



AIDS 2018



Medical care for criminalized populations: scalable or doomed?

Satellite Symposium

July 23rd Monday 2018 | 12:30 – 14:30

22nd International AIDS Conference

RAI Amsterdam Forum

Médecins Sans Frontières and Médecins du Monde invite AIDS 2018 participants to discuss concrete solutions to fulfill key populations' right to health, and progress towards the end of HIV.

The symposium will include program showcases, experience sharing, panel discussion and a lively debate on structural issues and critical enablers for key populations health-programming.

Welcome and opening

Michel Kazatchkine

United Nations Special Envoy for HIV/AIDS in Eastern Europe and Central Asia

Chairs

Erika Castellanos

Global Action for Trans Equality (GATE)

Tom Ellman

Médecins Sans Frontières (MSF)

Closure

Ernst Wisse

Médecins du Monde (Mdm)

Panelists

Anette Verster Digna

World Health Organisation (WHO)

Monique Middelhoff

Ministry of Foreign Affairs, The Netherlands

Judy Chang

International Network of People Who Use Drugs (INPUD)

Kholi Buthelezi

Sisonke movement, Sex Worker Education and Advocacy Taskforce (SWEAT)

John Mathenge

Health Options for Young Man on HIV/AIDS/STI's (HOYMAS)

Welcome and Opening *Michel Kazatchkine*

12:40 – 13:20 PART I: Show cases Chair: Erika Castellanos

Building Peer led SW & MSM programmes in MSF HIV/TB projects:

Experience from MSF program in Malawi and Mozambique *Lucy O'Connell*

Community based Harm Reduction to fight high HIV prevalence among drug

users in the north of Myanmar: Experience from MDM program in Myanmar *Asem Jiten*

Five pillars of medical care for people who inject drugs:

Experience from MSF Manipur project in India *Sabrina Sharmin*

Health promotion and violence prevention among Sex workers in Moscow:

Experience from MDM program in Russia *Svetlana Tsukanova, Natalia Volkova*

13:25 – 14:20 PART II: Panel discussion and debate Chair: Tom Ellman

Closure Ernst Wisse

Why should you attend?

In 2016, 80% of new HIV infections outside of sub-Saharan Africa, and 25% in sub-Saharan Africa, occurred among key populations and their sexual partners: men who have sex with men, sex workers, transgender people, people who inject drugs and people who are imprisoned or subject to other forms of incarceration. Global recommendations highlight the importance of a dedicated response, tailored to the specific medical and other needs of these groups. Yet such responses are rarely seen at scale. In most contexts local laws criminalize these populations and prejudice and stigma deny them access to health care. Where there is a response to their needs it is too often dependent on NGO and CBO activities and external funding. As international funding declines, particularly in 'middle-income countries' is the future response scalable or doomed? The session will involve lively debate as well as practical discussions on what needs to change.



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<http://programme.aids2018.org/Programme/Session/1479>



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