

**Round Table Forum on the ASEAN Experience of Cities/Areas Getting to Zeros: Side meeting
during the United Nation High Level meeting on Ending AIDS**

8 June 2016, at 13:30 – 14:45 in New York

Speaker	H.E. Dr. Myint Htwe , Union Minister for Health and Sports, The Republic of the Union of Myanmar
Title of speech	Opening Pogramme: Welcoming remark from ATFOA Chair
Occasion	Round Table Forum on the ASEAN Experience of Cities/Areas Getting to Zeros: Side meeting during the United Nation High Level meeting on Ending AIDS
Date	8 June 2016, at 13:30 – 14:45

Dear Excellencies,

H.E Prof. Dr. Nila Djuwita Farid Moeloek, Minister of Health of Indonesia, H.E Associate Prof. Dr. Bounkong Syhavong, Minister of Health of Lao-PDR, H.E Vongthep Arthakaivalvate, Deputy Secretary General for ASEAN Socio Cultural Community, Ms. Jan Beagle, Deputy Executive Director, UNAIDS, ASEAN Task Force on AIDS focal points and representatives from ASEAN Member States, Colleagues from UN and partner organizations, distinguished guests, Ladies and Gentlemen

ATFOA is like a family, but I am new for 2 months.

I am honored to deliver the remarks at the opening of **“The Round Table Forum on the ASEAN Experience of Cities/ Areas Getting to Zeros”**.

I realized that the delegates from ASEAN Member States are going to share good practices, challenging issues, successful models as well as implementation, management, administrative and logistic challenges. The session will also be highlighting on what had been developed or occurring overtime in the context of ASEAN Declaration of Commitment. Getting to Zero New HIV Infection, Zero Discrimination, Zero AIDS-Related Deaths adopted by ASEAN leaders in 2011. It had been operationalized through the ASEAN Cities Getting Zeros Project and it would definitely inspire us for the future.

Based on ASEAN Regional Report 2015, there are approximately 1.7 million people living with HIV in our ASEAN region. Of these people, a little less than half are receiving lifelong ART.

The Getting to Zeros Project will give us an idea of how we could tackle the HIV problem from broader and practical point of view.

We should try to get the most out of these projects, so that we can increase the number of cities for implementing Getting to Zeros Project without much hassle. In that context, we need to carefully and continuously review the *modus operandi* of implementing the three Zeros project from unbiased and holistic point of view. The key issue is how to deal effectively with key populations where concentrated number of HIV cases may be seen in areas of high population movement and areas of economic corridor.

We have noticed that existing stigma and discrimination in the community, acceptance of clients for PMTCT program, insufficient awareness of general population on HIV/AIDS, misconception and attitude towards HIV/AIDS and over reliance on ART are some of the key determinant factors that we need to consider when implementing the Zeros Project.

In fact, Getting to Zeros project serves as an eye opener for all of us to pursue further in managing HIV/AIDS program in the countries. Each country should build up on the findings of earlier studies of HIV/AIDS. The result of Getting to Zeros project would serve as an important input in fine-tuning future Zeros projects.

Myanmar study or so-called Zeros project in Mawlamyine city of Mon state yields several important perspectives, which could also be an important lesson to all of us for subsequent expansion of study cities. When we did a rapid assessment invaluable sets of information were observed. However, each country may have its own contexts and strategies based on its custom, culture, socio economic situation and level of development of the health care delivery system. It was also observed that many

influencing or determining factors in our study are beyond the control and purview of the Ministry of Health. It connotes that we need strong inter-sectoral, inter-departmental and inter-disciplinary collaboration.

As you all are aware, HIV epidemics are largely concentrated among key populations, especially, though not exclusively, in large cities and urban areas. We have recognized that Key Populations should be the primary target of prevention efforts and we should specially ensure their access to treatment and care in order to achieve the global targets.

I realized that one of the recommendations from a paper on "Defeating AIDS and Advancing Global Health" published in June 2015 by a diverse group of experts is to urgently escalate AIDS responses, get serious about HIV prevention, and continue expanding access to treatment.

Overall, there has been significant progress across ASEAN member states in reaching the global targets. This is by way of having strong collaboration among the eight ASEAN Member States.

Nonetheless, there are ongoing as well as emerging challenges in initiating or implementing evidence-based programs to scale up, especially those programs aiming at Key Populations. Legal framework and issues must be considered and tackled in the contexts of individual country scenario.

All ASEAN Member States face varying challenges in ensuring that Key Populations do not experience stigma and discrimination that impact negatively on the access to prevention and treatment services.

Since the initiation of "ASEAN Declaration of Commitments: Getting to Zero New HIV Infection, Zero Discrimination, Zero AIDS-Related Deaths in 2011 and implementation of "ASEAN Cities Getting to Zeros Project in 2012 to 2016, substantial efforts have been made by ASEAN Member States to implement targeted HIV responses and scaling up the implementation of effective prevention, treatment and care services. Be that as it may, we still need to put more effort in doing so, to see fruitful results.

The project initially started off with 13 cities/areas in 8 Member States, and it has now expanded to over 50 cities/areas.

It is to be noted that there is diversity of "the region epidemiological situations in the ASEAN member states, the approaches as well as the speed of adaptation to the new circumstances and situations.

Finally, I would like to strongly encourage participating delegates from ASEAN Member States and Local Communities/Areas/Cities to showcase and advocate for a city/area-based approach or for a regional approach towards attaining the project goal and make the HIV responses more effective and efficient.

Thank you very much.