

The Node *... where a leaf arises from a stem*



The Node is a bilingual publication dedicated to global HIV/AIDS issues by Red Ribbon Centre, the UNAIDS Collaborating Centre for Technical Support

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Asia-pacific nations pledge equal partnership with communities for accelerated regional AIDS action

Dressed in a striking blue and red shalwar kameez (traditional dress from South and Central Asia), Akkai, a transgender woman from Bangladesh, steps onto the stage. Turning to her audience of government officials from Ministries of health, justice, public security, drug control, social protection; United Nations officials; and fellow members of key populations most affected by HIV, she started to sing:

"I born as me/ My feelings changed... / I started behaving like a girl / I started walking like a girl / I started dressing as a girl / When my parents forced me to stop myself / I was beaten up / I was locked up / I was tortured.../ ...There was nobody to ask these things / ... / This kind of torture, violence, harassment / Is not faced only by me / Where to live?/ Where to share?/ Where to survive our life?"

Joining the scene, the coordinator of the Women's arm of the Asia-Pacific Network of people living with HIV explained: "I have been living with HIV for 17 years. Fortunately I have had access to treatment. But now free-trade agreements are compromising access to essential medicines," she said. "Eighty percent of generic medicines are made in this region. Without access to affordable medicines we cannot get to zero," she added.

These personal experiences were two of many

shared by people living with HIV and key affected populations at the United Nations Economic and Social Commission for Asia and the Pacific (UN ESCAP) high-level intergovernmental meeting held in Bangkok, Thailand from 6-8 February 2012. The meeting was an opportunity to review the region's progress towards international targets on AIDS.

"For the first time in history we have the possibility to end AIDS and Asia-Pacific nations have shown we can lead the world in making an impact. But we cannot ignore the challenges our region faces and how these can jeopardize our ability to progress," H.E. Ratu Epeli Nailatikau, President of Fiji, who underlined his long-term commitment and leadership on HIV as Chair of the high-level talks.

Representatives from the most-affected communities urged government delegations from Asia-Pacific nations to recognize the existing challenges in accessing HIV services posed by punitive laws and practices, threats to continued availability of HIV treatment and widespread stigma and discrimination. They also called upon governments to work increasingly with communities to ramp-up action to reach HIV goals.

The call to action was heard. By the end of the three-day talks, co-convened by UNAIDS and other UN partners, the nations present endorsed a framework

to fast-track regional action on AIDS towards the achievement of global targets and commitments by 2015. Countries agreed to create ‘spaces’ for key affected communities—including people who use drugs, men who have sex with men, people who buy and sell sex, and transgender people—to be involved in the development of practical solutions to legal impediments and HIV service scale-up at the policy and programmatic level.

“It was recognized here that we have to find new ways to reach the maximum amount of people in the short time we have before 2015,” said UNAIDS Director of the Asia-Pacific Regional Support Team, Steven Kraus. “And there is no question; this must be done hand-in-hand with the community.”

In recent years, Asia and the Pacific has experienced significant progress in reduction of new HIV infections, increase on numbers of people receiving antiretroviral treatment and expansion of programmes to reach key populations most at risk.

Examples given by a number of countries at the Bangkok talks illustrated that scaled up HIV services coupled with intensive engagement of key affected populations, have led to declining epidemics. In Thailand for example, the transgender people-led

initiative “Sisters”, which provides social services and support to transgender people in the Pattaya area reports that HIV incidence fell from 12 to 8% among people using its services in the last 5 years.

With such examples of progress, the importance of developing the next generation of community leaders is a central regional priority. The new Asia-Pacific framework for accelerated action underlines that young people from key affected populations must be heard, heeded, and have space at the policy and programme tables.

Emphasizing the readiness of young people most affected by HIV to take on a leadership role in the region’s future HIV response, Coordinator of Youth LEAD, the regional network for young HIV key affected populations, Thaw Zin Aye said: “Young people are taking ownership of the AIDS response and we are committed to carrying on the legacy. We urge governments to continue taking action with us.”

The endorsed regional framework emphasizes the need to share good practices and lessons learned in implementing the measures and commitments related to HIV. Asia-Pacific countries also requested UN ESCAP, UNAIDS and other cosponsors to support implementation of the road map.



The 15th Bangkok International Symposium on HIV Medicine

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The annual, this year 15th, HIV symposium organized by the HIV Netherlands Australia Thailand Research Collaboration (HIV-NAT) was held from 18 to 20 January 2012 at the Queen Sirikit National Convention Centre at Bangkok, Thailand. With the objective of providing HIV health care workers and affected community an overview of HIV and its related diseases, the number of participants of this Meeting has been ever growing, to over 2500 in recent years, drawn from Thailand and countries in the Asia-Pacific Region and beyond.



Emphasis on clinical HIV medicine is a key feature of this Symposium. The Meeting covered advances in key areas of the field, by local experts as well as speakers from US, United Kingdom, Australia, the Netherlands, Switzerland, Cambodia and Hong Kong. Antiretroviral therapy is assuming a greater and greater role in HIV response - not only for treatment of infected individuals to restore health and reduce AIDS or non-AIDS complications, but also in its increasingly established benefit of preventing onward HIV transmission. However, resource constraint is one major impediment to reach the global target of expanding treatment to 15 million infected people. Cutting the price of drugs, improving diagnostics efficiency, exploring alternatives to implement treatment services and identifying new resource income are amidst the pillars for its achievement advocated by World Health Organisation. Newer HIV drugs in the pipeline which may add to the armamentarium in coming future were reviewed. Application of resistance testing in the Asia Pacific region to enhance treatment efficacy was also discussed.

Recent developments in the management of specific opportunistic infections, notably tuberculosis together with HIV treatment was one hot topic. On the other hand, improved survival of HIV-infected adults or children upon antiretroviral therapy has led to emergence of more non-AIDS new conditions over time, many of which are common in the ageing population. This poses big new complexities and challenges to optimising long-term care to the patients and their health care providers. Besides plenary talks, the Symposium featured parallel workshops to address contemporary clinical issues. There was also a great debate on “PreP should be offered as part of standard HIV prevention for MSM”. In the end the audience voted the Con side to be winner of the debate.

All in all, the Symposium is a good training forum for AIDS health care workers in practice. It has served to enhance the capacity to tackle regional demand on HIV clinical care and management.



HIV-infected mothers: “Counselling is as important as medical care” UNICEF supports PMTCT peer counselling in Myanmar

It is not uncommon to see patients being reluctant to seek medical care, but to HIV-positive mothers-to-be, this can possess a double consequence as virus can be transmitted to their babies. To prevent the mother-to-child transmission of HIV (PMTCT) and achieve an ‘AIDS-free generation’, UNICEF supports PMTCT peer counselling in Myanmar, one of the Asian countries with most people living with HIV. The programme encourages mothers-to-be to take HIV test and receive treatment before it is too late, also support their physical and psychological needs.

According to the *Report on the Global HIV/AIDS Response* from UNICEF, UNAIDS and WHO, there are at least 200,000 people living with HIV in Myanmar, of which 81,000, meaning more than 40%, are women aged 15 or above.

HIV infection - a devastating blow

HIV/AIDS stigma and discrimination still exist in many low and middle income countries. Ma Thida (not her real name), a mother of four, was found HIV positive when she delivered her fourth daughter, Shwe, but her husband covered it up because he worried too much. “Shwe had to take pills twice a day since she’s born. I was told the pills were ‘vitamins’ but they were actually ARV drugs.”

Ma Thida realised what happened after 45 days she gave birth to Shwe, but to her it was still like a devastating blow. For a long time she had so many questions banging in her head. Those questions were left answered until she joined the UNICEF-supported PMTCT peer counselling group, where she met other HIV-diagnosed mothers and became stronger. “Since then, I know what I should do,” she said.

“Peers are important as ARV”

With UNICEF’s support of antiretroviral treatment, Ma Thida’s daughter Shwe, has not infected the virus through breastfeeding. Ma Thida is now medically stable with the treatment and Shwe is growing up healthily, reaching her fifth birthday now. “I know I have received so much support and I would like to give back and work for some mothers like me. I wish all babies HIV-free,” Ma Thida said while she completed her training to become one of the PMTCT peer counselors.

Once Ma Thida met a pregnant woman who was worried about her HIV status very much and did not dare to take the HIV test. “I gave myself as an example, to encourage her that even she were HIV-positive, PMTCT can still protect her baby free from virus.” She said, “For a HIV-positive person, moral support and counselling are as good and important as giving ARV.”

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Because of UNICEF-supported PMTCT peer counselling group, Ma Thida became much stronger and even joined to be one of the peer counselors and helped more HIV-infected mothers.

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UNICEF Charity Run 2011 attracted 13,000 participants, not only professional runners, but also many children and young people.

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Visit HK to support “Unite for Children, Unite against AIDS.”

Since 2005, the Hong Kong Committee for UNICEF has organised UNICEF Charity Run, to raised funds for UNICEF’s ‘Unite for Children, Unite against AIDS’ global campaign. On 27 November 2011, Ma Thida visited Hong Kong with her daughter Shwe to support and share their experience in PMTCT programme. The event was supported by over 13,000 runners and over HK\$8.5 million was raised to purchase more than 900,000 ‘HIV Test Kits’, which enable HIV-positive mothers-to-be to know about their situation at an early stage, promptly receive essential treatment and care to prevent the transmission of HIV to their babies.

To know more about the UNICEF's work on children & AIDS, please contact us:

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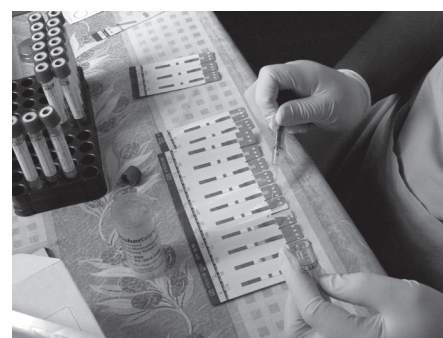
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Over HK\$8.5 million was raised in the UNICEF Charity Run 2011 to purchase more than 900,000 ‘HIV Test Kits’.

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