



Permanent Mission of
Malaysia
to the United Nations

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STATEMENT BY

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PERMANENT REPRESENTATIVE OF MALAYSIA
TO THE UNITED NATIONS

AT THE

PLENARY MEETING OF THE GENERAL ASSEMBLY ON AGENDA ITEM 41
(IMPLEMENTATION OF THE DECLARATION OF COMMITMENT ON HIV/AIDS
AND THE POLITICAL DECLARATION ON HIV/AIDS)
NEW YORK, 16 JUNE 2009

Mr. President.

I wish to take this opportunity to thank you for convening this Assembly to once again allow the international community to reflect and assess our implementation of the 2001 Declaration of Commitment on HIV/AIDS and the 2006 Political Declaration. It is timely indeed that we undertake this exercise one year before the goal of universal access to comprehensive prevention programmes, treatment, care and support for people living with HIV/AIDS, and as we move closer towards the Millennium Development Goal 6 of halting and reversing the spread of HIV/AIDS by 2015.

2. At the international level, considerable challenges remain in our fight against HIV/AIDS. Even before the current economic and financial crisis, global progress in halting and reversing this epidemic was uneven, and its expansion was outstripping the pace at which new services are brought to scale. Now however, as stated in the Secretary General's report, the pace of new infections continues to outstrip expansion of treatment programmes. Moreover, there is the danger that the global economic and financial crisis will lead to a decrease in the overall social services expenditure in many countries, including on HIV/AIDS related health treatments, and a contraction of available donor funding for recipient countries. This should remain of concern as the burden of the HIV/AIDS epidemic disproportionately falls on developing countries, but the burden of responsibility fall on all.

3. Barriers that prevent the majority of HIV infected individuals from obtaining equitable and affordable life-prolonging drugs remain. Access to these drugs should

not be restricted by trade and patent related issues. Efforts undertaken to fight HIV/AIDS cannot be done in isolation, but must be approached in the broader scope of addressing the contributing causes to this epidemic

Mr. President,

4. In Malaysia, various screening programs have been developed, and since 2006, more than one million individuals have been screened annually. The increasing trend in the number of individuals screened has revealed that Malaysia is experiencing a consistent decreasing trend in the reported number of HIV cases since 2003 and there are high chances for Malaysia to achieve the target of reducing new cases at the rate of 15 per 100,000 of the population by the year 2015. However, the challenge remains, especially in the feminisation of HIV/AIDS, which is seen not only in our country but worldwide.

5. The Government of Malaysia continues to implement our National Strategic Plan to respond to HIV/AIDS that provides a framework for our response over the 5 year period from 2006 to 2010. This Strategic Plan represents the Government's continued political and financial support to effectively address the issue, and is a strong foundation for coordinating the work of all partners in health and for working together with civil society to reduce the impact on the epidemic in the country.

6. With the majority of HIV/AIDS infection in Malaysia attributed to injecting drug use, 60% of our overall budget made available to HIV/AIDS response is through the Harm Reduction Approach. In reducing vulnerability among injecting drug users and their partners, harm reduction initiatives are being implemented consisting of drug substitutions therapy, a needle and syringe exchange programme, and increased condom use. We continue to scale up the drug substitution program, namely Methadone Maintenance Therapy (MMT), with the aim of reaching out to at least 25,000 opiate dependent among injecting drug users by the year 2011. We have also approved the provision of MMT in closed and incarcerated settings, specifically in prisons. Additionally, 2008 saw scaling-up of our Needle and Syringe Exchange Program with the participation of Government Health Clinics in addition to the Drop-in Centres managed by community based organizations through government grants.

Mr. President,

7. Despite the country's achievement in its implementation of the Harm Reduction approach, reaching out to the other marginalised and most-at-risk populations, namely men who have sex with men, sex workers and transgender remains a significant and formidable challenge for Malaysia. Realizing the fact that reducing HIV vulnerability among these groups is pivotal in halting the spread of HIV within the country, the Government has been working closely and in partnership with community-based organisations and other NGOs in ensuring that these

marginalized communities have access to HIV and AIDS related information, condoms and voluntary counseling and testing (VCT). Increasing the coverage and quality of outreach programmes conducted by community-based organisations has also been made a priority.

8. With regards to young people, the Government of Malaysia continues to conduct a healthy lifestyle campaign which involves the 'promotion of good moral values' and healthy lifestyle practices, early detection, effective counseling as well as mobilizing community support and participation. HIV education has been incorporated into various existing programmes such as school health programmes and healthy lifestyle campaigns.

9. The provision and access to Anti Retroviral Treatment is an essential component of all national responses to HIV and AIDS. Access to cheaper drugs has made a major contribution in enabling countries such as Malaysia to expand its treatment options and capabilities. The cost reduction has also allowed for a wider range of Anti Retroviral drugs to be subsidised by the Government, making it possible to provide first line treatment accessible to all patients at no charge at government hospitals and clinics. A recent development in Malaysia with regard to improving access to HIV treatment has been the provision of Anti Retroviral Treatment to those living with HIV in prisons and Drug Rehabilitation Centres.

Mr. President,

10. We are continuously challenged by the complexity of responding to the AIDS epidemic both globally and in our respective countries. There are many challenges still before us and we must focus our energies on more action and more leadership building. Malaysia reaffirms its pledge that it will work towards realizing the Declaration of Commitment on HIV/AIDS and the Political Declaration on HIV/AIDS and will continue its concerted efforts towards reducing the impact of and contain the spread of this epidemic.

Thank you.