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Geneva, 21 May 2009 Press release

## UNAIDS calls for a virtual elimination of mother to child transmission of HIV by 2015

UNAIDS' executive director meets Ministers of Health and the UN Secretary General during the World Health Assembly in a bid to accelerate progress towards universal access

**GENEVA, 21 May 2009** - During the week of the World Health Assembly, UNAIDS' executive director met with more than 80 Health Ministers to underscore UNAIDS' commitment in supporting countries to achieve their universal access goals.

UNAIDS outlined key priority areas in which joint action by the United Nations will make a significant difference to the AIDS response and a positive contribution to the broader development agenda. Realising results in the identified areas will have a direct impact on halting and reversing the AIDS epidemic.

Many of the priority areas call for urgent and effective actions which save lives including preventing the transmission of HIV from mothers to their children and providing ongoing care and treatment for women, their partners and their children.

Evidence shows that timely administration of antiretroviral drugs to HIV - positive pregnant women significantly reduces the risk of HIV transmission to

their babies. It is a proven, inexpensive, and effective intervention. Despite this, latest estimates show that in 2007, only 33% of HIV - positive pregnant women received the necessary treatment and only 21% of women in low - and middle-income countries were tested for HIV as part of their antenatal care. Progress in this area can only be achieved by integrating programmes which prevent the transmission of HIV from mothers to their children into the broader reproductive health agenda.

"We can prevent mothers from dying and babies from becoming infected with HIV. That is why I am calling for a virtual elimination of mother to child transmission of HIV by 2015," said Michel Sidibe, Executive Director of UNAIDS. "This is one of the main priority areas for UNAIDS, UNICEF, WHO and UNFPA to act on."

Another focus area will be to prevent people living with HIV from dying of tuberculosis. TB is a preventable and curable disease yet it is one of the leading causes of death for people living with HIV. Around 80% of people living with HIV are thought to be co-infected with TB in sub-Saharan Africa yet globally only 2% of people living with HIV were screened for TB in 2007. Diagnosing and treating TB for people living with HIV will be a vital step forward in the response.

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The other priority areas include: ensuring people living with HIV receive life saving treatment; protecting drug users from becoming infected with HIV; removing laws, policies, practices, stigma and discrimination that block effective responses to HIV; stopping violence against women and girls; empowering young people to protect themselves from HIV; and enhancing social protection for people affected by HIV.

The ultimate impact of joint action in these areas will be to avert HIV infections and deaths from AIDS. UNAIDS will commit human and financial resources to scale up joint programmes of support, and clear accountability indicators will be developed to track progress.

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UNAIDS is an innovative joint venture of the United Nations, bringing together the efforts and resources of the UNAIDS Secretariat and ten UN system organizations in the AIDS response. The Secretariat headquarters is in Geneva, Switzerland - with staff on the ground in more than 80 countries. The Cosponsors include UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, ILO, UNESCO, WHO and the World Bank. Contributing to achieving global commitments to universal access to comprehensive interventions for HIV prevention, treatment, care and support is the number one priority for UNAIDS.

Visit the UNAIDS website at www.unaids.org

## **MANAMANAMANAMANAMANA**

Bangkok, 29 June - 1 July, 2009

# REGIONAL CONSENSUS MEETING ON DEVELOPING A COMPREHENSIVE PACKAGE OF SERVICES TO REDUCE HIV AMONG MEN WHO HAVE SEX WITH MEN (MSM) AND TRANSGENDER (TG) POPULATIONS IN ASIA PACIFIC

Dr. Wong Ka Hing

For those work on and dedicated to the cause of HIV/AIDS, emerging and re-emerging HIV infections among men who have sex with men (MSM) has represented a huge global challenge since the last few years. In the Asia Pacific Region, highly concentrated severe but still rising epidemics among MSM had

been documented in many countries. On the other hand, lack of effective interventions due to all reasons calls for urgent actions to tackle this public health crisis.

In February 2009, the WHO Regional Office for the Western Pacific Office (WPRO), United Nations Development Programme (UNDP), Joint United



Nations Programme on HIV/AIDS (UNAIDS) and the Department of Health, Hong Kong SAR (China) co-hosted a regional consultation aiming to strengthen the health sector response to HIV among MSM and Transgender (TG) throughout the region, with attendance by over 100 participants from various sectors. As part of the outcomes of the meeting, the



participants "recognised the need for a widely endorsed, single, comprehensive regional reference package to better inform national responses".

Consequently, a Regional Consensus Meeting on Developing a Comprehensive Package of Services to Reduce HIV among MSM and TG Populations in Asia Pacific was held in Bangkok from 29 June to 1 July 2009. This Meeting was co-organised by the UNDP, WPRO, US Agency for International Development (USAID), United Nations Educational, Scientific and Cultural Organisation (UNESCO), Association of Southeast Asian Nations (ASEAN) Secretariat and Asia Pacific Coalition on Male Sexual Health (APCOM). It was attended by some 30 country participants of health officials and community people, and about 40 representatives and resource persons of international/United Nations (UN) agencies, multilateral and other organisations.

The Meeting aims to be a platform for discussion among government and civil society partners to reach consensus about the basic components of a "comprehensive package of services" to prevent HIV and provide treatment, care and support for MSM and TG in the region. By building on collective efforts and experiences of national AIDS responses and reviewing existing interventions implemented in the region over the past several years, this process includes an overview of key evidence-based interventions and strategies. Hence the specific objective was to reach a consensus among government and civil society partners on the components of a comprehensive package of HIV-related services and supportive interventions for MSM in Asia and the Pacific, as a basis for national responses.

A Workshop on Advocacy and Resource Allocation for Comprehensive MSM and HIV Responses was held

back-to-back following the Consensus Meeting. The workshop aims to produce an advocacy product that will allow users to identify gaps in baseline information, test assumptions and produce local costing estimates for a scale-up of the comprehensive response to HIV among MSM, and to understand the data sources and means of collection, costing calculations and estimation methods so that a comprehensive package of services can be adopted in other countries and sub-regions. Hong Kong participated in the Consensus Meeting but not the Workshop that follows.

The three-day Meeting was organised under thematic sessions, namely agenda setting, sharing of national frameworks, comprehensive HIV prevention, health sector response strengthening, creation of enabling environment, strategic information and consensus development. The topical parts were dealt with by background technical information presentation by experts/resource persons, followed by small group discussions and report-back. Small group sessions entail one overall and 3-4 specific groups of each theme for discussion by participants, with the assistance of facilitators.

This well-organised Meeting proves to be successful in enhancing sharing, discussions and finally the formulation of a draft consensus statement. A regional collaborative approach is enshrined from the organisation and conduct of the Meeting. It is hopeful that concrete recommendations on the comprehensive package of services will enable each country to adopt and adapt per its common as well as unique situation, for bettering prevention, care and control of HIV among MSM and TG in the Region.



## The 9th ICAAP in Bali, August 2009



The 9th International Congress on AIDS in Asia and the Pacific (ICAAP) was held in Bali, Indonesia from 9 to 13 August 2009. The theme of the Congress was "Empowering People, Strengthening Networks". The Congress aimed to shed light on new efforts and strengthen bonds in the international response to AIDS, and provided a platform for regional networking, with participation from countries in the region. Over 3,800 delegates from some 65 countries in the region attended the Congress. Pre-Congress Community Forums targeting different vulnerable groups were held on 8 August 2009. Following the Community Forums, the 5-day Congress primarily featured opening and closing ceremonies, plenary sessions, oral sessions, poster presentations, skills building workshops, symposia, satellite meetings, booth exhibitions and community village.

One big topic in the Congress was about barriers, both from legal, language and discrimination. For instance, frontline workers from various countries in the region, especially from those more conservative ones, have reported that prevention work among certain vulnerable groups have been hindered by laws, curbing people from reaching available services like regular check-up, methadone programmes or localized social supporting services. Hong Kong, being a more modernized region, still faces certain legal barriers when it comes to the HIV prevention work among certain target groups like commercial sex workers and clients. Discussions in the Congress might give hints on how other regions are handling the conflicts between the prevention effort and enforcement of related laws.





Twenty local workers and researchers attended the 9th ICAAP, and made over 10 official presentations in oral, poster, satellite meetings and other sessions. In particular, oral presentations titled "Universal HIV Antibody Urine Testing in Methadone Clinics (MUT)" and "Utilization of Rapid HIV-1 Testing for Women in Labour with unknown HIV status" were made in the Congress by two medical doctors from Special Preventive Programme (SPP) respectively. Eight posters were put up by SPP regarding issues about HIV prevention, clinical aspect and surveillance projects. A satellite meeting was held on 11 August 2009 for representatives in the region to share information about latest epidemic and it was attended by representatives from Mainland China, Hong Kong, Japan, Taiwan, Singapore, Malaysia and Thailand. The Red Ribbon

Centre also ran a booth to showcase the local concerted response to the MSM epidemic. The theme of the booth, "Hong Kong Story", aimed to give a comprehensive idea of how various stakeholders worked together to respond to the MSM epidemic locally and in the region. Posters and other souvenirs of the Syphilis Awareness Campaign 2009 were distributed at the exhibition venue.

A report-back seminar was hosted by Hong Kong Advisory Council on AIDS on 17 September 2009 for local participants to share with other AIDS workers about the experience gained in the Congress. Nine speakers presented in the seminar about HIV policy, strategy, prevention in targeted populations, treatment and care and research work. Discussion on various topics and on how experience earned could be applicable in local context of HIV prevention has been made in the seminar.

After all these fruitful discussions and sharing, hopefully more refreshing ideas and skills could be reiterated into current work on HIV prevention and treatment. We shall expect some meaningful changes and updates in the next ICAAP in Busan, Korea in year 2011 or other platforms elsewhere.

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# Red Ribbon Centre visited by students from CUHK and Yale University

### **Chidimma and Oscar**

This summer, Chidimma Osigwe from Yale University and Oscar Wong from CUHK participated in the Yale China Association/New Asia College Public Service Exchange Internship, which allowed them to explore the treatment of AIDS from a global perspective both in New Haven, Connecticut in the United States and in Hong Kong. The service internship brought them to visit the Red Ribbon Centre for four weeks in July.

"We were both interested in viewing the treatment of AIDS within the two separate, cultural communities

and this visit was unique in that two different aspects of HIV treatment were explored. In New Haven, we were able to see the more clinical aspects in a running hospice, whereas at the Red Ribbon Centre, we were able to engage in the public health aspect and focus in on a target area, men who have sex with men (MSM). The MSM community is one that sees the largest numbers of HIV/AIDS transmission throughout the world. Our project at the RRC attempted to examine the link between discrimination and privacy law and access to HIV/AIDS services in Hong Kong.

The project, titled, "Legal Environment & Access to HIV/AIDS Services: the MSM Perspective," was an offshoot of this year's World AIDS Day theme of "Universal Access and Human Rights." The focus of the theme is to draw attention to legal protection for discrimination against individuals living with HIV and other marginalized groups. Currently, worldwide, there is critical need to protect human rights and attain services for everyone in terms of HIV treatment, care, and support. There are many countries whose laws and policies impede access to HIV services. UNAIDS reports that 59 countries still have laws that restrict the entry, stay and residence of people living with HIV based on their positive HIV status only, discriminating against them in their freedom of movement and right to work. Laws that are currently enacted to protect HIV patients from discrimination are often not fully implemented or enforced.

At the Red Ribbon Centre, this topic was especially of interest because of its role in provision of HIV/AIDS services in Hong Kong. We were tasked with investigating the MSM perspective on discrimination and privacy ordinances and how these perceptions would influence the way in which MSM individuals would go about approaching the available resources. In order to achieve this, we conducted several personal interviews within the Hong Kong community, set up through various Hong Kong NGOs such as CHOICE and Rainbow,

and compiled the results. Overall, the MSM individuals we interviewed felt that discrimination was not too rampant, which was positive to hear coming from a conservative society (as mentioned by the interviewees). Because of this sense of having a positive environment in Hong Kong, we were able to conclude that the legal and social environment does not seem to be inhibiting or to form a major barrier to access to services."

Prior to the four week visit in Hong Kong, Chidimma and Oscar completed an internship at Leeway, an AIDS nursing home in New Haven, where they had the opportunity to interact directly with palliative care for HIV/AIDS patients. Both of them found it inspirational to learn more about the general attitudes towards living and the virus itself. Both Oscar and Chidimma value community service, with Oscar planning to become a lawyer and Chidimma aspiring to become a health professional. They hope that their experiences will allow them to continue to contribute to the study of health policy around the world and to pass on the hope that one day, there will be a cure.

Remarks: Chidimma Osigwe just graduated from Yale University in May of 2009 and Oscar is a third year law student at New Asia College at the Chinese University of Hong Kong. They joined a summer exchange program through Yale China and new Asia College and completed their visit at the Red Ribbon Centre in July, 2009.

