

**Conference: 15th Annual International AIDS Conference
Closing Ceremony from the XV International AIDS Conference
July 16, 2004**

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FEMALE SPEAKER: Good afternoon and welcome to the beginning of the closing ceremony. We start this out with our presentation, the IAS presentation of the Young Investigator's Award and it's my pleasure along with the President of IAS, Uke Longa to present awards to young investigators. The International AIDS Society announces annually young investigator awards to the authors of the highest scoring abstracts submitted and trust me, these were really wonderful abstracts this year. In addition to a diploma, the awardees receive \$500 as a small gesture of our commitment and encouragement for them to continue to do high quality scientific research. So please join me in congratulating them for their hard work and for their dedication.

First, in the basic Science track we have Tom Friedrich from the United States. The title of his abstract was "Reversion of CTL Escape Mutant Simeon Immunodeficiency Virus In Vivo, Implications for HIV Vaccine Development." Thomas.

In the clinical research, treatment and care track, we recognize Ana Sue from Spain. The title of her abstract was "Increasing Risk of Pre-eclampsia and Fetal Death in HIV Infected Pregnant Women Receiving Highly Active Antiretroviral Therapy." Anna.

For track C, epidemiology and prevention we are pleased to award Sani Chen from the United States with the abstract

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"Which Antiretroviral Regimens Yield the Best Odds of Survival in San Francisco." Sani.

For track b, social and economic issues the IAS recognizes Bahati Mgongo from Kenya. Bahati's abstract was "Death Friendly VCT and HIV Care Services in Kenya."

And last, but not least, in track E, policy and program implementation we recognize Cory Davis from the United States for the abstract "Effects of an Intensive Street Level Policy Intervention on Syringe Exchange Program Utilization in Philadelphia, Pennsylvania."

I guess you have already, but please join us in giving all of our young investigators a round of applause for their outstanding work.

Thank you again for all your hard work and thanks as well to the many other young people who submitted abstracts to present their work in the fight against HIV/AIDS. It's a real pleasure to see the young investigators and know that we will have a new generation of scientists who will continue the important work. Thank you.

[Music]

SUSAN PAXTON: I'm Susan Paxton. I hope at the next conference that we will find a commitment to building the public health structures around the world and I hope that we'll hear news that 3 million people are on antiretroviral therapy. And I hope that we hear the voices of people living with HIV

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loudly and clearly, particularly at the beginning of the opening ceremony.

FEMALE SPEAKER: The conference has been well organized, so I would advise that more languages, interpreters are brought into the sessions.

MALE SPEAKER: I'm representing Ecuador from Kamarina. My suggestion is that the role of the organizations would be more active and let the people that actually work with the community be here and talk like themselves for that.

MALE SPEAKER: We emphasized areas of other leaderships [Inaudible] and another thing is that global relations are a good innovative way that we can have corroboration among broader stakeholders for this [Inaudible] of the activities.

MALE SPEAKER: I'm Craig McClure and we'll take the lessons learned from this conference and apply them to the next. But at this point all I can say is I am thrilled that the Bangkok 15th International AIDS Conference has been such a great success.

MALE SPEAKER: My name is Motsondon. I'm the conference director of this conference. The best experience of this conference is that people are actually coming back every day for the different programs. People are here. People are happy. It's a good conference.

FEMALE SPEAKER: [Inaudible] conference coordinator working with IAS to say that the successful of this conference

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will be that the delegates gained benefits or get advantages to make the things really happening more, the problems in their own places.

MALE SPEAKER: We set up a command post as a [Inaudible] in this venue. Sometime the problems of the activities may cause some misunderstanding and we have to apologize that we have to control the situation.

FEMALE SPEAKER: I am Awaren Chia. I think I have got very great experience.

FEMALE SPEAKER: This conference is very important afterward and I never thought they are different from me.

MALE SPEAKER: To the honorable guests, welcome to the official closing ceremony of the 15th International AIDS Conference. [Music]

FEMALE SPEAKER: Once upon a time in the beginning time 15 billion years ago in a great moment of birthing the universe flares forth into being. All the energy that would ever exist in entire course of time erupts as a singular gift, existence. A billion years upon interrupted night and oppose the universe to prepare itself for its next transformation. [Music] We are given a world full of light, the seas teeming with fish and other sea creatures. The forest and the soil that give life to us, the colorful, vibrant and lovely flowers around us. The chirping birds flying freely adorning the skies. And best of all are the lovely human beings that God created in His own

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image and likeness. Human beings have a sense of wonder and celebration in its ability to refashion the earth. All these among others make the earth a beautiful place to live in. Truly, how powerful and great is our God who created all these for us, you become identical with the spiritual nature of the universe. We and the universe are one. [Music] became man's failure to see God's gifts as means to glorify and praise Him. Suddenly because of man's selfishness and pride we see the tree of life in us slowly wither and die. The beautiful tree of life is inflicted with evil, greed, lust, envy, [Inaudible] and promiscuity. These brought forth various kinds of epidemic and deadly diseases like cancer and AIDS. Since AIDS entered the scene the once productive life became barren. Our families are the first to fall as victims of AIDS. Separation, divorce, abortion, mercy killing and other forms of death plague the basic unit of our society, the family. As a result our innocent children suffer from all forms of degradation, drug addiction, early marriage, slavery and worse suffer from the same killer, AIDS. And die slowly, painfully, taking away their youthful innocence, the joy of the childhood and their bright future. And the very gift of God to them a blissful life. Though once upon a time the beautiful world that our God painted for us became a painting of suffering, of death, and of [Inaudible]. Is this the end of the perfect plan of God for us? Shall we just watch and comfortably wait for the planet to fail,

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evaporate and completely vanish without fighting for it? No. We shall not. For in the very midst of our failures and weaknesses, God's abundant love is there, more alive, more vibrant and more powerful than ever. We see his grace and mercy from those very few but who are still concerned for life. The government, the NGOs, the civic groups and the church all over the world gather together with one voice, one heart, one goal, and one mission to continue to reach out, to educate people how to protect themselves against HIV. Each and every day of the year. And hopefully eradicate AIDS through a proper lifestyle. All these organizations is for human beings to return to the basic, back to the original plan of the Creator, simple, uncomplicated, colorful, beautiful, perfect life. Hand in hand the effort to restore our abundant life is speeding up. Hospitals are built for patients, mass media is important to reach and educate the masses in places far and near, powerful prayers for the world's conversion are held. We from all parts of the world and from all walks of life are committed to [Inaudible] today and beyond 2005. Beyond all our dreams, beyond all our works. With tender, care, goodness, and love through all these efforts you see hope in the eyes of AIDS victims, particularly those in [Inaudible] rapidly regain their self respect and self confidence for the temporal needs and rights are met. They are given a chance to be with other children of their age, play with them, laugh with them, learn

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with them. They are also taught how to accept themselves and not to be ashamed because they have AIDS. They are provided with food, shelter, medicine, and most of all love to make them feel that they are still considered normal children. With every bit of care and acceptance given them, we see their eyes light up with pride. We see smiles in their faces. We feel the love for people we don't know. We experience the healing power of God through one another. We watch the painting of life gain its color, it's beauty, [Inaudible] then we realize that there is still hope. That this world is still a beautiful place to live in. [music] And finally we raise all eyes up to Heaven and say, thank you Father for the gift of creation, for the gift of person, for the gift of faith, of hope, of love, and of life. Thank you for all the Delegates and Representatives of this 15th International AIDS Conference. Thank you for your beautiful hearts. Thank you very much. [Music]

MALE SPEAKER: Ladies and gentlemen, please welcome the Master of Ceremonies who will introduce the closing ceremony of the 15th International AIDS Conference, Miss Puanita Cunpalin and Mr. Jacapob Pancan.

JACAPOB PANCAN: We have the honor of welcoming all of you to the closing ceremony of the 15th International AIDS Conference in Thailand. And it is one of the most historic conferences ever in terms of the number of the people attending. We have 19,000 people attending this year. It is the

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largest number ever. And in the closing ceremony we see that people come in abundance too and here, ladies and gentlemen, the Minister of Public Health of Thailand, Mr. Sudarat Keyuraphan.

SUDARAT KEYURAPHAN: President [Inaudible], Prime Minister of [Inaudible], Excellency, ladies and gentlemen. Is it a great [Inaudible] for myself and all my colleagues that this conference [Inaudible] and today. I'm sure all partners who actively participate in organizing this conference share the same feeling. We all deserved the last few weeks to rest and relax after this conference. And I strongly recommend that Thailand is the best place for such occasions with our healthy food, warm hospitality, Thai spa and massage, and tradition and culture even. And please allow me to inform you that this year is a very special time for Thais. We are celebrating the 6th cycle of Her Majesty Queen's birthday. Her Majesty has developed and supervised many projects [Inaudible] target to reduce [Inaudible] among the people. Her Majesty Foundation has supported the conservations and developments of many [Inaudible]. Particularly handicraft and they are the best quality and are on sale now at [Inaudible] Paris. So don't miss your opportunity in this time. And we recognize that we made mistakes along the way and want to apologize to anyone felt slighted by our mistake, including the speakers in the opening ceremony. Excellencies, ladies and gentlemen, we all come here

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to learn from each other, to agree on the future parts and to commit to do more and work harder. It's not easy for all partners to agree and commit. It is even more difficult to keep our promise to be able to success with all the commitments we have made. We need strong and active involvement of our community. The business, the scientists, the leader of our sector. We do need stronger spiritual bondness and honest networking. We do need more constructive engagement among all partners. I do realize that some of our partners prefer strong social movement to push the governments and the industry to move and to commit more. I do understand that [Inaudible] to do so. I recognize that working with the committee and serious society requires more patience, love and trust than absolute legislatively. However I do hope that also [Inaudible] movement no matter positive or negative. We [Inaudible] the spirits of constructive engagement. Excellencies, ladies and gentlemen, after 2 decades of fighting we have achieved huge progresses, however we have to start some new paradigms as our great scientist Albert Einstein once said. We shall need regularly new manners of thinking if mankind is to survive. We do need more human rights, more human security, more gender and most important of all more spiritual approach. We need more love, passions, and compassions from all concerned. In the next decades we need to remove and focus on our unfinished and [Inaudible] agenda. We need to focus on the wonderful group

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[Inaudible] the mobile population, the migrant workers, and the intravenous drug users. In particular we need to focus our further efforts to protect and empower the children and the women, which are the victim from the social problem. In addition, we need to tackle head on to the issues of stigmatizations and discriminations. I'm sure that sincere and [Inaudible] implementations of our commitment that we have made here really are to that direction. Excellencies, ladies and gentlemen, note that the 15th International AIDS Conference has successfully assembled. The three angles of Scientifics, community and leaderships to form a complete and powerful [Inaudible]. I strongly hope that this powerful triangle will further empower in the growing IAS. With this powerful triangles the successes of our commitment will not be too far. Excellencies, ladies and gentlemen, the successes of this conference come from the dedicated investments of so many partners. I cannot find any wordings or sentences that can truly reflect my sincere appreciations and thanks to all agencies and partners [Inaudible]. The International AIDS Society read by Professor Joep Lange.

DR. JOEP LANGE: UN AIDS, WHO, [Inaudible] ICWU, [Inaudible] THAI NGO staff and volunteers who have made this conference come true. And Excellencies ladies and gentlemen I am convinced that you will leave this conference and this country with hope, health, energy and wisdom. I hope that the

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Thai people, our culture, our hospitality will remain forever in your memory and your heart. On behalf of Thai people and the Thai government, ladies and gentlemen, may I once again thank you and invite all of you to come back to visit us soon and have a safe trip back home and see you in the next 2 years at the 16th International AIDS Conference in Toronto, Canada. Thank you very much.

MALE SPEAKER: That was the Minister of Public Health of Thailand, Sudarat Keyuraphan. And next I would like to call upon Dr. Helene Gayle incoming International AIDS Society to deliver the speech. Dr. Gayle, please.

HELENE GAYLE, MD, MPH: Good afternoon. Distinguished guests and delegates let me first start by saying thanks to all who are responsible for organizing another successful International AIDS Conference with special recognition to the Organizing Committee and its Chair, Dr. Velop. We are all appreciate to the Royal Thai Government for its tremendous hospitality during our stay in Bangkok and for their continued leadership and vision responding to HIV/AIDS in Thailand and serving as a model for the rest of the world. The need for greater political leadership has been a common theme throughout our discussions this week. The Thai government has taken up this cause, but so too have many other distinguished leaders, including those you will hear from later on in this session. As Secretary General Kofi Annan said at the opening plenary on

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Sunday, "Great leadership from all sectors of society and greater resources are among our most critical tools in the fight against HIV/AIDS." Let me also give a warm thanks to my immediate predecessor Dr. Joep Lange. For his tireless efforts over the last 2 years to ensure the success of this conference, his leadership of the IAS, but more importantly for his unceasing efforts on behalf of people living with HIV/AIDS.

I am honored to have been chosen to lead the AIS and am committed not only to making the next International AIDS Conference an excellent venue for scientific, programmatic and policy exchange, but also to continue to strengthen the IAS as an effective voice for the thousands of professionals who dedicate their lives to ending the epidemic of HIV/AIDS and for the people and communities they serve.

This is a year of transition for the IAS. We've hired IAS first full time executive director, Craig McClure, moved headquarters from Stockholm to Geneva and prepared to say goodbye to several long term Stockholm staff. And I want to thank a moment to thank Madeline Artphelt, Crystal Lengrein, Susanne Beurg, and Livia Erickson for their years of hard work and dedication to the IAS. And I also want to extend a special thanks to Rodrigo Guere, head of operations and acting CEO for his 4 years of outstanding service to IAS.

Let me say a few words about the conference. What a week this has been. Inspiring, compelling, exhausting, and

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sometimes even frustrating. But in the end I hope we all leave here having benefited from the experience. As has been said, the conference has had the highest number of delegates and at last count almost 20,000 delegates have been part of this week's proceeding, the largest most participatory discussions held on HIV/AIDS. There have been record numbers of members of the Global press and we've had the highest number of abstracts submitted. Over 10,000 with almost 9,000 accepted as orals or posters. The conference fees, although still too high, were less than those from last year's conference and we plan to make these even lower for Toronto. There were more scholarships than ever before, 3,000, helping to facilitate a greater diversity of participation. And for the first time we had a program devoted to highlighting the role of leadership. And we had the global village that provided us with a place where delegates and non-delegates alike could come together on equal footing to share experiences and aspirations. And I think also it's important to note that a record number of youth participated in all facets of the conference, including the 2,000 plus youth volunteers. This was incredible. But conferences, no matter how successful are not the answer to ending the HIV epidemic. They can serve as an important venue for sharing information and focusing our efforts. At this conference we struggled with how to move access for all from a concept to a reality. We have heard about promising new technologies to expand our prevention

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options, especially options that put the power of prevention within the hands of women. We've struggled with how to meet the needs of an expanding epidemic that affects more women, youth, IDUs, but still hits hard at sex workers, migrants and men who have sex with men. We had spirited discussions and shared diverse views, but hopefully in the end we recognize that there's more that unites us than divides us and that unity not confrontation is the key to our success. I hope we leave here having put an end to often divisive debates about abstinence, monogamy or condoms, when we need all of them and more. That we find a way to make generic drugs and branded drugs of the highest quality and the lowest cost available to all who need them. That we no longer talk about clean needles or drug treatment when both are necessary and that we recognize that pooled resources and bilateral funding are complimentary, that we can change men's behaviors and empower women at the same time, that we can fight AIDS and fight poverty and that we can enlarge our focus to include Asia, Eastern Europe, without forgetting Africa, the Caribbean and vulnerable populations in developing nations. This is not a one size all fits epidemic and so we can't have a one size all fits response. So we have many scientific, programmatic and policy challenges to tackle between now and the next time we come together in Toronto. None of these challenges are insurmountable and the ability to make a difference is in our hands. In fact, we have already made a

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difference and while recognizing that more must be done, let's not lose perspective on the progress we have already made; all of us from all sectors have a critical role to play. If we're able to keep our focus on the things that really matter, maintain our passion and our commitment, I have no doubt that we will succeed. There is a saying that goes at the moment of commitment the universe conspires for our success. Let us leave here dedicated to redoubling our efforts, to make manifest our commitment, confident in our knowledge that the universe will follow. I thank you.

MALE SPEAKER: The next speaker will be discussing on the issue of facing the Future. Miss Gracia Violeta Ross, International Community of Women Living with HIV/AIDS. Please.

GRACIA VIOLETA ROSS: Good afternoon ladies and gentlemen, organizers and delegates, and especially people living with HIV/AIDS. I would like to thank the Thai government, the International AIDS Society and the co organizers for the initiative of holding this conference in Thailand. Thai hospitality has been evident in many ways. Mostly I would like to thank God. He is the author of my life, my Savior and Lord. My name is Violeta. I am 27. I am Bolivian. Bolivia is a small developing country in Latin America. You can see it now on the map. The map please. As a small part of my culture I want to show you the typical Bolivian shawl that I'm wearing now and I would also ask you to think of Latin America

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as an important part of the world that needs global support to deal with HIV/AIDS. We would like to ask the IAS to consider South America for hosting the International AIDS Conference in 2008. The Caribbean and Latin America belong to one region, but it is a diverse one. We have model countries like Brazil with successful responses to AIDS, but also poor countries like Bolivia, Peru or Ecuador. To advocate is difficult for us because our statistics do not convince policymakers. People with HIV in Latin America are women, youth, children and men dying everyday because of the lack of commitment of many politicians. In Latin America we need access to antiretroviral treatment, integral care, technical and financial resources to uphold the community response. In Latin America we do need the global support to deal with HIV/AIDS. I will share a small part of my life story with you because it is similar to most of the lives of many young Latin American women.

When I was 20 I was raped by 2 strangers while going home after school. This experience changed my life forever. I became sexually active without having acute information about the risk of AIDS. This personal statement leads me to the first challenge we have to face. To address the gender structures that put young women and men at risk of AIDS. Many young women are engaging with older men. They find HIV wrapped inside a valentine's gift when they are in love. Women find themselves in imbalanced power relationships. We must end all forms of

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violence against women and girls and provide education and legal services for them. We must face the gender inequalities that increase the risk of AIDS for both women and men. These difficulties lead me to the second challenge, to involve youth more actively in the AIDS response. We must work with youth. Today we find 2 types of positive youth. Those who acquire HIV because of unprotected behavior and those who were born with HIV. The needs for both groups are different. The youth at risk of AIDS are diverse. They include young girls, young men who have sex with men, young people involved with [Inaudible] sex as a means of livelihood, youth in poverty or friends injecting drug users and also differently abled youth. They face particular problems related to their cultures, gender inequity, poverty, lack of access to information and services among many others. We must deliberate the fact that youth are an available and powerful resource for an effective response to AIDS. I want to call up on government cooperation, agencies and NGOs to look at youth as important actors in the AIDS fight and to support them. As a person living with HIV I consider one of the most important challenges we still have to face is the access to treatment care and support for people living with HIV and AIDS. We demand accountability on the global commitments to scale up treatment. I celebrate the fact that the access for [Inaudible] is becoming a reality, however important initiatives like 3x5, [Inaudible] declarations, millennium development goals and

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regional agreements are not a guarantee of access to treatment for people with HIV. Being accountable means taking concrete actions. Eradicate the bureaucracy [Inaudible] in the antiretroviral [Inaudible] and delivery, which in turn leads to needless deaths. Seek political commitment and resource mobilization to scale up treatment. Fund the fund. The Global Fund is the only window of hope for countries like mine, however understand that [Inaudible] rise of antiretroviral drugs should go to the Global Fund and then to the government, not to bureaucracy. The last challenge I want to speak about is stigma and discrimination. I recall experiences of different people with AIDS dealing with painful stigma and discrimination experiences, but I also want to share an idea that may lead to change. Given that we are living in a particular time when HIV/AIDS information is widely distributed, it seems like some persistent attitudes of stigma and discrimination are based on ideology rather than information. I thank my Peruvian friend and artist, Fernando Libos who was inspired my quilts and typical patchwork of the Andean region to create works, which showed me that stigma and discrimination have no rationale. In fact they are irrational attitudes and they seemed to be linked to 2 basic feelings, hate or love. In Latin America we think magic and dreams may become reality. We believe it is possible to eradicate the stigma and discrimination. This artist has a dream; the name of this dream is the garden. It means one day

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there will be a garden where love all humans have inside will flourish. This blooming love like plants will be a powerful tool to deal with the stigma and discrimination. We need nothing more, nothing less, only love. Thank you.

MALE SPEAKER: The next in line would be Mr. Don De Gagne, Co chair of Community Program Committee. Presentation on Communities statement. Mr. De Gagne, please.

DON DE GAGNE: As Community Co-chair for the 15th International Conference, I must say that I've had an incredibly rich experience with very diverse communities and I'm very honored and pleased to have worked with these communities and particularly Thai communities and people living with AIDS in Thailand and I want to thank them from the bottom of my heart. I won't be giving a Don De Gagne speech, I will be giving a speech that was built with communities and I would ask the communities to come on stage please.

Honored guests, ladies and gentlemen, friends, twenty years of a long journey many have died, more continue to die, men, women, young people, elders, and stateless people. Children cry, infants die. Pledges given. Promises broken. Too much power in the hands of only a few. People need to believe in a brighter future. People want to live to the fullest. We need hope. We need togetherness. The long journey is yet to end.

FEMALE SPEAKER: As women living with HIV we need not

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only medicine, but also through the land so we can live and raise our children. Our sexual reproductive rights and needs must be recognized. We want to choose whether and when we want to have sex and whether and when we want to have children. We must have access to drugs that allow us to keep [Inaudible] and to our children. Our sexual and reproductive rights and needs must be integrated into care and services. As women and women living with HIV/AIDS we must fully participate in decision making processes at all levels related to our sexual reproductive rights, our life, our decision.

FEMALE SPEAKER: I want to live. I'm living with the HIV/AIDS virus. But I'm afraid to speak out. I want to live in dignity. I want access to treatment, care and support. My life should not be wasted. I want to live in a world where I won't feel people out looking down on me or discriminate against me. All I want is to get on with my life and make a contribution to my community. I can be more than just a target group for various interventions. I can be a powerful sort in spreading education. Making my community safe and enable other people living with HIV/AIDS to access treatment and care. I'm entitled to live fully, including having a sexual life and forming a family.

MALE SPEAKER: I am a man. And I need role models that are built on mutual respect and kindness and education so I can treat my female partner as an equal. I might not always be

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faithful, but if equipped with information and skills to protect my sexual partners and myself I know that I can be part of a solution and not just a problem. I can still be a man and not always be strong. I can act in a way that is not the traditional role model, but instead in a way that is based on love and caring. I am just a man.

MALE SPEAKER: We are men and women who do not live with [Inaudible] because of who we love. Our [Inaudible]. We are men who live our days as women. We are men who choose male as our partners. We are women who do not act a traditional role, but we are son and daughter, brother and sisters. We sing and cry like our people. We have the right to be healthy to [Inaudible] ourselves from AIDS. With information and choice to have our [Inaudible] and to be free from violent acts. But even more we want to be citizens as part of our common community.

MALE SPEAKER: We are often forgotten, but we are the traditional careers and teachers. We take care of our grandchildren when their parents have died. We have sexual lives. We need knowledge to help us play our role in responding to AIDS. We need resources and support to never ask us to care for others. And we need to be supported as well.

FEMALE SPEAKER: When I can work in safe and fair conditions. When I am free of discrimination. When I am free of labels immoral and unethical researchers. When I am free to do my job without harassment, violence or breaking the law. When

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sex work is recognized as work. When we have safety, unity, respect and [Inaudible]. When I am free to choose my own way then I am free to protect myself and others from HIV.

FEMALE SPEAKER: We are people who are denied basic rights to citizenship and health care. Because of our [Inaudible] and because of our rules we produce [Inaudible] where we live, but our [Inaudible] labor is not recognized and our rights are not protected. We are [Inaudible]. We need education and service in our own languages and respect for our way of life. We want to be a [Inaudible] without being [Inaudible]. We have the right to children and we will no longer accept to be excluded.

MALE SPEAKER: We are health workers who need to be supported to do the work we are doing. We care. We want to make a difference, but we are careers who may also need a care. We need to know how to protect ourselves, need to be equipped with updated knowledge so that we base our work on correct information. We need equipment and the resources to provide effective health care to all.

MALE SPEAKER: We want to bring love and kindness to the human spirit. No matter what's fair or even [Inaudible]. We will bring [Inaudible]. Fight discrimination and health care and support for those who need it. We will dare to listen and not to just [Inaudible] and seen. We will enlighten to our love and kindness with open eyes.

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MALE SPEAKER: Traditional healers. Traditional healers need the recognition so that our walk may help and support treatment and care through hospitals and medical doctors. We argue that in caring for those with HIV/AIDS all dimensions of life, physical, mental, spiritual and others all be included. ARVs are needed, but there needs to be holistic versions of life taken into account. Science needs to work with those of us offering alternative treatment. Verifying our needs and finding means so that we may complement and support each other as health workers, as health professionals.

CHILD SPEAKER: I want to grow up, grow old and wise. I want life and hope. I need food, friends and schools and I want to play. When I have AIDS I need to be cared for and I need medicine that is researched for children and made available for us. I know doctors are worried when they have to give medicine to children. All I need is an explanation that I can understand why I need this and how to take. I want you to trust me and believe in me but more than anything else I want to be loved and cared for.

DON DE GAGNE: Let us continue to listen to those who live it. Let us continue to learn from those who live it. We hope to see you in the next global village in Toronto in 2006. Thank you.

MALE SPEAKER: Mr. Paisan Suwannowong from the Thai Drug Users Network. Have the floor.

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PAISAN SUWANNAWONG: Thank you. Good afternoon ladies and gentlemen and friends. I am a former injecting drug user. I injected for many years, but finally gave up about 10 years ago and this time I find out that I was tested positive. At that time there were no services for IDU and the police, the health services and general public [Inaudible]. Today not much has changed even though the Thai woman says its current policy is to treat drug user with patience not criminal. In the recent war on drugs in Thailand, over 2,005 people were [Inaudible] in the first few months of the campaign. We continue to experience constant police harassment and discrimination in society and health care settings. IDU in Thailand are the only group who is 50% HIV [Inaudible] has not changed in 15 years. Yes, there has been no effective response from the government. Basically we are offered the choice of prison or mental rehabilitation center. Is this harm prevention or harm reduction? During the opening of this conference our Prime Minister committed to introducing comprehensive treatment program for IDU with the participation of Thai drug users. And to change the current repressive policies. We will wait to see if this promise is going to be broken and along with our international allies we will hold him accountable. Because we are Thais our broken promise [Inaudible] new HIV infections outside of Africa IDU [Inaudible] and which are effective interventions and massive change in attitude. This situation will only get worse. With

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terrible consequences for Eastern Europe and Asia. UNAIDS or [Inaudible] need to take an active leadership role in advocating for the introducing of proven prevention and treatment interventions such as needle exchange and methadone programs. The [Inaudible] has made a strong commitment at this conference to support inclusion of methadone and bupunafin [misspelled?] under the [Inaudible]. They need to take emergency steps to ensure it happens. This is painful to be poor and HIV positive again and again I watched many friends die in front of me from terrible opportunistic infections. Simply because they were poor and could not afford treatment. But what kills us is not AIDS. It is greed, ignorance and the deadly poison of powerful conservation governments and the pharmaceutical companies who put their political and economic interests ahead of our lives. This is our interest that the U.S. is undermining proven prevention effort and access to generic drugs. This is our interest that the U.S. is trying to force Thailand to trade away our [Inaudible] in the U.S. Thai free trade agreement. Access for all has been the theme of this conference and the theme of many of us here, but what have we learned from this conference? We have learned that discrimination still exists even within the conference venue. The opening ceremony was designed to ensure that the leaders and the majority of the audience did not hear the only voice of people living with AIDS on the program. To our dismay, Thai

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people with AIDS act in this conference have been stared at and [Inaudible] because they have been tattooed and perceived to be drug users. People with AIDS have been invited to speak as some even because they are living with AIDS but have not been given time to speak. This [Inaudible] is often seen to all of us. On Wednesday a Thai drug user named Edward received a 2004 International award for action on AIDS and human light. From human light was and Canadian [Inaudible]. I would like to share this award with all activists that have been fighting for many years in Thailand and internationally and I would like to thank all of my true friends who support me in the reaching of access for all. In particular I would like to recognize Paul and MSF Dr. Rich Ashburn, [Inaudible]. Who have believed in me and helped to make my world possible. Thank you to Joanne [Inaudible] our friends. And all the Thai and international protestors for their fantastic work and support. And last but not least, Thai [Inaudible] all people with HIV/AIDS and [Inaudible]. And the global community of people with AIDS who are fighting for many for their lives everyday. Thank you very much.

MALE SPEAKER: Thank you very much. The next speaker will be a Patron of the leadership program and President of the Federation for Community Development in Mozambique, a renowned social activist. Please welcome Mrs. Graca Machal.

GRACA MACHEL: Excellencies, distinguished delegates.

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The Leadership Program of the 15th International AIDS Conference in Bangkok brought together leaders of people living with HIV, males who have sex with males, people who inject drugs, sex workers, women, young people, leaders from AIDS programs, governments, NGOs, CBOs, the private sector, religion, science, uniformed services, and world of work. This is our statement of commitment. Today we leaders remembered the millions of people who have died as a result of AIDS and the millions of people who are living with HIV. This is the first AIDS leaders struggling with neglect, social exclusion, discrimination, abuse, and denial. We pay our respects to people living with HIV who are the primary leaders in the fight against the epidemic. Most of them are unrecognized and their struggle is silent and invisible. We are ashamed that in 2004 some 38 million people are living with HIV/AIDS and fighting the same battles after 2 decades. Despite all that we have learned about what works in prevention and treatment the epidemic is on the rise in every region. We recognize that we have not done enough to protect people from new infections. We have not done enough to provide access for affordable treatment and care for all those who need it. We have not done enough to combat stigma, unnecessary criminalization and discrimination or to reduce the risk and vulnerability of tens of millions of young people and adults. We are also concerned that we have not succeeded in meaningfully involving infected and affected people in our

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response. We acknowledge that we have failed to provide enough information, education, prevention tools and technologies, treatment, care and support. Our inability to ensure human rights, equity, opportunities, and a supportive and enabling environment for all has helped to fuel the epidemic. Today we as leaders from all levels and all sectors have come together to commit to improving the quality of life for those people who are living with HIV/AIDS, or affected by it and to prevent further infections. We hold ourselves accountable collectively and individually to strategies and actions including supportive policies and legislation, scaled up programs in prevention, care, treatment and impact alleviation. Increased financial and human resources, mobilizing other leaders in the response, accountability to fulfilling all commitments and promises made so far. We committed to transforming our world into a loving and caring one and to working towards changing the attitude of everyone in the community in order to eradicate stigma, unnecessary criminalization and discrimination. The leaders among us from government, the private sector, the community, and the world of work commit ourselves to coordinate efforts and not only among ourselves, but also with the interaction organizations and donors and through mechanisms such as World AIDS Campaign. We also reaffirm and strengthen the principles and implementation of the three ones as articulated by UNAIDS and its partners. We commit to strengthen our broad based

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multiministerial and multisectoral response. We are deeply concerned that our response to the epidemic has often motivated value judgments. We commit to base our action on human rights, informed science, and to implement evidence based interventions. We acknowledge the threat to and suffering of all vulnerable people including children, young people, women, sex workers, people who inject drugs, males who have sex with males, and migrant and dispelled persons. And commit to reducing their vulnerability to HIV infections. The world has agreed on [Inaudible] declaration and commitments and other declarations that focus on achieving an exceptional response to HIV/AIDS. Our leadership statement supports these earlier commitments of the world's leaders and holds governments, the private sector, communities and international organizations accountable for its implementation. We the leaders from various communities and groups gathered here have developed our own respected declaration of leadership commitments. These statements of commitment are an integral part of these Bangkok leadership statement and we want the world to pay especial attention to them. The statements of each group will motivate the leaders from that group and will be their guide to action. Each group commits to develop mechanisms of accountability towards the fulfillment of their commitments. Realizing the urgency of action, we promise to start acting on our commitments immediately and to report on our progress at the

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16th International AIDS Conference in Toronto. This is the leadership statement.

On a personal note, I just would like to add the following. Bangkok must mark the change of the chain of promises made, promises broken. We have had 20 years of learning. 20 years of painful loss of life, but we as leaders also have lost our credibility. We are here to say step by step we will come back to people living with HIV/AIDS to children, to young people especially girls, to women, to all the vulnerable groups. We have to come back and say what we have done, what we are still learning we don't know how to deal with. But to make sure at least that in 20 years time when the generation of my granddaughter looks back will feel that we are leaders. We can deserve to be called leaders because we take our responsibility at fullest. Lives who have been lost won't come again. But lives, which are still with us, they have to be kept alive. And we have the scientific and technological capacity to do it, resources do exist in the world to do it, we have the capacity to mobilize good will and goodness in every single human being. There's no reason why we have to continue to lose lives because of our inaction and our incompetence. Our compromise is exactly to move away the obstacles which are still preventing us from getting the great success of having every single person in our community mobilized, acting in a chain of solidarity together with our government, together with

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private sector, together with the international community, but Bangkok has to be the end of promises made, promises broken. And I thank you.

MALE SPEAKER: That ladies and gentlemen, Mrs. Graca Machal. As we are all or most of us know that [Inaudible] has another activist in the family. I think it is time to welcome the activist now, ladies and gentlemen, Nelson Mandela.

NELSON MANDELA: Thank you. Thank you again for asking me to participate in the closing ceremony of your International AIDS Conference. It seems that I have reached a level of seniority, which entitles me to participate in closing ceremonies. Despite the fact that I am an old age pensioner with no power and even with less influence, as you will know I have announced my retirement from public life, which means that I should not be here today. However, the fight against AIDS is one of the greatest challenges the world faces at the start of the 21st century. I cannot rest until I'm certain that the global response is sufficient to turn the tide of the epidemic. The importance of tackling this issue should not be undermined by the many other problems that confront a global society today. In the course of human history there has never been a greater threat than the HIV/AIDS epidemic. Our attention to this issue cannot be distracted or diverted by problems that are apparently more pressing. History will surely judge us

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harshly if we do not respond with all the energy and resources that we can bring to bear in the fight against HIV/AIDS. Last night we introduced you to our 46664 sexual campaign. We reminded you how they are [Inaudible] to reduce us to prison numbers and so reduce our humanity. We were kept alive by our strong sense of hope and the firm knowledge that the world would not forget us.

Last night we called upon you that is every global citizen not to forget the millions of people suffering from HIV and AIDS and not to reduce them to mere statistics. We share a common humanity with our brothers and sisters suffering in this epidemic. Ask yourself what you can do as global citizens against the fight against HIV and AIDS. We must never forget our own responsibilities. Last night we also called upon donors to substantially increase their funding for the fight against AIDS. This applies not only to governments, but also to the private sector and private foundations. It also applies to every global citizen. No amount of money is too small to make a difference. We highlighted the importance of the Global Fund to fight AIDS, TB and malaria and the good work that it is funding in 127 countries around the world. We need to build at the public/private partnership, that is the vision of the Global Fund. We challenge everyone to help fund the fund now. As part of my 46664 campaign, I have challenged countries to develop comprehensive HIV/AIDS prevention and care programs. This

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includes the great importance of providing access to the [Inaudible] treatment urgently needed to save millions of lives now. We have highlighted the needs of marginalized populations such as refugees, migrant workers, IDUs, prisoners and sex workers. As former prisoner #46664 there is a special place in my heart for all those that are denied access to their basic human rights. We urge countries to make the policy changes that are necessary to protect the human rights of those who suffer from unfair discrimination.

Finally, we have stressed the overriding importance of strong leadership in the fight against HIV/AIDS. We speak not only of political leaders, but also of leaders from every sector of society. We are delighted to see that this conference has introduced a new leadership program into the proceedings. Let us now see more leaders who are prepared to mobilize and inspire their people to respond to the crisis. The day after tomorrow, the 18th of July will be the way I turn 86. There could be no better birthday gift than knowing that there is renewed commitment from leaders in every sector of society to take really and action against AIDS. We know what we need to be done. All that is missing is the will to do it. Allow me to enjoy my retirement by showing that you can rise to the challenge. I thank you.

MALE SPEAKER: Thank you, Mister President. Thank you.

Good heaven. I have to be sure that he is really here you see,

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bring him forward. Same as the lady who is coming forward to the stage who knows diversity and all the differences in the world that can share with us important lessons. She is practically running the largest democracy in the world. Ladies and gentlemen, Sonia Gandhi.

SONIA GANDHI: Sudarat Keyuraphan, Minister for Public Health of the kingdom of Thailand, Excellencies, distinguished guests, ladies and gentlemen, it is a great honor for me to share this occasion with a living legend with whom my country and my family has had a special relationship for decades. The strength of Dr. Mandela's convictions, the passion of his beliefs, the intensity of his commitment have been a beacon to all of us and most of all his fortitude in extreme adversity, his large heartedness, his compassion, and his statesmanship continue to inspire all of us in public life. And though his birthday is tomorrow, let us all wish him a very happy birthday today.

Today we close a conference devoted to an issue that dominates world headlines every day. I am sure that all of us will go back reaffirming our resolve to combat this most deadly scourge, a disease that is not a medical or a scientific subject alone, but a poignant social and human issue as well. We do talk of strategies, of programs, of trusts, of priorities, but let us not forget that ultimately we are talking of men, of women, of children, of brothers, of sisters

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whose suffering has to be felt, has to be handled with great sensitivity and with great empathy.

Given the scale of suffering brought by HIV/AIDS epidemic it is to be expected that doomsday scenarios of its spread are commonplace. My country figures prominently in all these projections. While I do agree that there is no room for complacency, I would like to take this opportunity to categorically assert the determination and ability of the government and the people of India to meet this daunting challenge just as effectively as they did in the campaign to eradicate small pox some decades ago. We have reason to meet social, political and technological challenges in the past and I am more than confident that we will do so again in the present context. India faces numerous public health challenges. We are meeting these challenges in the framework of both faster economic growth and direct social welfare and human development interventions. AIDS controls already accounts for about 10% of our national health budget. Many in my country believe that we are paying disproportionate attention to HIV/AIDS at the expense of malaria and tuberculosis for instance, but the present government does not share this view. In fact, just last week its budget increased the allocation for the National AIDS Control organization for this year, although we do recognize that the amount needs substantial increase. In the very first articulation of its priorities on assuming office a little over

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50 days ago the new government drew pointed attention to the need for strengthening our AIDS control effort and this will be accomplished through a variety of means, including increased funding, greater involvement of NGOs, more widespread organization and better health facilities. We seek the sustained understanding and support of the international community. Multilateral and bilateral financing agencies as we all know have been very generous and so have some private philanthropic foundations and we welcome this cooperation since it is only through such partnerships and networks that we will be successful. In India there are distinct dimensions to HIV/AIDS and our National AIDS Control program has to take into account regional as well as a number of many other variations. Also, you may be aware that some Indian companies have gained global recognition for developing inexpensive generic drugs and some of these are used in many parts of the world I believe. For the past few years India has not included antiretroviral drug therapy in AIDS control programs and this was mainly because of shortage of resources and the high cost of drugs, but things I'm glad to tell you that things have begun to change. And the antiretroviral treatment has made a beginning as part of the government's program and is being scaled up. In the last few years our National AIDS Control program has quite a number of success stories. The entire chain for blood supply has been made safer. Condom use has spread and could have a

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significant impact on HIV/AIDS prevalence in high-risk areas. Vaccine development initiatives have been launched with international collaboration. We are aware that vaccines will not be available for quite some time, but we do recognize their enormous potential and I do hope that we will be in a position to launch field trials very soon. Indian businessmen, political leaders, sports icons and film stars are spearheading an extensive campaign to heighten public awareness, to speak up forcefully against both stigma and apathy and to remove the many misconceptions of HIV/AIDS patients that still exist in the public mind. NGOs are involved in a variety of areas including public information, education and communication, disease surveillance, counseling and care of patients, especially women and children. The suffering of children particularly has come into sharp public focus in recent times. And here I would like to acknowledge the NGOs, all NGOs and activists. Their invaluable role and I commend their dedication and their sincerity of purpose. I myself had one NGO which is the Rajeev Gandhi Foundation and this NGO has been active in mobile counseling and testing and it is a matter of some personal satisfaction that UN AIDS has included this program in its tool kit of local responses to HIV/AIDS as one of the best global practices. So much is being done, but it is equally true that we need to do a great deal more. First I believe there is a need to target stigma and discrimination and to safeguard the

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rights of people living with AIDS with regard to access to information, services and treatment. We in our country are holding countrywide consultations for drafting legislation to address these. Second, greater insight and commitment are needed to deal with the social issues that prevail, a proper recognition of the scale and the nature of the problem. There is need to integrate prevention and treatment. Third, the fight against HIV/AIDS is intrinsically connected with the efforts for achieving gender equality. Fourth, public health systems have to be made more effective and sensitive to the people they serve. Traditional health care providers, especially at the community level need to be empowered with more accurate information and to be appropriately regulated. Fifth, the world including my own country needs to spread awareness and information through education and other means so that prejudices that harm individual and social health can be removed.

Now clearly, the government has a major, major role to play, but communities also need to take the initiative to care for those who suffer, to rid themselves of the social ills and individuals habits that cause the spread of the epidemic. My own interactions with HIV/AIDS patients have brought home to me the heartbreak and trauma that this disease wreaks, not just on those directly affected, but also in their families. Through the years I have seen the terrible emotional toll that HIV/AIDS

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extracts quite apart from its cruel, physical ravages. I have seen people who have lost their jobs, who are ostracized by their communities, who can no longer hope to raise and bear healthy children, infants in orphanages who no one wants to adopt because they were struck by this disease even before they were born. I have met families who suffered the agony of watching their loved ones slowly fade away and found themselves helpless, isolated and shunned in their grief. Today, therefore, let us all renew our commitment to work together to find new ways of reaching out with compassion, with empathy, with understanding to the millions, millions of men, women and children who are the tragic victims of the physical and social devastation caused by HIV/AIDS.

I would like to finally once again express my gratitude to the Royal Thai government for giving me this unique opportunity to be with all of you today. My country, India and Thailand share a close cultural, political and economic relationship and our Prime Minister will be here in just about a fortnight. We in India have much to learn from this country in many areas, not the least being in HIV/AIDS management itself. Thank you.

MALE SPEAKER: Thank you, Mrs. Gandhi. Mrs. Gandhi is now going to see the delegates from India in meeting room 2. So delegates from India please gather together right now in meeting 2 and Mrs. Gandhi will be seeing you shortly. Jong-Wook

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Lee, Director General of World Health Organization, please, you are the next speaker.

JONG-WOOK LEE, MD: Well, after President Mandela and Sonia Gandhi, what can I say more? Well the Prime Minister, Denzil Douglas, the Honorable Minister Sudarat Keyuraphan, this week in Bangkok we have discussed on global public health [Inaudible] that takes the lives of thousands of people every single day, but we have also heard the voices of hope and I want to take this opportunity to thank a remarkable group of people. Together they bring hope to millions of people living with HIV/AIDS around the world. The call for access to all came first from people living with HIV/AIDS from the extraordinary of NGOs and activists. You are too numerous to mention all by name, but I must thank Joep Lange, the President of the IAS for his leadership. I thank Prime Minister Thaksin Shinawatra and the Minister of Public Health, Sudarat Keyuraphan. Thanks to your leadership, Thailand is not only renowned for its legendary hospitality, but also for the remarkable progress you have made in the fight against HIV/AIDS. On behalf of all of us I thank UN Secretary General, Kofi Annan. It was his vision that led to the founding of the Global Fund. He has done so much to keep the world's attention focused on the devastating impact of AIDS. I want to express my appreciation for Richard Feachem, Executive Director of the Global Fund. In a remarkably short period of time, he and his staff have turned an idea into

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a reality mobilizing and dispersing millions of dollars in the fight against HIV/AIDS, tuberculosis and malaria. The Chairman of the Global Fund Board, Secretary Tommy Thompson has also shown great leadership. I witnessed his personal commitment when we traveled together in Africa last year.

I want to pay tribute to Peter Piot on his intelligent and dynamic leadership; UN AIDS continues to lead the world in the fight against HIV/AIDS. I also thank Ambassador Randall Tobias as the United States Global AIDS Coordinator. He brings his considerable energies and talent to address the plight of people living in the countries supported through the U.S. President's Emergency Plan for AIDS Relief. The Secretary General's choice of Stephen Louis as his Special Envoy for HIV/AIDS in Africa was inspired. Stephen, your passion, your eloquence and your anger continues to mobilize and energize us. Thank you for all you do.

I must acknowledge the leadership of Jim Wolfensohn. The World Bank has radically changed during his tenure as the President and led the way in making millions of dollars available for HIV/AIDS prevention and treatment in Africa. I honor our cousin, Nelson Mandela. Your dignity in the face of profound adversity continues to inspire millions around the world. Your willingness to speak out on behalf of a people who suffer from TB and HIV springs from your personal experience. Your voice brings hope. I would like to express my profound

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thanks to Prime Minister of Canada, Paul Martin and to Aileen Carroll, Minister of International Cooperation. The 100 million Canadian dollars provided to WHO for 3x5 and the doubling of the Canadian grant to the Global Fund are tangible demonstrations of your commitment in this area. I also thank the government of UK and Sweden for their financial support to WHO. We urge all countries to increase their contribution to fighting AIDS, taking into account national resources and need. I want to publicly thank, President [Inaudible] of China and the President Museveni of Uganda. Your willingness to speak out on HIV/AIDS and acknowledge the threat this pandemic causes to your nations provide a model for all heads of state everywhere. The presence here today of Sonia Gandhi demonstrates the commitment of India's leadership to tackle the serious AIDS problem in that country. These are just some of the world leaders who have demonstrated their unflagging commitment to the fight against HIV/AIDS. But it is in the communities and the villages around the world that leadership is also demonstrated. The village leaders who defend the right of those afflicted by HIV/AIDS, the community volunteers who help to provide prevention, care and treatment in millions of homes. Family elders, who in their old age now find themselves, caring for extended families and orphans. Rarely will these demonstrations of leadership catch the attention of the world's media. Few are known by name outside of their own communities,

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but they are so important. I salute the community of people living with HIV/AIDS. You have my underserved respect and admiration. It is you we serve. At WHO we are committed to rapidly increasing the availability of our testing and counseling services. We stand uniformly behind the prequalification project, which is ensuring that UN agencies and others can buy safe, effective and affordable medicines for AIDS. We will continue to promote the prevention programs, including the effective use of condoms. We support harm reduction programs for drug users. I know that voices have been raised this week. I know that fingers also have been pointed, but it is through our solidarity that we will finally defeat this menace. This week we have heard many important commitments to increase access to AIDS prevention, treatment and care. I pledge to work together with you in ensuring that these commitments are met. I will continue to ensure that WHO is with you at the forefront at our fight to prevent and treat HIV/AIDS. History will judge all of us by our response to HIV/AIDS. That response must meet the high ambition and the board's commitment of this conference. Let us now go and put it into practice. Thank you very much.

MALE SPEAKER: The final speaker for the closing ceremony, ladies and gentlemen, Dr. Peter Piot, Executive Director of UNAIDS, who has been wondering how many audience has been left for him, but there are plenty in the full

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auditorium. Please sir.

PETER PIOT, MD: Good afternoon. Minister Sudarat, Prime Minister Douglas, Excellencies, dear friends, colleagues, thank you for a great week and it may be hard to believe, but I really enjoyed it. This conference happens in a fundamentally different context from any other conference and I've been to all of them. I truly believe that for the first time there is a chance, a real chance that we will get ahead of the epidemic. And this momentum has its roots in both the science and the activism of the last decades. But our challenge remains how to raise action on both fronts to the level we need to achieve full success. For me this week was clearly about taking responsibility and we heard it loud and clear at this session by the great leaders who took the time to come and address us. And it's now our collective responsibility to make the money work for people and the way we use this opportunity has tremendous implications for the future. We will not get this chance again. Unless we fully embrace country and community ownership, we will be inviting chaos ten years down the road. Unless we invest in institution and human capacity, we will only have applied band-aids instead of building a sustainable response to AIDS. Unless we scale up prevention with a passion and the urgency that is being brought to treatment, access for all will remain a dream. And let me tell you what I think we need to do now. First, ownership. The time for strategies

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imposed from the outside is over. We need to address locally defined needs and allow staff to do their work, but the reality in many countries is quite different today as we heard so many times during this conference. Scores of AIDS donor missions, numerous evaluation frameworks, rival coordination mechanisms, and epidemic of workshops and meetings, and piles of paperwork, fragmentation has real costs in money and in lives. And with new funding and new actors coming in we urgently must turn the three ones principles from a concept to a reality. Second, capacity. One of the most acute challenges we face is capacity building that can deliver treatment and prevention now, but also in 10 and 20 years from now. Such investments should be part of every single AIDS project and should include strengthening community capacity, not only medical institutions. Third, prevention. Between today and the deadline for the 3x5 initiative, 8 million people will become infected with HIV at the current pace. 8 million. And without a greatly expanded prevention effort, treatment is simply not sustainable. And of course we need condoms and we need clean needles, but we need to go way beyond them, way beyond ABC. ABC plus, many times plus. This means promoting education for girls and equality for women as the Global Coalition for Women and AIDS is doing. It means insisting on the human rights and dignity of all people. It means breaking the vicious circle of poverty, lack of nutrition and HIV infection. It means

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involving young people and people living with HIV in the response. And it means avoiding falling into the trap of over medicalizing prevention.

Our response can only be successful if it is comprehensive. And at the Durbin conference 4 years ago I called for moving from the M word to the B word. From millions to billions of dollars in funding for AIDS. The most frequent reaction then was that this was an irresponsible statement for someone in my position, but here we are with around 6 billion dollars available for funding, spent for funding the AIDS response. The Global Fund is up and running. The U.S. Government, the European Union Members, Japan, and the World Bank are bringing substantial new resources to the effort. And this week we heard new commitments from Thailand, the UK, Canada, Australia, European Commission, and the Gates Foundation. So also from that perspective it was quite a good week. Now in treatment, we must move from the T word to the M word. From thousands to millions. And I believe that 3x5 is already changing the dynamics of how we deal with AIDS as we just heard from my good colleague and friend, J. W. Lee. Let me now turn to an agenda that is largely unexplored and that is our long-term agenda. The priorities I have just discussed are acute, but they still largely represent a reactive agenda. Now is the time to move from tactics to strategy. To combine long term investments with crisis management of today. And I didn't'

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hear much of that debate at this conference, but it is vital. And let me mention just a few aspects of it. First, of course, there remains the key issue of fully funding the response, and with Secretary General Kofi Annan, I appeal to all donor nations to contribute their share, including to the Global Fund. But also to all developing nation governments to give priority to AIDS in their budget allocations. And Madame Sonia Gandhi gave us some good news for India. But sustaining the billions will require much more than words and speaking up. It will require results. It will require support from mainstream public opinion in rich countries. And it will require recognition of the need to maintain special funding for AIDS for many, many years to come. And to maximize resource mobilization we will need to use multiple channels and explore new avenues as well. And an obvious resource is to convert the public debt of developing countries for AIDS action. Africa's crippling debt must be relieved. The 15 billion dollars annually that disappears down the money pit every year. That is 4 times more than is spent on health and education, the building blocks of the AIDS response. 4 times. Second, we need to accelerate investments in desperately needed vaccines and microbicides, as well as better treatments in all of them. Third, let's be honest with ourselves. Treatment access today has consequences for the future. It means that increasing numbers of people will be on treatment for life. That's what we

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want. For 40 years or 50 years. And that the more expensive second generation therapies will need to be made accessible globally, just as the first generation. So while we deal with the emergency today, which is real, it's imperative that we plan for a system-aimed effort on treatment. And AIDS is far from being a chronic disease like any other. We are definitely not there yet. And as much as universal access to HIV treatment is about the best we can do against stigma, the impact of treatment will be limited as long as stigma haunts people living with HIV. And then we have the fourth, long term challenge, we barely understand how fundamentally AIDS is changing the very fabric of society and how the worst affected societies will handle challenges such as millions of orphans, children taking care of families, schools without teachers, states without fiscal revenues, fields without farms, and rising numbers of people living in extreme poverty. And finally, the world must accept the exceptionalism of AIDS. There simply is no precedent in history for this crisis. And please, let's not have an illusion that in a few years the world will return to what it was before AIDS. It's simply not possible.

Friends, in short, AIDS has rewritten the rules. To prevail, we too, we must rewrite the rules. And an exceptional threat demands exceptional action, be it on financing, development, be it on trade rules, activist strategies, public

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service delivery, or fiscal ceilings. So let's now design these longer-term strategies, as otherwise we risk discouragement and demobilization and we will achieve out the best results, temporary results only. Therefore, addressing AIDS in the long term will require even more of the best brains, of the most creative entrepreneurs, of the most determined leaders. And I'm committed with UNAIDS to tackle this agenda with you.

Above all, every community needs to rewrite the rules of how it deals with those sensitive issues at the heart of this epidemic. Sexuality, homosexuality, commercial sex, drug use, rape, gender, masculinity. We heard it so many times. But some of the greatest challenges we face today are of our own making. The obstructions of bureaucracy, which I find even in NGOs. The injustice of stigma, the rivalry, the lack of coherence, and the failure of political leadership. There is no time to be divided by institutional agendas. We all have the same goals and we much work together each playing to our individual strengths. And today I reiterate my own commitment and that of the whole UNAIDS family to doing so.

Friends, let's not forget that all the tools to change the course of this epidemic are in our hands as Graca Machal said. But are we really willing to change our institutional behaviors as much as our personal behaviors? Are we ready to radically take on these challenges, to leave our flags behind? Every person in this room will provide part of that answer. But

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what I know is that if we are not willing, we will massively fail. Isn't it after all one of the main lessons of the past 20 years that with AIDS we never gain time when we wait for action, when we are indecisive, when we are divided, when we neglect rights, when we replace science by feel good projects? We fought hard for the money, very hard for the money, and we will continue to fight for more, but now let's fight equally hard for making the money work for people. Thank you very much.

MALE SPEAKER: Thank you, Dr. Piot, for that excellent summary of what we achieved and what are the key issues to be handled in the next rounds of the conferences and beyond. Ladies and gentlemen, that was the final speaker, so please be with us and witness the passing of the torch of the host this year and the next 2-year time. I would like to welcome, Minister of Public Health of Thailand once again on stage, Ms. Sudarat Keyuraphan, please. And Minister Sudarat would like the honor of having Prime Minister, Denzil Douglas of St. Kitts and Nevis on stage with her. Please, Prime Minister. The candle will be representing our will to fight against HIV/AIDS issues and try to embrace them as the lifestyle right now that we have to live with and we have to prepare our walks of life to be ready for it now. The first will be the globe to be presented to Canada, the next host. Please welcome, Mr. Mark Wainberg of Canada and his team to be onstage and receive these symbols from Minister of Public Health of Thailand, witnessed by Prime

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Minister Denzil Douglas. Canada will be the host of the 16th International AIDS Conference and now may we have Dr. Mark Wainberg representing the delegates from Canada saying something for us, please.

MARK WAINBERG: Good day, everyone, Bonjour. It is a great honor for Toronto to have been chosen as the venue for the 2006 International AIDS Conference. And we thank this morning's speakers for their constructive suggestions as to how to make the Toronto conference a success. Standing with me are individuals whose friendly faces represent the diversity of Toronto and we promise you a rich and rewarding experience in 2 years and an atmosphere that will combine the elements of cutting edge scientific achievement and activism. Indeed, some of you may remember that Toronto had in fact been initially selected to host this year's 2004 conference, but that we asked the IAS to defer Toronto until 2006 in the aftermath of the hugely successful Durbin conference that had so much political impact and which clearly demonstrated your desire that this meeting be held in alternating years in a developing country. We also want to thank our Thai hosts for this very successful meeting in Bangkok and promise that we will learn from your experience.

However, I want to state that it is essential that this conference continue to be held on a rotational basis in a developed country in order to keep the feet of government

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leaders in resource rich nations close to the fire. All three levels of our Canadian government are committed to the principles that unite us here and representatives of each of these levels of government are present on the stage with me and I would like to acknowledge them now. First I want to acknowledge the Canadian Minister of International Cooperation, the Honorable Aileen Carroll, who presides over through her ministry one of the largest donor programs anywhere in the world. Thank you, Madame Minister. I want to acknowledge Frank McGee, who is the Director of the AIDS Bureau of Ontario and who is with us today representing the province of Ontario. And I want to recognize Counselor Kyle Ray of the City of Toronto, who has been to many of these meetings and who has been with us from the start of the process in regard to organizing Toronto 2006. All of you have been wonderful to work with and your exuberance will ensure the success of our conference in 2 year's time.

I also want to mention members of our local host committee. Ron Rosenus, Gail Flintoff and Richard Buzjinski, who is also the Executive Director of the Toronto-based ECASO Organization, one of the international NGOs that is a partner with IAS in the organization of these meetings. And among the other friendly faces with me on this stage are also researchers, health care providers, community workers, and people living with HIV. Make no mistake about it; the choice of

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venue for an International AIDS Conference is one that can have profound political ramifications as shown most vividly by the Durbin conference that took place only 4 years ago. Yet isn't it interesting that the decision as to where to host an International AIDS Conference is made jointly by scientists and community leaders and not by politicians? I think we should all be proud of this and certainly I, as a past President of IAS still take tremendously great pride in my own role, together with others in our selection of Durbin as the venue for 2000. Let me remind you that Canada, despite its location in North America, is a more tolerant country than others in our region. For example, we have no restrictions in regard to border crossings by HIV positive individuals. We also take great pride in the fact that we celebrate gay marriages. And we have implemented one of the worlds most progressive harm reduction strategies through our national program of needle exchange. We pledge to you to run a fully inclusive conference in Toronto that will also involve youth at every step and indeed we recognize our responsibilities to reach out to vulnerable youth, not only in resource poor nations, but also in our own country of Canada where far too many such individuals are becoming infected with HIV each and every year. And every single one of these cases represents one too many.

We also are a country of laws and we will do everything that we can to also encourage legitimate protest and activism

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at the Toronto 2006 Conference. But I say that the deliberate destruction of property is not activism, and in fact is abhorred by all the activists that I know. We in Toronto agree with all of you that access to life saving medications, access to diagnostic tests, access to appropriate health care all represent fundamental human rights that apply to all of us regardless of where we live. We pledge to you that our conference will stress our collective desire to attain these goals for all, while also recognizing that it is through cutting edge scientific discovery and political good will that our dreams will be transformed into reality.

We look forward to greeting you in 2006 and will now show you a video that highlights the wonderful, open City of Toronto. Thank you very much. [Video shown]

MALE SPEAKER: Ladies and gentlemen, I hope you remember this 15th International AIDS Conference in Thailand and the last word is see you in Canada. Have a safe trip.

[END RECORDING]