

Ask the Experts with Peter Piot November 19, 2003

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JACKIE JUDD: -- Good day, I'm Jackie Judd with the Kaiser Network and this is *Ask the Experts*. Our guest is a leading voice in battling the global AIDS epidemic. Peter Piot heads UNAIDS. It is the umbrella group representing nine international organizations including UNICEF, the World Bank, and the World Health Organization. You can ask your question by e-mail. You can send it to us now at ask@kaisernetwork.org. Or you can call us at 1-888-524-7378. That's 1-888-Kaiser-8. Peter Piot, thank you very much for joining us. I think I'll ask the first question. Last night here in Washington, House and Senate conferees in Congress approved two point four billion dollars for the global AIDS effort, particularly in Africa. About four hundred million more than the Bush administration had last asked for. How important is that money? And does it act as an incentive to other western nations?

PETER PIOT: -- I think this is actually a historic decision by Congress to devote two point four billion dollars to the AIDS effort. Frankly when you look where we were with the AIDS epidemic and the money that was going to it, besides UNAIDS, two hundred million dollars was spent on eastern developing countries. This year we'll be closer to four and a half billion dollars and this represents about half of all money from donor countries that is going to the fight against AIDS. And I hope that European countries will follow and that

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Japan will follow. So this is really hope giving. But, more is needed.

JACKIE JUDD: -- Originally that figure was supposed to be three billion dollars. So it's more than the last request from the White House, but less than what was originally thought would be approved. So is there any disappointment tinged with the optimism?

PETER PIOT: -- Well there's always, I mean I'm always disappointed and I always want more but when I look where we were a few years ago, this is a major leap forward. And the big challenge today is now to spend this money well, to spend it wisely, to make sure that people benefit from it, and that we put in place the mechanisms to do that. But I definitely hope that next year it will be more. We will definitely get to the three billion as was promised in the State of the Union.

JACKIE JUDD: -- Is spending it wisely as difficult as getting it approved?

PETER PIOT: -- Both are difficult it seems. NO other country has such a complicated budget process as the U.S. administration, the U.S. government. But spending it wisely will not be easy, but I think we are not yet at the point where the capacity in developing countries, in other words to deliver treatment prevention that that capacity will not be able to spend the money that is available. We are not there yet. We are not there yet in terms of major cities in the developing

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countries. They still have a much bigger capacity to deliver treatment and care for those who are infected than the money that is available, so there's, the money is the problem. We still have not engaged youth organizations. We have not engaged all the churches, etcetera to make sure that the message on prevention is delivered. So we still have a long way to go and more money will be needed in order to stop this epidemic.

JACKIE JUDD: -- You mentioned youth organizations as it happens; one of our e-mails that we have received already today has to do with young people. This is a question from London, from a young person: "What steps should governments take to insure that young people are involved in developing policy and programs which aim to meet their needs vis-à-vis AIDS?"

PETER PIOT: -- Well you see one of the main lessons of the last twenty years is that you can't impose anything on people in terms of HIV prevention. You need to involve them. And if you want to reach young people, which is extremely important in this epidemic, then you have got to work with young people in order to make sure that the messages are there. Young people can be involved like austere educators. MTV has probably prevented more HIV infections than any doctor in the world. So that is why it is so important to engage young people. And there are many mechanisms. We know that in some

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countries, for example, youngsters are involved in the policy development. But specifically when it comes to the tailoring the messages and doing the job.

JACKIE JUDD: -- You were on the BBC a couple of days ago in London and they recently did a survey about what young people should know, what they should know and when. You were surprised by the findings. Tell us about it.

PETER PIOT: -- Yeah, there was one finding that I was really surprised by and that was the answer to the following question. Do you believe that children, children under fourteen, should be taught that condoms protect against AIDS? Because this is one of the more controversial issues and when it comes to HIV prevention. And across the world, the overwhelming majority of respondents, this was a polling fifteen countries from China to the U.S. to South Africa. The overwhelming majority said yes, it is necessary. And that included deeply religious countries from Bangladesh, Indonesia to the United States. And there is clearly a disconnect between often those in power who feel that this may you know offend a majority of the population and to what people think. Most parents don't want to have their kids catch the HIV infection because all of them, and that's a top priority we know, and that's why it is important to give the right information. Not only on condoms, yes, but also how to prevent becoming infected through abstinence and being faithful.

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JACKIE JUDD: -- We have a call now from South Carolina. A lady from South Carolina. Go ahead caller; you're on with Peter Piot.

FEMALE VOICE: -- Hello Dr. Piot. I understand (unintelligible) taking a break to work on the presidential campaign with the campaigns coming up, what sort of issues or positions would you like to hear the candidates talk about?

PETER PIOT: -- I couldn't understand it.

JACKIE JUDD: -- Could you ask again.

FEMALE VOICE: -- Sure, I'm taking a break from working in the AIDS advocacy field to work on the presidential campaigns that are coming up in the United States. And I wanted to hear Dr. Piot's thoughts about what sort of ideas or policies would he like the candidates to put forth.

PETER PIOT: -- Well from my perspective, which is the global perspective, we are dealing mostly with the problem in developing countries is that one, dealing with AIDS is a non-partisan issue and I've seen that it should go across the whole spectrum. Secondly, the United States as the leading country in the world, the world leader on many aspects, on the economy, politically, should also be a leader in the fight against AIDS globally. And therefore that it is not only a matter of voting money in Congress, but also making sure that AIDS is part of foreign policy, or foreign trade, that medicines are being provided to those who need it, and that also there is

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substantive increase in the resources that is going to fighting AIDS in the developing world.

JACKIE JUDD: -- So, without commenting on the specifics of what candidates may or may not be saying about the policies of AIDS, do you think it's even an issue? Is it on the radar here?

PETER PIOT: -- I think that for the majority of people in the U.S. and in other western countries, the perception is that AIDS is gone as a problem, particularly since treatment became available. People are dying much less. And it is an issue for very marginalized populations. So it is not on the radar screen. I also see much less reporting on AIDS. I know from journalists how difficult it is often to place an AIDS story. And that must change. Because in the United States itself, every year like forty thousand people are infected with HIV. So, another issue I would like to raise with any presidential candidate is to make sure that a good job is done on AIDS in this country, just as in any other country. That's also a contribution to global effort.

JACKIE JUDD: -- Okay. Let's go global again. This is a question from California, from Berkley, the University of California. What has been, in your mind, the most successful models for drug distribution in the developing world?

PETER PIOT: -- We have different types of drug distribution, medicines distribution in the developing

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countries. A country like Brazil for example, has shown that using the public sector with municipal clinics, through the whole infrastructure that already exists, that that is, was absolutely fabulous to provide treatment to those who needed treatment for people with HIV. When we come to Africa, distribution of medicines is a real problem. And if we would rely only on the public sector, on public clinics, I don't think we have a chance to make sure that millions of Africans who need it will be treated. So we need to use the private sector, mission hospitals, why not Coca Cola, they've got the best distribution system in Africa. And making sure that that is very well managed and that's one of the big challenges now for reaching the goal of treating three million people by 2005 in the developing countries.

JACKIE JUDD: -- Would you, do you want to address Brazil at all?

PETER PIOT: -- Well I think Brazil has overcome (unintelligible) in a unique, is a unique system. How many other countries have a fairly well functioning public network of clinics in every city. And so it was enough to add the drugs, the antiretroviral drugs and to introduce training of nurses and doctors and here we go. Whereas in the poorer nations in Africa, this will be much more of a challenge. Although I must say now in South Africa, where the government has now decided to also roll out treatment programs for those

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who need it, they've got a much better infrastructure than the others. So we'll have to think out of the box. Not only go for the doctors, the nurses in the, in official clinics and in government clinics, go to the private sector and also involved community health workers who can supervise the provision of treatment.

JACKIE JUDD: -- You spoke a moment ago about AIDS fatigue. When it comes to enlisting the support of the private sector, how much AIDS fatigue do you sense?

PETER PIOT: -- When I look at developing countries, particularly in Africa, the private sector is now really getting engaged. Let's not forget that in South Africa, who started providing treatment for those who have HIV? It was American; it was the diamond mines in Botswana, etcetera. Volkswagen, Daimler-Chrysler, and so on. It was not the government. When it comes to the west, I see a lot of AIDS fatigue. Not only in companies but also in the media and in, everywhere.

JACKIE JUDD: -- Okay. We have another call. This one from Virginia, a gentleman from Virginia. Go ahead caller, you're on.

MALE VOICE: -- I teach graduate students in public health and my concern is they talk about AIDS, but they sometimes forget that the behaviors that relate to AIDS also relate to other sexually transmitted diseases such as syphilis,

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hepatitis B, gonorrhoea and Chlamydia. How can we improve the message so that when we talk about AIDS people understand we are talking about all the sexually transmitted diseases?

PETER PIOT: -- Well you've got a point and let's call them classic sexually transmitted diseases like syphilis and gonorrhoea, they actually increase the risk of transmitting of HIV. But the truth is also that if we apply well all the prevention methods to prevent sexual transmission of HIV, condom use, being faithful, that works equally well for gonorrhoea, for syphilis. So that will be a major benefit. And then secondly, the big difference between HIV infection and syphilis and gonorrhoea is that you can treat syphilis and gonorrhoea with antibiotics in a very well prompt way.

JACKIE JUDD: -- Let me remind our viewers for a moment, the phone number that they can call in to if you'd like. It's 1-888-524-7378, that's 1-888-KAISER-8. We had a question e-mailed to us from Moscow, earlier in the day. Today Russia and China are facing some of the fastest growing HIV epidemics in the world. Yet the leaders of neither country, says this writer, have given a speech specifically addressing HIV/AIDS. What will it take for Moscow and Beijing to respond to the threat of AIDS? And what is UNAIDS doing to insure that these countries act before it is too late?

PETER PIOT: -- I was in China and Beijing a week ago and the government now, the central government in China, really

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opened up on AIDS. And the government has issued five commitments to deal with this epidemic. And there, if these five commitments are applied, and that goes from pretreatment to those who need it and who are poor, to organized wide spread awareness campaigns etcetera. Then I think there will be far more openness and it's a good start. The challenge is, in China, to make sure that at every level this is big country, let us not forget, -

JACKIE JUDD: -- It's big and it's poor.

PETER PIOT: -- It's poor. It's very decentralized. But every province, every county, tackles this issue. And we've seen results, what the damage can be economically and politically of covering up an epidemic and also how big the resistance was at the local level to deal with it. In Russia, I think there we are faced with a different situation. In Somoblast (misspelled?) there is really a lot going on. But we need more commitment and greater leadership (unintelligible).

JACKIE JUDD: -- Okay. This next question came from Vancouver, Washington. Here in the United States, this writer says, some are noting a dramatic shift from science based approaches to less scientific and even non-scientific ideological based approaches to the HIV/AIDS crisis. What are some of the dangers you see in these approaches, if you agree that it's happening? And what might be some of the longer term repercussions? And how can we best remedy this situation?

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PETER PIOT: -- The question is a big vague but I lets assume that I, that this is about the fact that there may be resistance to promotion of condoms, for example, to prevent the spread of HIV. But our position in UNAIDS is very clear. We've got to make sure that money against AIDS is well spent. And that it is spent on scientifically proven effective measures. And that means that for prevention for example, we need combination preventions. Just as we need combination therapy for treatment. And that means that we've got to offer a whole package and a whole range of options. Postponing first sexual intercourse, particularly for young children, being faithful to your partner and making sure that condoms are there and are being used properly for all the other instances.

JACKIE JUDD: -- We have a caller now, a gentleman from Honolulu. Go ahead caller you're on the air.

MALE VOICE: -- Hi, I kind of have a two part question. I was recently in Botswana and I noticed that the people in most villages seem to be left out of the treatment option. They simply just can't get to the capital city on a daily basis. And I was wondering what can be done to reform this? Second is, the issue of stigma. AIDS is highly stigmatized and in some of these remote villages, or even throughout the country, and I was wondering what can be done to help with the stigma, the issue of stigma?

PETER PIOT: -- Well the first question, in terms of

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how to reach people in remote areas that will always be difficult. And that's one of the tragedies of developing countries that you've got often all the resources concentrated in the cities. My answer to it is that in the first place, let's make sure that there, where there are services, in the cities, that we make sure that treatment for HIV and prevention services are already available. And that's not yet the case. So let's start where it is feasible and where we can have results. And in the meantime we'll have to make sure that in a country like Botswana, that there is outreach. It is a country that is not the poorest in the world. But with AIDS it will become poorer again. So the stigma question that you are posing is extremely important. Because we know that one of the main reasons that people are not coming forward for testing, for treatment even, is because of the shame and the stigma and the discrimination associated with AIDS. So what can we do about it? First of all, making sure that campaigns against stigma are equal part of fighting AIDS just as prevention campaigns and campaigns to make sure that people are treated. Secondly, the fact that treatment becomes available will also decrease stigma because it becomes a more treatable disease. Thirdly we've got to support groups of people living with HIV so that people can come out, become public about their issue so it becomes far more part of normal life. Often, you know, stigma as such is there because it's the unknown, it's fear,

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but when it's someone you know you can put a face on it, you can see that it's someone like you and me - that makes a big difference.

JACKIE JUDD: -- And as you would expect, the stigmas that you are describing is more pronounced in countries that are now grappling with the epidemic and less so I would presume in places like Africa that have more of a history.

PETER PIOT: -- Oh absolutely. When I look at China or India, the stigma is far, far bigger than in Africa where there is hardly any family where, that doesn't have a family member with HIV, or has lost someone with HIV. It makes a big difference. It's closer to home. So you know, it's not those far away bad people who have it; it's my brother, my sister, literally.

JACKIE JUDD: -- We have another caller from Massachusetts. Ma'am, go ahead, you're on the air.

FEMALE VOICE: -- Hi Dr. Piot. My question is, what countries have the best models to prevent mother-to-child transmission of HIV/AIDS?

PETER PIOT: -- We just recorded in, on the progress and the response to AIDS in all countries in the world. We reported to the general assembly of the United Nations. Some of the things that UNAIDS is doing, trying to see who is making progress or not. And in terms of mother-to-child transmission prevention, for Africa, Botswana was number one. It was the

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best country, but even there only about thirty percent of pregnant women will have access to mother-to-child transmission prevention programs. And then Uganda was next. But in most countries the reality was that less than one percent of women who were pregnant will have access to these services. In other parts of the world, like in India, India has a very big program. But I don't remember the actual reach there.

JACKIE JUDD: -- Can you go into more detail about what Botswana is doing?

PETER PIOT: -- Botswana has, on the one hand, the highest rate of infection, HIV in the world, there are close to forty percent of the adult population is infected. On the other hand, I think it has a stellar response, led by the President, President Mogae himself, and also it is now into a unique experiment whereby not only is there widespread prevention and awareness campaigns, also a push for people to know whether they are infected or not through widespread testing and counseling, but also it is rolling out treatment for those who are infected with HIV and need it. So I think it is an all inclusive approach and that is what we need.

JACKIE JUDD: -- Okay. An e-mail just came in, "Dr. Piot, how can nations contribute to the development and eventual distribution of an AIDS vaccine to help fight the epidemic?"

PETER PIOT: -- There were now twenty years after the

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discovery of the cause of AIDS, HIV, the virus. And when that was found, everybody thought okay, in a few years we will have a vaccine and we'll stop this epidemic. But twenty years later still not vaccine. And the world needs to invest far more in vaccine development. And I think there are some initiatives that are coming up. On the one hand, we need international AIDS vaccine initiative for example, that is funded by private money including from Gates. There is an initiative that is being announced around the Gates Foundation, and including also pharmaceutical companies and National Institutes of Health, and that's going to boost research in AIDS vaccines. But the reality is that the way to find an effective vaccine will be to test available candidates and to see whether it protects people or not. There are no short cuts we can take there.

JACKIE JUDD: -- By what year, do you now believe there will be a vaccine, if there will be one at all?

PETER PIOT: -- Well in order to be very realistic, five years seems to me the absolute minimum time to have an HIV vaccine. And so, basically before 2010 I would be surprised but I hope I'm wrong.

JACKIE JUDD: -- Okay. We have another caller, a lady from Virginia. Go ahead ma'am; you're on the air.

FEMALE VOICE: -- I had a question in regards to children directly affected by HIV/AIDS often some wonderful children. A lot is being said now, about treatment and also

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prevention, but not much is being said about the rehabilitation of orphans and vulnerable children. What is your organization doing to prevent them from going, falling back into a life of crime, like making it a vicious circle? And then probably they fall into a life if they become HIV positive, or have the risk of getting the virus. So that's my question.

PETER PIOT: -- Well thanks for the question, it's definitely true that there are fourteen million orphans because of AIDS in Africa. The children who are affected, that's one of the biggest impacts of the AIDS epidemic and that goes across generations. And it is a problem that has been neglected, I must say. But now, UNAIDS, particularly with UNICEF, we are setting up programs to make sure that children who are orphaned, remain in a family, that they have a roof, that they have food, and that they can continue to go to school. That's basically what we are trying to do. Setting up special orphanages and so on, that's not an option. We have to make sure that children grow up in the community, in families, and because the danger, as you say, is true that we will have a whole generation, millions and millions of children who grew up without any reference to the family, to any normal community, become street children, will go into prostitution, and will become very vulnerable themselves to becoming HIV infected later on. And may even become part of armies of warlords and so on.

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JACKIE JUDD: -- Another question from, well I'm not quite sure where it's from, but I'll read it to you. "What do you think the implications are of resistance to traditional AIDS medication in poor countries?"

PETER PIOT: -- What we are seeing happen everywhere when you introduce treatment for HIV, that after some time a certain percentage of patients develop resistance to these drugs. What does that mean? It means that these drugs are not effective any more to treating the person who is infected with the resistant virus. And one of the major factors for that is when you don't take your medication properly. When you take less than necessary. So there is a danger, for example, if in poor families, in poor countries, that one person, let's say the husband is, or the wife is treated and that they share the capsules and that they, so only half the dose is taken. Or the people don't take the, all the necessary doses. So that's a real risk. That's why it is so important to have strong community engagement that community workers will talk to the patients, will make sure they take the drugs, and that there is, it's not just parachuting the drugs. Because that would lead to chain disaster because then the drugs would become well obsolete, would not be effective any more.

JACKIE JUDD: -- A final question, because we are running out of time. Next summer in Bangkok is the

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International AIDS Conference.

PETER PIOT: -- Right.

JACKIE JUDD: -- What is your singular hope of what will come out of that convention or conference rather?

PETER PIOT: -- It is the first conference of its kind that is happening in mainland Asia. We had one in Tokyo, in Yokohama, about ten years ago. And I hope it will really wake up, be a wake up call, and shake up Asia in the first place to tackle on this epidemic. There is still time to prevent an Asian epidemic, but the choice is really for Asia to act now or pay later. To have millions and millions of infected people with all the consequences for individuals, their families, and their economy. That's what I hope.

JACKIE JUDD: -- Okay. Well the beauty of web casting is that we can go a little longer if I want to. And we do have one final call from Australia, so I just had to get to this person. Sir go ahead.

MALE VOICE: -- Good morning Dr. Peter Piot. This is Yosama (misspelled?) from Australia, Melbourne. My question is about the so called (unintelligible). If there is preventative actions today, so called (unintelligible) tomorrow. What is the UNAIDS plan of action for the (unintelligible) centers? Will you consider them as basically program for a local incentive? Thank you.

PETER PIOT: -- Well thank you for the question. That

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is exactly the point that I made about the Bangkok Conference. When I think of Asia, let's take Indonesia, or even China, the prevalence of HIV is still very low. And I absolutely agree with you. If business as usual continues, this will unavoidably lead to major epidemics, millions of people infected. And that's why we are concentrating our efforts to a large extent, in increasing the awareness, the leadership on AIDS in Asia particularly. And for example, myself, I'm traveling more to Asia these days than to Africa. Not that Africa doesn't have a big problem, but in Africa it is not a matter of increasing awareness. Everybody knows that AIDS is a problem. Most people are affected if not infected. And so there the agenda is really do it, implement the programs, make sure the money is there, and it's well spent. In Asia we are still largely in the phase of denial. And of not taking on AIDS as a matter of national priority.

JACKIE JUDD: -- thank you so much for your time today. We appreciate it. Dr. Peter Piot is the Executive Director of UNAIDS. Thanks to all of you for calling in, for writing in, my apologies for not getting to all of you. This has been *Ask the Expert* and I'm Jackie Judd with the Kaiser Network.

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