



STATEMENT BY:
DR. NAFSIAH MBOI
SPECIAL ENVOY
OF THE COORDINATING MINISTER FOR PEOPLE'S WELFARE

BEFORE
THE HIGH LEVEL MEETING AND COMPREHENSIVE REVIEW
OF THE PROGRESS ACHIEVED
IN REALIZING THE TARGETS SET OUT
IN THE DECLARATION OF COMMITMENT ON HIV/AIDS

Check against delivery

New York, 2 June 2006

PERMANENT MISSION OF THE REPUBLIC OF INDONESIA TO THE UNITED NATIONS

325 East 38th Street, New York, NY 10016 • Tel. (212) 972-8333 • Fax. (212) 972-9780

www.indonesiamission-ny.org email: ptri@indonesiamission-ny.org

Mr. President,

It is an honor to be here and to have an opportunity to address this distinguished and important gathering. Let me start by paying tribute to activists in my own country and around the world who have been working hard to assure people affected by and infected with HIV of the enabling environment, services, and support they need and to which they are entitled. I also want to give a special salute to all our friends, both women and men, who are HIV positive and who have chosen to contribute time and efforts to educating all of us about the challenge of AIDS and have been helping to provide the support and services urgently needed in different national communities.

Let me also express special thanks to Secretary General Kofi Anan for his example of personal commitment and leadership in the field of HIV/ AIDS. Even though we are on the other side of the world, we know of his commitment to the battle against HIV/AIDS and we are inspired by his example.

Mr. President,

As we review the global situation, we take comfort in the good news being reported. Several countries, in various parts of the world, have succeeded in demonstrating to all of us that the epidemic can be brought under control. However, it is also true that the combined efforts of the global community have not yet been sufficient to change the course of the epidemic.

Let me turn now to Indonesia's experience with HIV/AIDS. As I read the Secretary General's report on the progress being made in responding to the global epidemic since the 2001 special session, I was struck by some similarities between Indonesia's experience and the global situation.

As in the rest of the world, the face of the epidemic is diverse across our large, multi-island nation.

In most parts of the country, the epidemic is classified as a "concentrated epidemic". However, in some areas infection has already spread more widely into the general public. In those areas, we are addressing challenges posed by a "generalized epidemic". While the majority of new infections in Indonesia are related to injecting drug use, causing 60-80% of new infections, sexual transmission continues to be a major cause of infection in some areas.

As with the global epidemic, HIV first appeared among men in Indonesia, but over time the percentage of women infected has grown. The pattern of infection among other men and women now varies widely in different parts of the country. While, as of March 2006, 18% of those people diagnosed as positive were women, in some areas nearly 50% of newly reported infections has been among women.

These variations in mode of infection, shifts in gender susceptibility, and circumstances of people living with HIV call for care in analysis and programming, also flexibility and diversity in our response.

Mr. President,

Since the earliest days, in responding to the epidemic in Indonesia leadership has been at the Ministerial level under the guidance of the National AIDS Commission Chaired by the Coordinating Minister for People's Welfare. Leadership, management, and coordination at the sub-national level have been in the hands of local AIDS Commissions. These are multi-sectoral bodies made up of governmental representatives and NGOs. This structure has allowed latitude for local initiative and increasingly we see those in authority taking advantage of the opportunities presented by this arrangement. For example, in one area, the health services have come to the conclusion about the necessity to reorient their health service system to assure broader and more effective service for all and they have in fact done so. Analysis in another area has led to innovative HIV programming in a prison setting.

The broad framework for Indonesia's work is provided by a National AIDS Strategy. The Strategy emphasizes the importance of the values of family welfare and religion in combating the spread of HIV. At the same time, it provides strong support for a public health approach to HIV including condom promotion and harm reduction strategies for Injecting Drug Users (IDUs). Programming now includes needle syringe exchanges and methadone maintenance therapy. A Memorandum Of Understanding (MOU) between the National AIDS Commission and the National Narcotics Board signed in 2003 has been a milestone in overcoming legal obstacles to implementation of harm reduction among Injecting Drug Users.

Efforts to consolidate and scale up local activity have focused on the mobilization of governments and civil society at the provincial level and, more recently, at the level of 100 priority districts and municipalities, even in sub districts around the country.

While support from Indonesia's many partners, domestic and international, plays an important role in advancing our overall response to HIV/AIDS, it is encouraging to see both local and national budgets increasing from year to year. The national budget, for example grew from \$ 10 million to \$ 13 million between 2004 and 2005. The budgets of the six priority provinces that signed the Sentani Commitment in January 2004, increased more than four times between 2004 and 2005.

Since 2004, the central Government has fully subsidized all treatments for AIDS, including antiretroviral therapy. Treatment has reached almost 5,000 people thus far. Training of hospital personnel and doctors in the management of antiretroviral treatment has been underway for two years and continues through both the Ministry of Health and a growing network of qualified hospitals.

Mr. President,

Today I call on all of us to renew and fulfill the commitments we made in 2001. Indonesia will do her share. Indonesia's President himself, H. E. Susilo Bambang Yudhoyono, has expressed concern and proposed *reappraisal and restructuring of our national strategy in order to broaden and accelerate our response as well as strengthen responsibility and accountability*. A major asset in the battle against HIV/AIDS is the spirit of our people. Indonesia is blessed with a lively, hard-working community of positive people who inspire and challenge one another. In addition, we have been generously supported by our international partners sharing resources and technical expertise.

Today, *Insya Allah*, I ask God's blessing on the global community, as we struggle to carry out our commitments and defeat our common enemy, the HIV virus.

Thank you.