



**UNAIDS**  
JOINT UNITED NATIONS PROGRAMME ON HIV/AIDS

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**Ministerial Meeting on HIV and Development in Latin America and the Caribbean**

**ECOSOC Annual Ministerial Review  
Jamaica, 4-6 June, 2009**

**Opening session**

**Statement  
by**

**UNAIDS Acting Deputy Executive Director  
Mr As Sy**

*Her Excellency Ambassador Sylvie Lucas, President of the United Nations Economic and Social Council,*

*Honourable Rudyard Spencer, Minister of Health of Jamaica,*

*Honourable Andrew Holness, Minister of Education of Jamaica,*

*Excellencies, Ministers, Colleagues and Friends*

I Bring greetings from UNAIDS new Executive Director, Mr Michel Sidibe, who could unfortunately not be here due to longstanding commitments.

It's an honour and pleasure to be here because of the importance of this inter-regional meeting.

I congratulate the organisers for the arrangements made and for convening this important forum.

We usually start our statements by quoting the numbers and figures that attempt to communicate the reality of the epidemic. I will not quote numbers today, because there will be presentations about the numbers this afternoon. I will not quote them either because they hardly capture the human dimension of the epidemic.

My main message remains that we are still facing a global epidemic which calls for a global response, and we are not helpless. We can do something about it, that is a message of hope, that we can reach Universal Access for prevention, treatment, care and support.

Our message is also that there is no reason for complacency. AIDS lies indeed in many of the social, cultural, political and economic disfunctionalities in our societies, and more than ever before leadership and solidarity at all levels are needed.

Moving forward on the way to Universal Access to prevention, treatment care and support in this context is particularly challenging and the way will be different for different countries and regions and must be tailored to match the profile the epidemic in a given context.

Turning to Latin America and the Caribbean, progress has been accomplished in many areas; including prevention of mother-to-child transmission of HIV to the point that the the Caribbean is planning for the virtual elimination of vertical transmission of HIV by 2015; and comprehensive antiretroviral treatment programmes resulting in more and more people living with HIV living longer and healthier lives. In the area of blood safety, early in the epidemic the region moved quickly to secure national blood supplies. I commend you for this progress.

Yet, unprotected sex remains the main mode of transmission in the regions and prevention remains a challenge – in particular for most at risk groups. For every person starting antiretroviral treatment in 2007, 2 new HIV infections occurred.

The percentage of men having sex with men, sex workers, prisoners, substance abusers and young people reached by prevention programmes remains low in many countries. Where prevention programmes exist they are not tailored toward the these groups most at risk.

The limited achievement of prevention programmes can be explained by the widespread stigma and discrimination against people living with HIV and the most vulnerable groups – this leads to low demand for prevention services.

Another contributing factor is the existence of legal barriers which hinder the planning and implementation of specific prevention programmes among the most vulnerable groups. Sex work is prohibited in many settings where substance abuse is also illegal and prison populations have limited access to public health programmes relating to HIV.

To achieve universal access to HIV prevention, care, treatment and support – the key priority for the new Executive Director of UNAIDS, the regions should continue to scale-up its public health programmes and revise its laws which impact negatively on the most vulnerable groups identified as key players in the transmission of HIV in the region while at the same time working with civil society and community groups on social change. This is necessary in order to move societies towards a clearer understanding of human rights issues as they relate to the HIV public health approach.

The regions will continue to face a sustained HIV epidemic in the long term, unless they succeed in reducing stigma and discrimination and addressing the needs of the most vulnerable groups by protecting their human rights and repealing laws which hinder the effectiveness of the response to HIV.

UNAIDS has just released its Outcome Framework for the period 2009 to 2011 spelling out its vision of Joint Action for Results in 8 priority areas among its Co-sponsors and other partners, where I will single out 3 as particular relevant when focusing the resources available for the response in Latin America and the Caribbean:

1. Preventing babies from becoming infected and mothers from dying from AIDS, as we move towards elimination of vertical transmission of HIV and syphilis in the Caribbean;
2. Removal of punitive laws, policies and practices, stigma and discrimination that block effective responses to AIDS; and
3. Empower young people to protect themselves from HIV.

What does UNAIDS want countries to do?

1. Identify where progress is lagging behind e.g. targeted combination prevention programmes for most-at risk groups;
2. Put young people's leadership at the centre of national responses and provide sex and reproductive health education; and
3. Deliver on the broader human rights agenda, including in the areas of sex work and homophobia and create an enabling environment for people living with HIV and AIDS to live a productive life and be part of the solution.

What will the UNAIDS family do to assist the responses of countries in the regions:

1. Assist countries to produce more accurate and timely data on the epidemic as basis for evidence informed programming – getting to know where the next 1000 infections will be;
2. Provide guidance on how target prevention strategies to stop HIV transmission amongst populations most at risk to HIV infection - how to optimize these based on the best evidence available; and
3. Taking AIDS out of isolation – integration of services (e.g. for TB/HIV) – synergies must be established with action for all MDGs and the broader health and human rights agenda.

I am very much looking forward to our discussions over the next two days and I thank you for your leadership in the the response to AIDS. I wish us all very successful outcomes of this important meeting.

Thank you.