



In the Name of God, the Compassionate, the Merciful

Address from

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to the

**SEVENTEENTH INTERCOUNTRY MEETING OF NATIONAL AIDS
PROGRAMME MANAGERS**

Sana'a , Yemen, 5–6 November 2007

Ladies and Gentlemen,

It is a great pleasure for me to welcome you to the Seventeenth Intercountry Meeting of National AIDS Programme Managers. I would like to thank His Excellency Dr Abdulkarim Rasa'a, Minister of Health and Population of Yemen, and the National AIDS Programme team for their kind hospitality and their continued good collaboration. We are very pleased to be able to hold this years' National AIDS Programme Managers' meeting in the culturally rich and beautiful town of Sana'a.

I would like to welcome also our colleagues from WHO headquarters in Geneva and our partners from United Nations sister agencies, and other international organizations, who accepted our invitation to share their experiences with us in this meeting.

The programme this year will focus on three important topics. In line with discussions and recommendations made during your meeting last year in Amman, the first topic addresses the cost of antiretroviral medicines and approaches to lowering prices. The second topic takes stock of efforts made in the Region to monitor progress toward universal access to HIV prevention, treatment and care in the health sector. With the third topic we will open the discussion on ways to support adherence to antiretroviral therapy. This has important implications for effectiveness of therapy and development of drug resistance. I am sure the technical content of the meeting will be of high quality and I hope this will have a positive effect on the performance of the national programmes.

Dear colleagues,

In the past few years, efforts and funds invested in expanding the health sector response to the HIV epidemic in the Region have increased substantially. These efforts have resulted in noticeable achievements on the ground in terms of availability of HIV prevention and care services.

For instance, in the area of HIV care and provision of antiretroviral therapy, I am pleased to inform you that the majority of countries in the Region, including low-income countries, are offering both highly active antiretroviral therapy and voluntary HIV testing and counselling services. However, antiretroviral therapy coverage, in terms of the *estimated* numbers of HIV cases in need of treatment is just 6%. This is the lowest coverage globally. This is in stark contrast to the almost 80% coverage for *known* HIV cases needing treatment. Obviously, there are tens of thousands of people living with HIV in our Region who either do not know that they are HIV infected and that they would benefit from treatment, or, who know of their HIV infection but do not access treatment. We urgently need to further expand service availability and, at least as importantly, we need to critically examine whether existing services really are accessible to the most affected and vulnerable, and respond adequately to patient's needs. This is particularly important as stigmatizing and discriminating attitudes against people living with HIV are still highly prevalent, even among health professionals.

The Regional Office will continue to emphasize advocacy for rational and evidence-based interventions and national capacity-building in the provision of HIV health sector services. WHO's regional office and country office staff have been partners to many of you in your efforts to develop and improve service delivery.

Dear colleagues,

At this point, let me commend the notable efforts of Yemen to make antiretroviral therapy and voluntary HIV counselling and testing available to its people. The Regional Office has supported Yemen to develop policies and guidelines for testing, treatment and care and to build the capacity of existing health care facilities to integrate HIV services using the Integrated Management of Adolescent and Adult Illness approach. Yemen has recently established its first two antiretroviral treatment sites, and seven voluntary counselling and testing centres. Introducing these services has significantly increased the number of people living with HIV who are receiving treatment and care.

I hope that Yemen will continue to make steady progress on its way towards universal access, and I assure H.E. Dr Abdulkarim Rasa'a and his team that the Regional Office is strongly committed to supporting Yemen in its efforts to face the HIV epidemic. It is one of the Region's priority countries in this regard.

Dear Colleagues,

In spite of our efforts and achievements, the number of HIV infected people in the Region continues to rise. The number of people living with HIV is estimated to have reached 670 000 by the end of 2006, of whom 100 000 were infected in 2006 only.

This indicates that we must seriously intensify our efforts before we can stop the progress of the epidemic. I am confident that, together, we can reach this stage.

I wish you a successful meeting and a pleasant stay in Sana'a.

Thank you.