WORLD HEALTH ORGANIZATION
Regional Office for the Eastern Mediterranean
ORGANISATION MONDIALE DE LA SANTE
Bureau régional de la Méditerranée orientale

بسم الله الرحمن الرحيم

منظمة الصحة العالمية
المكتب الإقليمي لشرق المتوسط

In the Name of God, the Compassionate, the Merciful

Address by

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WHO EASTERN MEDITERRANEAN REGION
to the
SECOND SCIENTIFIC CONFERENCE OF SEXUALLY TRANSMITTED DISEASES (STDS) – EPIDEMIC OF THE ERA
Mukalla, Yemen, 1–4 February 2010

Ladies and Gentlemen,

It gives me great pleasure to attend this important conference which addresses important and crucial health issues in our Region, namely HIV/AIDS and sexually transmitted infections.

The most recent UNAIDS/WHO estimates indicate that, by the end of 2007, the estimated number of people living with HIV (PLHIV) in the Eastern Mediterranean Region had reached 530 000 (420 000–700 000), and that an estimated 55 000 (28 000–110 000) new HIV infections occurred in 2007[1]. Most countries in the Region report low levels of HIV epidemic in the general population and less than 5% in key populations at increased risk. However, lack of information on HIV prevalence among populations at increased risk, such as injecting drug users, sex workers and men having sex with men, may mask higher rates in these groups.

In 2008, progress towards the establishment of effective HIV surveillance systems continued. An increasing number of countries included community-based surveys among key populations at risk in their HIV surveillance activities. But still there are large information gaps with regard to populations at increased risk in most countries in the Region. Accordingly the Regional Working Group on HIV surveillance, with the participation of WHO, UNAIDS and World Bank, continued implementing its joint workplan for strengthening HIV surveillance in countries of the Region.

[1] 2008 estimations will be soon receive from HQ and inserted accordingly

Ladies and Gentlemen,

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 antiretroviral therapy provision, I am pleased to inform you that the majority of countries in the Region – including low-income countries – are offering highly active antiretroviral therapy and voluntary HIV testing and counselling services. However, the coverage of antiretroviral therapy in terms of estimated numbers of HIV cases in need of treatment is 7%.

This is the lowest coverage globally. It contrasts with an 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, or who know of their HIV infection but do not access treatment. We urgently need to critically examine whether existing services are really accessible to the most affected and vulnerable. This is particularly important as stigmatizing and discriminating attitudes against people living with HIV are still highly prevalent in our region, even among health professionals.

Ladies and Gentlemen,

Sexually transmitted infections (other than HIV) cause considerable mortality and morbidity in both adults and newborn infants and amplify the risk of HIV transmission. In fact, for several decades, sexually transmitted infections have ranked among the top five categories for which adults in developing countries seek health care services. STI surveillance is limited or not established in most countries of the Region. Thus, reliable data on sexually transmitted infections are not often available. WHO has estimated that around 10 million new cases occur every year in the Eastern Mediterranean Region.

With the aim of accelerating efforts for the prevention and control of sexually transmitted infections at regional and national level, the Regional Office developed the regional strategy for prevention and control of sexually transmitted infections 2009–2015. The strategy was developed during 2007–2008 through a consultation process and endorsed by the Regional Committee for the Eastern Mediterranean at its 55th session. It takes into account the diverse epidemiological, cultural and socioeconomic situations of countries in the

Region. I am convinced that the objectives of the regional strategy can be achieved if all stakeholders, namely Member States, international organizations, civil society and UN agencies at national and regional level, join efforts and invest in its implementation. In this case, the strategy will definitely contribute to achievement of the Millennium Development Goals.

Ladies and Gentlemen,

I wish to acknowledge the notable efforts made in Yemen. The national programme for HIV/AIDS in Yemen is expanding prevention, care and treatment services, prioritizing these interventions to populations infected and those most at risk of exposure to HIV. In the past 2 years, 250 patients have been receiving treatment from five newly established sites providing antiretroviral therapy. Nineteen sites providing voluntary testing and counselling services were established in various governorates and four sites were established for prevention of mother-to-child transmission of HIV.

WHO has played a key role in providing technical assistance to scale up HIV/AIDS interventions in the health sector. Currently WHO, in partnership with UNAIDS and World Bank, is supporting the development of a national operational plan 2010–2011 for implementation of the National Strategic Framework 2010–2015. The operational plan, the first of its kind in HIV is aimed at aligning national resources into one action plan under one framework.

We wish Yemen more achievements in this context, and I assure H.E Dr Abdulkarim Rasa'a and his team that the Regional Office is committed to supporting Yemen in its efforts to face the HIV epidemic, being one of the Region's priority countries.

Finally, I wish you a successful conference and a pleasant stay in Mukalla.

Thank you.