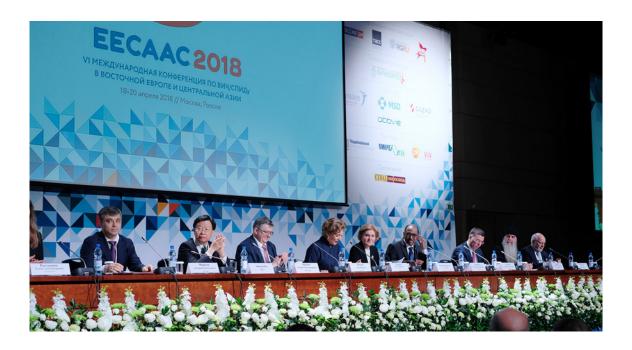
SIXTH INTERNATIONAL CONFERENCE ON HIV AND AIDS IN EASTERN EUROPE AND CENTRAL ASIA

SPEECH BY MICHEL SIDIBÉ, EXECUTIVE DIRECTOR, UNAIDS MOSCOW, RUSSIA, 18 APRIL 2018





AIDS IN NOT OVER IN EASTERN EUROPE AND CENTRAL ASIA, BUT IT CAN BE

Honourable Deputy Prime Minister, honourable ministers, dear co-chairs, colleagues and friends.

It is an honour and privilege to be here in Moscow to open this important conference.

With nearly 3000 participants, this is the biggest gathering on AIDS in the Eastern Europe and Central Asia region, bringing together civil society, scientists, activists, private sector and government. We are here to talk about the needed transformation to ensure that the Eastern Europe and Central Asia region can control the epidemic.

I was here in Moscow for the Ministerial Conference on TB. President Putin's opening address showed that political leadership is essential to lead the way to ending an epidemic.

He was clear that TB can no longer just be a technical issue—and the same is true for ending AIDS.

TAKING STOCK OF PROGRESS AND HIGHLIGHTING GAPS

This conference is important and a unique opportunity to take stock of progress and highlight gaps. Since the last EECAAC conference in 2016, most countries in this region adopted test and treat. The cost of treatment has fallen from about US\$ 2000 per person per year to less than US\$ 200 for many countries. The Ministry of Health of the Russian Federation has now implemented a consolidated procurement approach, leading to efficiencies and cost-savings. Armenia and Belarus have eliminated mother-to-child transmission of HIV. This is a public health success story that we should celebrate. No one could have believed that this would become a reality and that we would have a generation born HIV-free. According to official data for the Russian Federation, in 2016 the increase in the number of new HIV diagnoses was 10% and in 2017 the increase was 2.2%—this is a positive trend. The campaign #STOPHIVAIDS led by Svetlana Medvedeva raised public awareness about HIV and



testing. Last year I met with President Lukashenko in Minsk and I was very impressed by his personal commitment to end AIDS.

The Russian Federation is strengthening its partnership with UNAIDS. Our joint cooperation programme, implemented with AIDS infoshare, will help to reach 90–90 in Armenia, Belarus, Kyrgyzstan and Tajikistan.

SOUNDING THE ALARM ON NEW HIV INFECTIONS

But I must also sound the alarm about the trend of new HIV infections in this region. Eastern Europe and Central Asia is still the only region of the world where the number of new HIV infections continues to rise.

In Eastern Europe, heterosexual transmission now accounts for 55% of new infections.

So the epidemic is moving from key populations to the general population. And this threatens socioeconomic growth and demographic stability. After South Africa and Nigeria, the Russian Federation has the third largest number of new infections. This can be a threat to demographic stability and prosperity.

PREVENTION, PREVENTION, PREVENTION

That is why we must urgently rethink prevention in this region. I encourage all countries in the region to join the Global HIV Prevention Coalition. All countries need to implement evidence-based HIV prevention programmes, including comprehensive sexuality education, pre-exposure prophylaxis, condom demand creation, and harm reduction.

No one is too hard to reach, but we are not investing where we need to. In the region just 3% of total HIV expenditure is for key populations. We know that community-based and community-led programmes work. We must demedicalize the response. There is an outreach programme for sex workers in St Petersburg that shows clearly that community-based peer interventions can Fast-Track the response and prevent new infections. Programmes like this need to be maintained.



ZERO DISCRIMINATION FOR ALL

We still have a major problem with stigma and discrimination. We have broken down the wall of silence around HIV, but we have not broken down the wall of exclusion, of prejudice, of stigma, of discrimination.

It is about upholding everyone's right to health. Key populations such as migrants, sex workers, people who inject drugs, transgender people, people in prison, and men who have sex with men need to have their right to health respected and upheld.

Discrimination is blocking our efforts to end AIDS. Globally, one in eight people living with HIV report having faced discrimination in health-care settings. People who inject drugs are forced into the shadows and are not able to seek health care.

Everyone has the right to health—no exceptions. That is why I am calling for zero discrimination in all health-care settings.

TAKING AIDS OUT OF ISOLATION

After nearly 40 years of the AIDS epidemic, we must take AIDS out of isolation. TB is the leading cause of death among people living with HIV, globally and here in the region. In 2016 there were over 230 000 cases of TB in Eastern Europe and Central Asia. We will never end the TB epidemic if we don't also manage TB/HIV coinfection. The same applies to HIV and hepatitis C. We have over 1.6 million people living with HIV, and over 10 million people in this region are living with hepatitis C. We have triple epidemics—HIV, TB, hepatitis C—but we need one integrated approach for prevention, diagnosis and treatment.

People are living longer with HIV, and HIV is now a chronic condition. We must address people's quality of life, noncommunicable diseases, and the issues associated with aging with HIV.



LEVERAGING THE POWER OF FOOTBALL

I cannot end without talking about the FIFA 2018 World Cup. The World Cup is bigger than football—it is about uniting, not dividing. We need to leverage this moment for promoting HIV prevention and zero discrimination. And the World Cup can be a symbol of freedom of movement for all, regardless of HIV status. We started yesterday with the UNAIDS World Cup to End AIDS and Discrimination, with players from the Russian government, international football stars and people living with HIV.

PUTTING EASTERN EUROPE AND CENTRAL ASIA ON THE FAST-TRACK

Let me conclude by saying that I believe the Russian Federation has everything it needs to end AIDS and help other countries in the region, including scientific achievements, resources, and a clear understanding of the nature of the epidemic.

UNAIDS stands ready to work with the Russian leadership to develop and launch a Fast-Track plan for the Russian Federation as an urgent priority.

I hope that by the time we are gathered here again for EECAAC 2020, the Russian Federation will have taken the steps needed and will have reached 90–90–90.

Across Eastern Europe and Central Asia, we must also leverage the Fast-Track Cities approach and work with mayors towards 90–90–90.

Clearly, we have to do a lot more—and a lot faster.

AIDS in not over in Eastern Europe and Central Asia, but it can be.

Thank you.

