

Chairman's speech on the Official Presentation of the Report of the Commission on AIDS in the Pacific – "TURNING THE TIDE"

To the Executive Director of the Global Fund

Dr Michel Kazatchkine

Your Excellency Dr Michel Kazatchkine, CEO Ministry of Pacific island Affairs, Dr Colin Tukuitonga, Distinguished Guests, Ladies and Gentlemen, it is my pleasure to welcome you all to this Official Presentation of the report of the Commission on AIDS in the Pacific. Our region derives its name from the Latin word for peace, and we are rarely in the spotlight of the global stage.

I would therefore like to express my gratitude to Dr Colin Tukuitonga for arranging this ceremony to present the report of the AIDS Commission to the Executive Director of the Global Fund, Dr Michel Kazatchkine.

The Global Fund's substantial role in the war against HIV/AIDS has had a significant impact on preventing the spread of this plague throughout the world. There has also been a significant impact in our own efforts to contain this pandemic in the South Pacific.

It is a real privilege and honour for me today, as Chairman of the Pacific Aids Commission, to have this opportunity to officially present Dr Michel Kazatchkine the Commission's Report – "Turning the Tide".

I would like to begin by acknowledging the foresight of UNAIDS for establishing an independent Pacific Commission and extend our appreciation to Mr Michel Sidibe, Executive Director of UNAIDS, for the financial and technical support that his organisation has provided.

I must also acknowledge the important role of the first Chairman of the Commission – Dr Langi Kavaliku – who tragically passed away during the tenure

of the Commission. This report reflects the vision of Dr. Kavaliku who was a gentle and wise leader who encouraged us all to work in a way which “enhanced the capabilities of Pacific peoples to lead free and worthwhile lives”.

I would like to thank my fellow Commission members for the commitment and zeal that they have shown over the past two years. Each of them has demonstrated their passion and commitment, not only for this work, but for promoting the well-being of the peoples of the Pacific. I would also like to convey the appreciation of the Commission to Mr Prasada Rao, and his team of dedicated staff who provided invaluable assistance in the preparation and production of the report. .

I have been an AIDS champion for many years, but I found through my work with the Commission, that we all still have a lot to learn. We are proud that our report has brought together what is known and not known about AIDS in the Pacific. In undertaking our work, the Commission and its Secretariat reviewed over 500 documents; commissioned eight studies and undertook two surveys of the perceptions of Pacific people to HIV. Most importantly, we listened to people infected and affected by HIV and those who work closely with them.

We carried out extensive consultations in Fiji, Papua New Guinea, Solomon Islands, Samoa and New Caledonia. We also enlisted national, regional and global experts to review the data and to peer review the draft of the report.

Our main goal was to ensure that the report is precise and pertinent and that our recommendations were focused, relevant and practical. We began with a list of 70 recommendations but we kept working on them until we had a clear list of 26 priorities that will achieve major improvements in the prevention and treatment of HIV in the Pacific Region.

As a result of our wide-ranging studies and discussions, we have a few straightforward messages for Pacific leaders, our principal donors and stakeholders, as well as all those concerned with this work.

First, we still do not know enough about the nature of the epidemics in the Pacific: the estimated levels and distribution of HIV. We currently rely on case detection and small epidemiological studies. The countries which have the largest numbers of infections are those with the most comprehensive testing systems. We cannot be certain that other countries don't have a larger number of people living with HIV.

What we do know is that there are multiple and overlapping epidemics and that each country has its own pattern of infections. The main mode of reported transmission is unprotected sex with a small number of countries reporting a significant proportion of infections from male to male sex and injecting drug use. Across the whole Pacific region, women comprise the majority of reported cases. But, when PNG is excluded, almost half of all reported HIV cases are women.

Second, Pacific leaders can be complimented for acting early to support efforts to maintain low levels of infections across the region. Even Papua New Guinea, while facing a significant epidemic, has not, despite earlier predictions, experienced the scale and intensity some of the sub-Saharan African countries have had. But it is essential for leaders to be more actively engaged and translate their global and regional commitments into national action. There is however, no room for complacency.

Third, the Pacific has all of the vulnerabilities and risks which are associated with major epidemics: high levels of sexually transmitted infections; high risk behaviours including unprotected sex within multiple partnerships, transactional and commercial sex; pockets of injecting drug use; links between alcohol, drug use and unsafe sex; a young and highly mobile population; gender inequalities

and gender based violence; income inequalities and often poor access to health and education services.

Fourth, people living with HIV and their families are known to experience stigma and discrimination. The stigma and discrimination associated with AIDS can be much worse than the disease - deterring people from getting tested for HIV, robbing them of basic human rights and access to health care and preventing them from living a dignified life. While there are strong indications that stigma and discrimination is lessening as people understand more about HIV, we must all act to eliminate it completely. We must also ensure that our national legislation protects the rights of people living with HIV and does not criminalise behaviours or groups of people.

Fifth, vulnerable and poor-quality health services across much of the region restrict the capacity for HIV and STI diagnosis, reporting and treatment. Treatment for HIV, opportunistic infections, STIs and prevention of mother to child transmission must be integrated within a strengthened health care system.

Sixth, that national priorities must drive regional mechanisms and approaches and not the other way around. Regional action should focus on advocating regional commitment and providing technical capacity and resource mobilisation. Countries must focus on implementing programmes and be accountable for their performance. It is in this context that I appeal to all our Pacific leaders to initiate strong and time bound initiatives in order to implement the recommendations of the Commission in their countries.

Seventh, that given the global economic crisis and the uncertainty of sustained external funding, countries must ensure more efficient use of resources and improved aid effectiveness.

We must, before concluding, commend the achievements of the Forum Secretariat and the Secretariat of the Pacific Community (SPC).

We must however pay special tribute to you Dr Michel Kazatchkine, and especially for all the resources committed and the major work undertaken by the Global Fund to reduce the scourge of AIDS and to reduce the stigma and raise awareness of the need for more aggressive prevention regimes.

We must also thank all donor partners, including the New Zealand government, for the funding that has enabled effective national and regional programs.

Our final point, AIDS in the Pacific should not be seen as a burden which is diverting resources away from other priorities. AIDS should be used as an opportunity for unleashing a social agenda for addressing the inequalities, inequities and injustices in our societies. In crafting a new and effective response to HIV and AIDS, we have an opportunity to strengthen human rights and access to essential social services.

We must ensure that all people are regarded as important and cherished members of our communities, regardless of their social status or economic situations.

Thank you and God Bless,

Misa Telefoni Retzlaff
CHAIRMAN
Pacific Aids Commission
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