STATEMENT ON THE OCCASION OF WORLD AIDS DAY AT KHABARONLINE NEWS ROUNDTABLE

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Gary Lewis
UN Resident Coordinator

And

UNDP Resident Representative
Good morning.

I am very pleased to be here this morning to have a conversation with you on the subject of HIV and AIDS in light of the forthcoming day which commemorates world AIDS situation.

I have a number of things to say upfront but I will keep these general comments brief in order to allow maximum time for you to ask questions or share in a conversation.

I have worked at the United Nations for almost 30 years and during this time the international community has identified and attempted to address the problem of HIV – which brings so much suffering to so many of our sisters and brothers.

There have been a number of efforts through things like the Millennium Development Goals and through other efforts by general councils of the international community to try to mobilize the world’s efforts to counter HIV in the past 20 to 30 years.

As a result of that work, we have dealt a great blow to this public health tragedy.

In terms of the big numbers – the world has seen approximately 78 million people become infected with the disease since we first identified it.

About 38 million of these fellow citizens have since died and about the same number continue to live with HIV.

These are numbers for the entire planet. And what those numbers indicate is that the death rates among people who are living with HIV have declined significantly.

But still we have not triumphed because although we have bent the cycle of HIV infections, we have not broken it.

My message today is one of optimism because I believe that whereas we used to aim at halting and reversing the spread of HIV, now we can actually talk of ending it. Indeed, we believe we can end it by the year 2030. To do this, the world – and
the Islamic Republic of Iran – needs to embrace a strategy to close a number of gaps. And I will talk about four of these gaps.

The first is to aim at a situation where we have zero AIDS related deaths. AIDS related deaths have fallen from their peak in 2008 by about one third – at the global level. In the Islamic Republic of Iran, however, we have had approximately 5,000 registered AIDS-related deaths in total.

The question that we then have to ask is how do we do that? And I turn to the next aim which is to close gap for preventing new infections.

In 2013, we had 9,000 new infections and these infections are preventable, and I would like to talk about how we can close that gap.

In Iran, we have estimated about 75,000 people who are currently living with HIV, but only about 29,000 of them have been registered with some of these accessing care and treatment on a regular basis.

What we need to do is increase the availability of access to services – preventive services, treatment services, care and support services – for these individuals so that we raise the level of access from the current rate which is 15% to a much higher rate. We are hoping in excess of 90% of people will have access to these services.

Now the nature of the services that are provided in Iran are impressive, but they still do not reach enough of the citizens who need these services. When we have our open discussion I would like tell you a little bit more about what the United Nations is doing through the joint programme of support in collaboration with the Government and its third national strategic plan to rollout a number of services.

So far, I have talked about closing the gap in two areas – the issue of zero HIV/AIDS related deaths and closing the gap to zero new infections.

I would now like to talk about the last two gaps, and the first is the treatment gap which I talked about in outline before. The plain fact of it is that we are dealing – in Iran – with an HIV epidemic that is still generally concentrated among specific
at risk groups. Those groups include people who inject drugs, vulnerable men, and women who are also vulnerable.

But the nature of the epidemic in Iran is changing and the disease is becoming transmitted much more these days through sexual intercourse and consequentially through the transmittal of the disease through mother-to-child transmission.

For this reason, the United Nations is ready to support – and has indeed been supporting – the evolution of the Government’s strategy from the 3rd national strategic plan to the 4th which is focusing on key populations and treatment scale-up. But our programmes will also address the issue of preventing mother-to-child transmission.

The fourth area is an area that people often dismiss because it does not have a very strong technical evidentiary base to it. And that – ladies and gentlemen – is something that touches each and every one of us, every day. It is the way in which we address and treat and embrace those of our brothers and sisters who have HIV and AIDS. And so we must close the gap on the issue of prejudice and stigma and discrimination against citizens who are HIV positive.

For when we – as human beings – distance ourselves, demonstrate fear, demonstrate ignorance in the midst of this public health crises we make those who are HIV positive afraid – afraid to seek treatment, afraid to disclose their status, afraid to find out their status – and as a result of that the problem continues and worsens.

So my overall message – before I conclude now – is one that is positive.

We know the extent and nature and pattern of the problem. We know how to respond to the problem with medicines and behavior to mitigate and eliminate it.

It is time for us to do all that we know we can do.

And the United Nations is here to help to solve this problem – with you.

Kheili moteshakeram.