

**Newsmaker Interviews: Craig McClure
XVI International AIDS Conference
August 12, 2006**

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JACKIE JUDD: Thank you very much for joining us today. The theme of this conference is Time to Deliver, and you could read that in any number of ways. What does it mean to you and how was it selected?

CRAIG MCCLURE: It means a few things, really. The most important, I think, is that it stresses the urgency of delivering universal access to treatment and prevention throughout the world for people living with HIV and people vulnerable to HIV and AIDS.

I think, also, that Time to Deliver signifies that we have all of these new resources now, new commitments to treating and preventing HIV and AIDS. For example, 10 years ago in 1996, the last time the conference was here, about \$300 million a year was spent on AIDS. Now, it is close to \$8 billion. That is not enough. UNAIDS estimates we need \$15 billion per year, but I think that the Time to Deliver theme says that we all need to be held to account, all stakeholders, for the commitments we have made, the resources we have, and start to begin to break the back of this epidemic.

JACKIE JUDD: It seems like a theme that would only be appropriate at this stage of the epidemic. In other words, it

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would not have worked or been appropriate, perhaps, 10 years ago.

CRAIG MCCLURE: I think so. We know now, certainly, we need newer technologies. We need to develop a vaccine, microbicides, new treatments, and maybe ultimately one day, a cure, but we know that now we have the tools at our disposal to both prevent and treat HIV and AIDS, if we scale them up, so that they are universally available.

You asked me about how the theme was selected a moment ago, and it was an interesting process. We have five co-organizers: UNAIDS, the three international community organizers, and the local host, plus a Canadian community co-organizer, Canadian AIDS Society, in addition to the IAS. All of us really sat together over a number of months, brainstormed different ideas for the theme, but I think we all came to the conclusion, as you said, that this is really a moment in time in the epidemic that we need to seize. We need to take advantage of and really it is the time to deliver.

JACKIE JUDD: In your opening letter to the delegates, you said that your hope is the conference will be heavy on evidence, light on rhetoric. What do you mean?

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CRAIG MCCLURE: We have really worked hard over the last couple of years to make some changes to the programmatic structure of the conference. It is important, of course, to have leaders, all types of leaders attending. There are three main components to the conference: science, community and leadership. But what we thought was important was that we did not just have leaders standing up on their own making rhetorical comments about what needs to be done in the epidemic. We needed to restructure the program so that there are more opportunities for leaders, communities and scientists to interact with one another.

This epidemic and the response to the epidemic can often be very polarized in terms of diverse opinions on how things should be done. We thought that this conference, the important thing about this conference, is that those diverse opinions are shared, debated, discussed up on the stage. That was really a critical thing for us to do.

JACKIE JUDD: When you talk about the emphasis being on evidence, are you talking about evidence in the scientific sense? What?

CRAIG MCCLURE: We are talking about implementing programs or research on a grand scale that is based on the knowledge that we already have, so proven interventions,

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evidence, meaning both scientific evidence and evidence on the ground in terms of what really works, and what doesn't work. Being able to explore that evidence, whether it's programmatic or scientific in an honest and open way, so that we do not continue to make mistakes, and that we expand where we have learned where we are making successes, and duplicate or replicate those successes on a grand scale.

JACKIE JUDD: You have not used the word yet, but I think what you are getting at in part is accountability.

CRAIG MCCLURE: Absolutely.

JACKIE JUDD: How do you link this conference to accountability going into the next one?

CRAIG MCCLURE: This time, for the first time in the history of the conference, we will be producing afterwards a policy report that really documents what were the key points for discussion, the key areas where evidence was presented, either research finding or programmatic evidence. Document those key areas that are discussed over the next week, and hopefully chart a bit of a direction for the future, in terms of the next two years, so we can measure at the end of those two years our own accountability as to how we implemented that

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evidence. How we implemented the results of those discussions. How we moved maybe, hopefully, beyond some of the controversies in HIV and AIDS.

I am really excited about that policy report. It is something we have not done before. We hope that it will be something that we can look back on two years from now and say, "Well, these were the main areas of the discussion. This is what was learned and shared, and these were the directions that people pointed us towards for the future. Have we been accountable to those directions? Have we moved that way or not?"

JACKIE JUDD: It seems like an obvious thing to do, and I'm sitting here wondering why it was not done earlier.

CRAIG MCCLURE: There have been a huge number of changes to the conference, and a lot people do not realize that up until Bangkok two years ago, the conference was primarily organized by a local entity. The International AIDS Society and the co-organizers have a lot of input in terms of the design of the program, but the implementation of our decisions was done locally. So what we ended up having was a staff that was recruited on the ground locally, temporarily. When the conference ended, they were gone. Sadly, not a lot of institutional memory was built up, so there was not really the

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capacity or the mechanisms to learn as much as we could from one conference to the next.

That is now just changed. I talk about this often with a lot of people, and they can not believe that this was the case, but like other areas of the epidemic, our response is proving, becoming more effective. We are becoming more accountable. The conference itself is one thing that is becoming more accountable than it was in the past.

JACKIE JUDD: You became the executive director of the IAS just before Bangkok.

CRAIG MCCLURE: That is right.

JACKIE JUDD: I saw you quoted as saying one of the things that appeal to you was that the autonomy of the IAS. It seemed that you were implying was that this is a place that offers AIDS researchers a home free of ideology, free of politics. I would ask you then, what does, in your view, the IAS offer in the off years when there is no conference?

CRAIG MCCLURE: Of course, the International AIDS Conference is and will continue to be our primary platform, if you like, for global advocacy, for sharing scientific research of our members and others, but we have a five-year strategic

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framework now that focuses on really three areas: education, networking and promotion at best practice. Now that includes conferences, but also small forums for resolving, exploring particular issues.

This year, we focused on pre-exposure prophylaxis, the potential use of antiretroviral drugs to prevent HIV, taken in communities most at risk on a daily basis. Almost like malaria prophylaxis, or birth control. It has been a very polarized issue, research into pre-exposure prophylaxis. What we did was bring together some of the trial sponsors, the research sponsors, community groups involved in the trials, governments and the researchers themselves, to try to resolve some of the ethical challenges of the research, the operational challenges of the research. What we intend to do is much more of this, of these smaller forums to resolve controversial issues in HIV. Share the evidence and point a direction to overcoming some of those challenges.

In addition, policy advocacy work is an area that we are expanding. Certainly, as a membership society of people working in HIV throughout the world, our primary focus in policy and advocacy will be on supporting our members, expanding human resources for HIV and AIDS. It is quite well known now that one of the big challenges to scaling up prevention and treatment is the fact that there just are not enough health workers in developing countries. That is a

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primary focus of our work in the policy advocacy arena. These are just a few examples.

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