

SPEECH

By: Michel Sidibé, Executive Director of UNAIDS and Under-Secretary-General of the United Nations

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Putting Eastern Europe and Central Asia on the Fast-Track to ending AIDS

Honourable Deputy Prime Minister, Honourable Ministers, Dear Co-Chairs, Colleagues and Friends,

It is an honour and privilege to be here in Moscow today to open this important conference. The EECAAC Conference has become a unique platform for uniting civil society, government leaders, scientists, faith actors, and international partners to reflect on progress in the AIDS response in Eastern Europe and Central Asia. EECAAC 2016, is the opportunity to drive the kind of change that will enable us to reach people wherever they may be and get this region on the Fast-Track to ending AIDS.

It is a pleasure to witness the strong commitment of the Government of the Russian Federation. Today's presence of the Honourable Deputy Prime Minister, Olga Golodets, shows clearly the high-level of responsibility and sense of urgency the Government of Russia is taking to end the AIDS epidemic here in Russia and across Eastern Europe and Central Asia.

Since we last met, we have made tremendous progress. When I was here in 2014, globally, only 13 million people living with HIV were receiving antiretroviral treatment (ART). By the end of the following year, we had already achieved Millennium Development Goal (MDG) 6B—ahead of schedule—reaching 15 million people around the world with life-saving access to treatment. Today that number is closing in on 16 million.

UNAIDS was pleased to report to the United Nations General Assembly that the world also reached Millennium Development Goal (MDG) 6A – we were able to halt and reverse the HIV epidemic in almost every region of the world. Energy and momentum is being mobilized globally, and leaders are making clear commitments to reach everyone, everywhere with our vision of the three zeros: Zero new infection, Zero discrimination and Zero AIDS-related deaths. With your support, and your global solidarity, we will demonstrate to the world that we will reach the new target of the Sustainable Development Goals—to end the AIDS epidemic as a public health threat by 2030.

EECAAC Conference has been a driving force

There is also important progress being made here in Eastern Europe and Central Asia. In the last two years, the EECAAC Conference has been a driving force to bring change and catalyze progress. Almost all of the countries in this region have successfully removed all travel restrictions affecting people living with HIV. That is an important sign that progress on human rights remains critical to ending AIDS. It is only by refusing discrimination and ensuring all people have access to life-saving services that we can make continued progress.

You have also been able to demonstrate that Eastern Europe and Central Asia can be the first region of the world where babies are no longer born with HIV, and their mothers are alive and healthy. Today, the Russian Federation has one of the world's most effective programmes for the elimination of mother-to-child transmission of HIV. As Deputy Prime Minister Golodets just mentioned, Russia is providing antiretroviral medicines to more than 95% of pregnant women living with HIV. You have dramatically reduced the rate of mother-to-child transmission five-fold, bringing the percentage of babies becoming infected with HIV down to 2%. This is close to the threshold used by the WHO to validate that a country has achieved the elimination of mother-to-child transmission of HIV. Other countries in EECA, including Armenia, Azerbaijan, Belarus, Georgia, Kazakhstan and Ukraine are also on-track for WHO to validate the elimination of mother-to-child transmission of HIV, and thus join Cuba, which was the first country to achieve this milestone last year. This is a major success story that no one could have believed just a few years ago.

And this morning we heard Deputy Prime Minister Golodets make bold, new commitments to Fast-Track progress in the Russian Federation towards ending AIDS. There is a renewed sense of urgency to quicken the pace of action across this region—we need to accelerate all our efforts to finally break the backbone of the epidemic.

I salute the leadership of Prime Minister Medvedev, who demonstrated his personal commitment to advance this outcome by chairing the high-level Government Commission for Healthcare last October.

The Minister of Health of Russia, Dr Skvortsova, has called for at least 80% of people with HIV in Russia to access treatment by 2020 and has publicly encouraged people to know their HIV status. This means providing expanded access to HIV testing and treatment services. I want to applaud the decision of the Russian Government to double government funding for HIV treatment.

This is excellent progress, and underscores the importance of leveraging Russia's new state HIV strategy to reverse the epidemic in Russia, particularly by reaching everyone still waiting for life-saving services.

As noted by the Deputy Prime Minister, the Russian Federation can become a regional hub for the production of low-cost, high-quality antiretroviral medicines in Eastern Europe and Central Asia. Bringing affordable medicines to everyone in need is a key component to reaching our treatment target of "90-90-90" by 2020—which calls for 90% of people living with HIV to know their HIV status, 90% of people who know their HIV-positive status to access antiretroviral treatment and 90% of people on treatment to have suppressed viral loads, thus greatly reducing the risk of HIV transmission.

Complacency is our worst enemy

But success isn't guaranteed in this region, or any other. Particularly in Eastern Europe and Central Asia, the AIDS epidemic is not over, and complacency is our worst enemy.

Let me outline a few key issues that demand a bold, new approach. First, the region of EECA is one of the very few regions of the world that did not achieve the MDG Goal 6A of halting and reversing the HIV epidemic. And that is why this EECAAC Conference is so critical. Russia represents nearly 70% of all new HIV infections in this region. More than half of these new HIV infections are still occurring among people who inject drugs.

The 2011 United Nations General Assembly Political Declaration on HIV and AIDS challenged us to achieve a 50% reduction in new HIV infections among people who inject drugs, but we achieved a less than 10% reduction. We missed the global target completely, and in this region of EECA, the number of new HIV infections among people who inject drugs continues to increase.

So let us be very honest. We will not end AIDS if we do not have an approach to reach all people who inject drugs with the full range of evidence-based services. If people who inject drugs are considered to be criminals; if they have to go underground and hide instead of accessing life-saving services, we will fail them again and again.

I worry about all of the key populations still being left behind. By not reaching key populations as a priority—which include men who have sex with men, transgender people, sex workers, prisoners, migrants, people who inject drugs, and people living with HIV who are still waiting for treatment—we will see an increase in the numbers of coinfection for HIV and Hepatitis C, and we may never see the end of AIDS in this region. Even the excellent progress the region is making on TB may be quickly reversed, bringing increased comorbidity of HIV/TB.

I am sorry to note that, despite outstanding progress in the elimination of mother-to-child transmission, HIV treatment coverage in EECA is among the lowest in the world. Professor Abdool Karim will speak more eloquently on the urgent need for this region to reach 90-90-90 treatment target by 2020.

But the evidence is clear. Today, HIV treatment is prevention. If you offer to put all people who test HIV positive on treatment immediately, you decrease the risk of sexual transmission to their HIV-negative sexual partners by 96%. And you also increase their life expectancy and quality of life, giving people years of healthy, productive living.

Time for specific, urgent action

This conference is coming at a transformative moment. It is the first AIDS conference in EECA since the international community adopted the Sustainable Development Goals. In line with the 2030 Agenda for Sustainable Development and its focus on leaving no one behind, we should have the courage to explore all progressive policy options. I urge you to consider the following ten action points for urgent progress in the EECA region:

1. We must urgently implement harm reduction programmes at scale in the region.

- 2. At least 25% of HIV budgets must be focused on combination HIV prevention, including services to end the epidemic among women and to scale-up the distribution of free condoms.
- 3. Young people, especially adolescent girls, must receive comprehensive sexuality education and sexual and reproductive health services.
- 4. Pre-exposure prophylaxis should be offered to all population groups at substantial risk of HIV infection.
- 5. We must implement and accelerate programmes to reach 90-90-90, including homebased and self-testing for HIV.
- 6. Every person with HIV must be given immediate and lifelong access to HIV treatment.
- 7. The price of HIV medication and diagnostics must be radically reduced across the region.
- 8. HIV services must be fully integrated with Hepatitis C, TB, cervical cancer and maternal and child health services.
- 9. We must provide the resources to ensure that civil society does not disappear. It is essential that these networks and organizations continue to play a strong role in this region's AIDS response.
- 10. Punitive laws against key populations must be removed, and people most vulnerable must be protected by legal and law enforcement institutions.

We have a major opportunity this year—the United Nations General Assembly High-Level Meeting on Ending AIDS in June. I hope this EECAAC conference will give positive momentum for an ambitious and bold Political Declaration, and all the countries of this region will be represented at a high level.

These next five years will be critical. If we do not implement these 10 action points and Fast-Track the HIV response—if we do not invest boldly and wisely at this decisive point—we will needlessly prolong this epidemic and our goal to end AIDS will never be a reality. Either we pay now or we pay forever.

Let this conference be remembered as a moment of transformation, when the region of Eastern Europe and Central Asia got on the Fast-Track to the end of AIDS by leaving no one behind.

Thank you.

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Contact

UNAIDS Geneva | Sophie Barton-Knott | tel. +41 22 791 1697 | bartonknotts@unaids.org

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The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners to maximize results for the AIDS response. Learn more at unaids.org and connect with us on Facebook and Twitter.