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

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)

Chairs
Erika Castellanos
Global Action for Trans Equality (GATE)

Tom Ellman
Médecins Sans Frontières (MSF)

Closure
Ernst Wisse
Médecins du Monde (MdM)
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](http://programme.aids2018.org/Programme/Session/1479)