



# PHILIPPINES

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## STATEMENT

by

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at

the Plenary Meeting  
on the

Implementation of the Declaration of Commitment on HIV/AIDS  
and the Political Declaration on HIV/AIDS

65<sup>th</sup> Session, General Assembly

## Philippine Statement

The President of United Nations General Assembly  
The Secretary General United Nations  
Presidents and Heads of Member States  
Executive Director UNAIDS  
Ladies and Gentlemen,

As the global community is expected to boldly implement revolutionary strategies for an AIDS-free world, the Philippines with six other countries face challenges similar to the early years of the epidemic when high prevalent countries struggled to minimize the impact of a then rapidly growing epidemic.

In contrast, at least 33 other countries have been able to reduce their HIV incidence by 25% between 2001 and 2009. Such efforts to reduce the burden were generally believed to be consistent with the targeted outcomes.

This is important since the accumulated experience to reverse these trends in the past thirty years must be translated and shared with now similarly-affected countries that struggle from inadequate resources to ensure and sustain universal access as well as eliminate discrimination. This appears very advantageous and practical to learn, following a "best practice approach" model, albeit, complementing the secondary appeal of variation and selection in dealing with the epidemic.

However, since HIV is a chronic illness with acute life-threatening complications at later stages of its natural history, no country is exempt from currently coping with significant number of Persons living with HIV and AIDS even with a Zero strategy, notwithstanding the gains achieved from universal access.

The factors that influence the evolution of HIV epidemics remain complex as they may also influence other developmental issues like poverty and sustainable development. It is precisely the knowledge of what the drivers of the epidemic are that makes for fine argument how to confront it as efficiently directed and not which borders on trial and error. To say the least that treatment-for-prevention is a game-changer, also is to dangerously abandon other fundamental means of prevention and control in key affected population other than heterosexual concordant couples and to easily ignore the continuing issues with antiretroviral treatment. It is therefore paramount that a zero strategy is sound and realistic given the evolving epidemiology of the disease, the emergence of new technology to halt its spread as well as the collective effort of nations and organizations to end the epidemic.

Finally, the promises contained in the declaration should be taken seriously. Accountability must be preserved within nations and organizations. There must be continuous feedback that aims to alter decisions and even dismiss existing assumptions if only to do things better and sooner. Let us not prevaricate as the modern plague virus continues to mutate, perhaps as easily as we can imagine. Thirty years is enough to justify the existence of HIV. We all must remain united as ever before.