection levels

today, tomorrow's treatment bills will be exorbitant. In Poland, for example, the cost of treatment this year stands at about 40 million euros. Next year, it will go up to 50 million euros.

Urgent action on prevention is required all over the world. The good news is that it's not only possible, it's happening. In a number of countries in sub-Saharan Africa and the Caribbean, HIV infections are falling. This decline can increasingly be linked to HIV prevention beginning to pay off.

Here in Europe it is essential to continue to raise awareness of HIV and other sexually transmitted infections, as well as the risks of sharing needles to inject drugs. To provide a regular flow of information about HIV and STI prevention to the widest possible audience, and to back this up with supplies of commodities such as condoms and clean needles.

After all, HIV is also a real problem here in Europe – and to recognize that if we don't tackle it now, it will be more difficult to do so later on. Last year, 750 new HIV cases were recorded in Poland. In a few years time, these individuals will require support, including, of course, expensive HIV drugs.

Most critically, it is time to eradicate the stigma around HIV, once and for all. It is shocking that in 2007 it is still so hard for people to live openly with HIV. Stigma remains one of the biggest single obstacles to achieving universal access to HIV services. It is time to tackle the issues that make some people more vulnerable to HIV than others. Social inequality is a key issue here. The low status of women, for example, may make them so dependent on male partners that they don't feel able to negotiate safe sex. It can also put them at risk of physical violence. The link between gender inequality and HIV is something that strikes me wherever I go.

It's time to move from small projects to nationwide programmes. There is some excellent work going on in this region.

And lastly, it's time to re-think the way AIDS budgets are spent. For a long time, antiretroviral treatment has been the top priority. The challenge now is to find the money to keep people on treatment, provide it to others as the need arises, and to invest sufficiently in HIV prevention to shorten the queues of people needing treatment. Believe me, I know this isn't easy. But it's essential.

Here in Poland,

You launched the prevention activities and ARV treatment in Poland as early as possible. Thanks to this, today the HIV epidemiological situation in the country is stable. Remembering how dangerous this epidemic can be, you should continue and even strengthen your action against it. Education, starting with the youngest possible generation; antiretroviral treatment; care and support to people living with HIV and affected by the epidemic; respect to human dignity and protection of human rights are essential for the success. I profoundly believe that Poland is, and will continue to be, a positive example to the international community. At this juncture I would like to thank the Ministry of Health, the National AIDS Centre and all other partners, including civil society, and people living with HIV for their efforts over all these years, the effects of which have brought us here today.

Next year, governments will report on progress towards universal access to HIV prevention, treatment, care and support. I know Poland will be there to share with the world community its successes and the challenges it faces. Your leadership at regional and global levels has always been exceptional.

Let me close by saying how important your deliberations in the coming days are for Poland, for Europe and for the world.

Thank you