

# Talking points on AIDS in Eastern Europe

Michel Kazatchkine, Berlin, October 2017



- There has been much good news about AIDS in the last decade: globally falling incidence in many of worst affected countries, and great progress on treatment, with more than sixty percent of those needing treatment now receiving it.
- While we celebrate this progress, in Eastern Europe and Central Asia, we see continuous growth in the epidemic, in prevalence, incidence and mortality. Coverage of and investments in prevention interventions remain inadequate, placing hundred thousands of lives at immediate risk and the global response under threat.
- The epidemic in the region remains largely driven by unsafe injecting drug use and is intertwined with the epidemics of tuberculosis, multidrug resistant tuberculosis and hepatitis.
- Increasing numbers of heterosexually transmitted cases are also being

reported. Clearly, as sexual risks intersect with risks related to present or past injecting drug use, the potential for further expansion of the epidemic is increasing.

- Legal frameworks that criminalize drug use, sex work, same sex relations or that prohibit effective interventions, such as methadone, compound the risks and contribute to the epidemic's growth.
- Stigma is high. Combined with discriminatory laws and policies and hostile law enforcement practices, it is a major barrier to access to services for those most at risk.
- Prisoners are a particularly vulnerable population in the region.
- And increasing attention is now brought to the high vulnerability to HIV and TB of labor migrants in a region that represents one of the largest labor migration corridors in the world. Migrants work on a legal or illegal basis for short or longer periods of time in countries with hardly any or no access to HIV and TB services.
- All of these elements combine to create a highly toxic environment for responding effectively to HIV/AIDS in this region. And they exist against a background of economic disparities within countries, between the rich and the poor.
- We still have much to do to ensure that the tremendous programmatic knowledge we have about how to respond to concentrated epidemics is disseminated and more effectively translated into national strategies, plans of action and appropriate budgetary decisions.
- We need to get to antiretroviral treatment to everyone in need.
- We must take great care that our focus on treatment, including on "treatment as prevention", while tremendously important, is not misunderstood or knowingly misinterpreted, and does not come at the expense of the vital prevention work that we still have to do, not least in the region.
- We need to better leverage the authority and the credibility of the scientific and medical community in the region to communicate more powerfully at a political level.
- We need to do more to find common ground between politicians, public health practitioners, law enforcement officials and civil society. Such a dialogue must surely be guided by greater compassion for people, a belief in their value as human beings and their ability to contribute to society, as well as a better

understanding of the social and economic drivers of –for example - drug use.

- We need to equip the politicians, public health and law enforcement officials who are prepared to think differently with the tools and information they need to make the case for new approaches within their institutions.
- In the health sector, we have to link specialized AIDS care with primary health and social services and we need to build support for community and peer-based services, recognizing **once and for all** that these are a key component of the health care delivery chain. Working to increase the health and rights literacy of patients, PWID, sex workers other at-risk groups and their networks is also crucial.
- We need to maintain the international leverage and dialogue. We must do everything we can to ensure that our language and our actions within the region and outside it do not contribute to further isolating the region and worsening its epidemic.
- Finally, we need to remain positive, even in the face of daunting challenges. This means recognizing progress where it is happening, having faith in the people of the region, and remaining confident that, if they do what needs to be done, their fight against AIDS can ultimately be won.

Source: Videomessage for teh opening of the conference: „HIV in Osteuropa – die unbemerkte Epidemie?!“, Berlin, 17.10. 2017, von Michel Kazatchkine, UN Secretary General, Special Envoy on HIV/AIDS in Eastern Europe and Central Asia.