

## Special Feature: International AIDS Conference 2002

### Introducing the Barcelona Conference

THE International AIDS Conference is the largest global conference on all aspects of HIV/AIDS. The Conference was organised as an annual scientific event between 1985 and 1994, and is now held every two years through the efforts of the International AIDS Society, co-sponsors and local organisers.

The XIV Conference was held between 7 and 12 July 2002 at the Palau St Jordi and Fira de Barcelona, Spain. Many individuals and agencies were involved in the organisation of the Conference, including sponsors, cooperating organisations, and the following co-organisers – the Global Network of People living with HIV/AIDS (GNP+), International Community of Women living with HIV/AIDS, International Council of AIDS Service Organisations (ICASO), Joint United Nations Programme on HIV/AIDS (UNAIDS), and the Spanish Network of non-governmental organisations “Red2002”.

The theme of the XIV Conference is “Knowledge and commitment for Action”. As a major international event of the year, the Conference had attracted over 15000 participants coming from all over the world.

The main goal of the Conference was to ensure that knowledge gained from science and experience was translated into action. The principal objectives were, according to the “Barcelona Framework”:

- (a) to maintain and increase the scientific quality of the meeting;
- (b) to integrate science and action;
- (c) to highlight prevention science;
- (d) to highlight the burden of intravenous drug use in the pandemic; and
- (e) to facilitate participation from all around the world, including countries in Latin America and the Caribbean.

The XIV International AIDS Conference, like the previous conferences, is composed on both scientific activities and community programmes. The Opening Ceremony and Closing Ceremony featured speeches by guests of honour and cultural performances. These, together with the daily plenaries by state-of-art experts, were held at the Palau St Jordi, which was a 20-minute walk from the conference centre.

The main programmes of the Conference were oral and poster presentations centering on seven tracks allocated to two components of *Science* from Tracks A to E, and *Action* from Tracks F and G. A total of

This issue of the *ACA Newsfile* is devoted to the reporting on the International AIDS Conference recently held in Barcelona.

10430 abstracts had been received of which 1711 were rejected. The 504 highest scoring abstracts were organised into oral track sessions, the next 168 into oral poster presentations, 5240 for poster exhibitions, and 2807 included only in the CD-Rom (“published abstracts”). The tracks were:

- A. Basic science
- B. Clinical sciences and care
- C. Epidemiology
- D. Preventive Sciences
- E. Social Sciences
- F. Intervention and programme implementation
- G. Advocacy and policy

The Conference also featured symposia on selected topics, seniors’ lectures, commercial and non-commercial exhibitions. Satellite meetings were set up by community and commercial organisations. ♂




Are you in the picture?

## Hong Kong's Participation


REPRESENTATIVES and individuals from government units, NGOs, and universities from Hong Kong were present at the Barcelona Conference. There were a total of over 20 delegates – the precise number is not known!

A total of 25 abstracts from or on Hong Kong were listed in the CD-Rom. Sixteen of these were posters, and there were no oral presentations. A skill-building workshop was organised by AIDS Concern.

As in the previous years, the Hong Kong AIDS Foundation set up an exhibition booth at the Conference. They also hosted a satellite meeting titled "A global response to the problems of AIDS from Chinese communities". The meeting was attended by over 300 participants. Three PWAs (people living with HIV/AIDS) from Hong Kong, Beijing and Taipei spoke at the occasion. The meeting also witnessed the inauguration of the Global Chinese AIDS Network by the Hong Kong AIDS Foundation. 

## ATF Workshops: Preparing the community for a new funding system

TWO workshops organised by the AIDS Trust Fund (ATF) on the new funding mechanism were held at the lecture room of the Red Ribbon Centre on the 28<sup>th</sup> June 2002 and 16<sup>th</sup> July 2002. Both were attended by over 50 participants from many organisations. They were there to understand the proposed new funding changes and the likely effects that might bring about to their organisations, their clients and the community.

Chairman of the Council for the ATF, Professor Leung Nai-kong, had highlighted the needs for a new funding system in opening the first workshop. The changes were in line with the proposals made in the 1998 External Consultancy Report commissioned by the ACA and the its recommended Strategies for 1999 to 2001. The new approach would incorporate a technical review process and aimed at enhancing accountability and programme effectiveness. During these 2 workshops, Mr. Peter Kwok, representing the secretary of the council for the ATF, had given the audiences the overview of key funding changes as well as the details of the new funding application. He had also stimulated discussions between the ATF Council and the community groups. In addition, Professor WT Chan and Dr. Dennis Wong of the City University shared their experience with the audiences on the practical aspect of programme evaluation during these workshops. 

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News**

### Reported HIV/AIDS Statistics (updated 31 March 2002)

		HIV		AIDS	
		total / Q1 2002		total / Q1 2002	
<b>Gender</b>	male	1469	34	499	8
	female	329	9	71	2
<b>Ethnicity</b>	Chinese	1248	34	446	10
	non-Chinese	550	9	124	0
<b>Transmission</b>	heterosexual	1026	23	376	7
	homosexual	340	5	98	1
	bisexual	87	2	29	1
	injecting drug use	46	2	9	0
	blood/b products	68	0	19	0
	perinatal	14	0	6	0
	undetermined	217	11	33	1
<b>TOTAL</b>		<b>1798</b>	<b>62</b>	<b>570</b>	<b>10</b>

**NOTE:**

The "total" refers to the cumulative total number reported since 1984, under the voluntary HIV/AIDS Reporting System. "Q1" refers to the period January to March 2002. The "AIDS" number is a subset of the "HIV numbers" and the two should not be added.

**SOURCE:**

Special Preventive Programmes, Department of Health, Hong Kong SAR Government

## Messages, lessons.....from the Conference

THE International AIDS Conference had been gradually evolving from a scientific meeting to a community forum. It's a huge conference and was divided into two main programme areas – one focusing on sciences and the other on the programmatic and community responses. The latter part was becoming a more important feature of the biennial Conference.

While very little scientific advances had been presented at the Barcelona Conference, there were consolidations on the applications of highly active antiretroviral treatment (HAART) as an integral component of national HIV programmes. “Scaling up” was the term repeatedly coined at the Conference, echoing the World Health Organisation's pledge to increase the number of people on treatment in the developing world to a few millions in the coming years. The provision of free HAART in Brazil had become a ‘best practice’ in HIV programme development. Home to six hundred thousand HIV positive individuals, the country had been able to provide treatment to some 120000, using 15 antiretroviral drugs, eight of which were produced by the country itself. Unfortunately such provision in Asia, including China, was still very sketchy.

Vaccine development had been gaining momentum in the last years. It appeared likely that they would become available in the market in the coming years. There were active discussions on how vaccines could be used, knowing that they would not be the only answer to the epidemic. Tragically the pandemic had continued to

grow. UNAIDS released its update report just prior to the Conference. The spread of the infection in China, Central and Eastern Europe were particularly worrisome. In light of the explosive spread in drug users, harm reduction occupied a prominent position in the Conference agenda.

On the more clinical aspect, the previous strategy of “Hit hard, hit early” had clearly given way to hitting hard but not too early. CD4 count was recognised as the most important marker for prompting the initiation of treatment. New preparations like T20 had received considerable attention by participants and were reported in the media. With the increasing access of the developing world to HAART, there're designated sessions to discuss about the indications of treatment where resource was limited.

While breakthroughs were unlikely, discussions had focused on the development of strategic approach in, for example, the implementation of programmes addressing the prevention-and-care continuum, effective allocation of

resources, the role of the newly established Global Fund for fighting AIDS, TB and Malaria (GFATM), and advocacy. The Conference was attended by influential people including the ex-president of the United State Bill Clinton, South Africa's Nelson Mandela, to name a few. Julio Frenk, the Minister of Health of Mexico, expressed that the time had come for systematising and sharing to play the key positions in national HIV programmes.

There was notably one major missing link in this huge conference – the perspective in Asia. The Barcelona Conference would in future be remembered as an AIDS Conference of and for the Latin World. It has focussed the world's attention on such countries as Spain and Brazil. The Sciences in the western world provided the backdrop for linking evidence with action. There were some discussions about Africa to follow up on the what had been initiated in Durban in 2000. Central and Eastern Europe had received little attention, which could easily be felt from the frustrating tone of their presenters. Even less was covered in Asia, except for the vaccine study in Thailand. Perhaps the Kobe Conference for the Asia and Pacific in 2003 would fill this obvious gap, as well as the Bangkok international conference in 2004. ☸



Quiltson display outside the Conference Halls

## More lunch a requisite to scaling up ? reporting on the post-conference Feedback Seminar

MORE lunch (informal gathering) would be the key to a successful HIV programme in Hong Kong - that's perhaps one of the interesting conclusion made by different speakers at the Feedback Seminar organised by the Advisory Council on AIDS on 26 July 2002, at the Lecture Theatre of SCOPE, City University of Hong Kong.

The mid-summer heat and the occasional torrential rainfall have not deterred the over 60 participants from coming to the seminar. Dr Dennis Wong, one of the presenters, expressed that he had more chances of dining with local groups in Barcelona than in Hong Kong, a same feeling echoed by Dr Homer Tso, chairman of the Advisory Council on AIDS who chaired the seminar. In a small place like Hong Kong, everyone agreed that it's important to bring expertise together. Despite the low HIV rate, we should become better equipped to guard against a major epidemic, and be ready to share our experiences with others around the world.

Dr Wong, who represented the Management Advisory Committee of the Red Ribbon Centre, proposed to strengthen our efforts in building capacity of people working on HIV/AIDS. There should also be more collaboration between GO (government organisations) and NGOs. Joint community action, joint research would be other important ideas on the agenda, on top of the need to ensure continued funding.

Our ethical responsibilities were highlighted by Miss Loretta Wong of AIDS Concern, who



Dr Homer Tso chairing the Feedback Seminar to promote communication among AIDS workers after the Barcelona Conference

touched upon the role of *advocacy* in AIDS programme development. The agency's efforts in setting up a skill-building workshop at the Conference was acknowledged. Loretta urged participants to come together before the next biennial conference to reflect on what we have done in the two year interval. To add value to conference participation, she also appealed to participants to bring conference messages to the communities they're working with.

The Seminar also featured the presentation of Dr KM Ho of Special Preventive Programme of the Department of Health. He gave an overview of the highlights of the Conference, reminded the audience of the quotes by celebrities, stressed the importance of the prevention-and-care continuum, and elaborated on the need to have good documentation to facilitate programme monitoring and evaluation.

Ms Rita Chung of the AIDS Clinical Service of the Queen Elizabeth Hospital presented her perspectives of the Conference, covering advances in care, and

issues ranging from HIV prevention in the community to the prevention strategy targeting people living with HIV/AIDS. Dr MP Lee from the same unit explained the scientific advances in HIV management and the optimism in the international community in bringing HIV vaccines to the field.

Unfortunately, there was so much enthusiasm that the programme had overrun, and there was insufficient time for discussion. To many, the coffee break was about as fruitful as listening to the presentations. The Seminar has offered an opportunity for like-minded people to come together, for the new to meet the old, and for ideas to be exchanged at no cost.

In concluding, the Chairman expressed that the holding of a regional conference in Hong Kong may serve to bring local efforts in focus. He also appealed to all for setting up more communication channels for people working on HIV/AIDS to come together. In a busy fast-paced society like Hong Kong, these may be the real challenge to us all, especially in light of the need to scale-up, a commonly used term at the Barcelona Conference. ⌘