Closing Remarks

by

Dr Samlee Plianbangchang
Regional Director, WHO South-East Asia

At the

The 9th International Congress on AIDS in Asia and the Pacific (ICAAP)

Bali, Indonesia
13 August 2009
Distinguished participants, honourable guests, ladies and gentlemen:

I thank the Organizing Committee for inviting me to speak at the closing session of the Congress. This Congress has provided an excellent opportunity to reinforce our total commitment to halting and reversing the HIV epidemic in Asia and the Pacific.

HIV remains one of the most formidable public health challenges of our times. In the Asia Pacific Region, HIV affects mostly vulnerable and difficult-to-reach populations, especially sex workers, men who have sex with men, and injecting drug users. As a result of effective national responses over the past two decades, the overall HIV prevalence has begun to decline or level off in several countries.

However, the epidemic is far from over – thousands of preventable new infections continue to occur. Of particular concern, recent evidence shows an
increasing trend of HIV infection especially among men who have sex with men.

For positive and sustained impact, national responses to HIV infection have to be scaled up, particularly “preventive interventions”. As far as antiretroviral therapy (ART) for HIV is concerned, there has been a remarkable progress in Asia and the Pacific. Since late 2003, ART coverage has increased nearly tenfold. However, barely one-third of people with HIV in low- and middle-income countries are currently receiving ART. And sadly, a large majority of HIV-positive people do not know that they are infected. There is also evidence that affected people come too late to health-care facilities for treatment.

Poor access for HIV-infected pregnant women to counseling, testing and antiretroviral prophylaxis is also discouraging. To ensure equitable access to health services, counseling, testing, care, and treatment need to be urgently expanded. Programmes for antiretroviral therapy need to be implemented with an emphasis on HIV prevention. Sexually active people receiving antiretroviral therapy are more likely to practise safe sex and use contraceptives.

Mounting evidence indicates that viral suppression combined with behavioural intervention reduces HIV transmission. Scientific studies to date suggest that ART should be made a part of a comprehensive and integrated approach to HIV prevention. Antiretroviral therapy should also be included in
the analysis of the cost-effectiveness of HIV prevention. This is especially so in low- and middle-income countries.

With technological advances, there has been a gradual change in the epidemiological profile of HIV/AIDS. Therefore, there should be a corresponding change in the evaluation of HIV/AIDS treatment and care. But whatever the situation, national HIV/AIDS programmes should always place their emphasis on “prevention”.

An HIV vaccine is still not available and thus education and other preventive measures must be our overriding priorities. Effective educational measures would help reduce the disease burden and help ensure long-term sustainability of achievements from control efforts. Therefore, preventive education should be made the key regional strategy for HIV/AIDS control in the long term. This preventive education should be planned and implemented within the sociocultural context of community.

Distinguished participants, ladies and gentlemen;

HIV/AIDS will continue to be an important global public health concern in the foreseeable future. The foremost priority now is to vigorously intensify prevention efforts. By preventing new infections, we will have a better chance to curb the epidemic and mitigate its impact. Sustainable progress in the response to the HIV/AIDS epidemic depends on improving capacity for
service delivery. And this response must be aligned with efforts to strengthen health systems based on the primary health care approach.

Implementing HIV/AIDS programming through the PHC approach is the best way forward to achieve a wider commitment to equity and social justice. Equity and social justice are of paramount importance for responding to the HIV/AIDS epidemic.

Halting and reversing the incidence of HIV/AIDS and TB are among the specific targets set for achieving health-related Millennium Development Goals (MDG). To attain these specific goals, more attention is needed for addressing HIV-associated TB. TB programmes and HIV/AIDS programmes must work together more closely together than ever before. To achieve the MDGs, the programme interventions should be targeted to the most affected and difficult-to-reach populations.

Reaching vulnerable populations is the key to successfully combating the HIV/AIDS epidemic in this Region. HIV/AIDS is likely to stay with us for a long time. WHO’s mission is to provide the required support, to help ensure universal access to HIV/AIDS prevention, treatment and care. WHO support is provided through:

- developing evidence-based guidelines and guidance;
• assisting countries in intensifying the efforts of their national HIV/AIDS programmes;

• mobilizing broad partnerships at all levels;

• contributing to the strengthening of national health systems; and

• assisting countries in monitoring and reporting on programme progress.

Strategic information is critical for tracking the course of the HIV epidemic and for assessing the effectiveness of national response. Strategic information also provides an essential basis for guiding policy development and for improving the delivery of services. The health sector has a key responsibility for generating and promoting the use of strategic information.

While the quest for new knowledge must continue, we have to be aware that there continues to be a wide gap between available know-how and its application. Therefore, researchers should pursue HIV research based on a careful analysis of this gap. Research addressing equity and benefitting marginalized populations should receive high priority.
Ladies and gentlemen;

This Congress is also intended to further strengthen the bond of collaboration among all stakeholders. Your effective collaboration will help operationalize the available interventions in bringing much-needed services to all affected people. Only when we have reached, treated, and cared for every affected man, woman and child can we really think of achieving the MDGs.

Your deliberations during the past few days have provided necessary information and updates. You have gained ideas for further enhancing your efforts to tackle more effectively HIV, TB and STIs. You have reaffirmed your collective commitment to halting and reversing the HIV epidemic. I wish you all the best in your ongoing fight against this scourge.

Finally, I conclude by expressing my sincere gratitude to the Government of the Republic of Indonesia for hosting this important event in this beautiful city of Bali.

Thank you.