

**Closing Address by the Deputy Minister of Health, Dr Joe Phaahla**  
**12<sup>th</sup> South African National AIDS Conference 2025**

**Theme: “Unite for Change – Empower Communities and Redefine Priorities for HIV/AIDS”**

Thank you Programme Director

Conference Chairpersons,

Distinguished Guests,

Esteemed Colleagues,

Partners in Health, Activists,

Resilient Communities,

Ladies and Gentlemen,

All protocols observed.

Greetings.

As we conclude this 12<sup>th</sup> South African National AIDS Conference, I stand here humbled by robust discussions and extraordinary commitment we have witnessed – from scientists to community leaders, healthcare providers, activists, stakeholders and to people living with HIV (PLHIV).

Our theme – “**Unite – Empower – Redefine**” – reminds us that the path forward demands unity across all sectors, empowerment of every person, and a redefinition of how we deliver health in an era of innovation and equity.

This Conference took place during a period when we had to deal with realities of the United States (US) funding withdrawals. I want to take this opportunity to acknowledge your resilience and unwavering commitment ensuring minimal service-delivery interruptions in relation to recipients of care. This became more than a conference; but a platform for renewing our collective commitments to end AIDS as a public health threat by 2030.

Furthermore, we had the opportunity to redefine impactful HIV priorities to be implemented within limited financial resources.

Throughout robust discussions in plenary and satellite sessions, it became clear that we need to make critical decisions if we really want to end AIDS as a public health threat by 2030. We need to acknowledge the reality that we can no longer afford to adopt a “business as usual” approach in HIV and TB response. The Conference emphasised the following themes:

1. Better utilisation of data for planning and decision-making.
2. Investments in the HIV combination prevention strategies including long acting technologies.
3. Integration of HIV and TB services into Primary Health Care (PHC).
4. Domestic funding consolidation.
5. Utilisation of Artificial Intelligence (AI) and digital technologies.
6. Strengthening of person and community-centred approaches.
7. Strengthening of partnerships and collaborations.

As a responsive and caring Government, we will not shy away from our leadership role and responsibilities. I am pleased that these themes are properly aligned to our priorities to scale up HIV and TB response. Let me take the opportunity to update delegates on mitigation plans put in place to minimise service-delivery interruptions due to US funding withdrawals. Against popular belief, we have taken a conscious decision to prioritise the following areas as part of our last mile towards 2030:

1. **Better utilisation of data:** The strategic information and unified commitment forged at this 12<sup>th</sup> SA AIDS Conference provide an undeniable, evidence-based imperatives to redefine our priorities for

HIV and AIDS. As Government, we always ensure that we adopt an evidence-based approach in the programmes' design. Current evidence suggests that HIV incidence and prevalence are declining steadily, even though not at the required speed. Therefore, we have taken a conscious decision to move away from generalised interventions, towards more focused and targeted interventions. Let us now collectively empower our communities and ensure that an individual is at the centre of the response.

**2. Investments in the HIV combination prevention strategies:**

Modelling studies and normative guidance indicate that investing in HIV combination prevention strategies is the most cost-effective and efficient way to reduce new HIV infections and link individuals to various packages of care. It is our belief that HIV combination prevention interventions will ensure that we protect gains and successes made thus far in the HIV response. Furthermore, prevention technologies such as long-acting injectables, including Lenacapavir expand options for individuals at risk. I want to thank Global Fund and other partners for selecting South Africa as one of the early adopter countries for Lenacapavir implementation as one of the PrEP choices.

**3. Integration of HIV and TB programmes into Primary Health Care (PHC):**

As part of consolidating efficiencies, HIV and TB services will be integrated into PHC system to ensure that healthcare needs of individuals are addressed at single service points.

**4. Domestic funding consolidation:** It is a known fact that South Africa is funding country HIV&AIDS and TB response through own

resources. We appreciate support from International Agencies and Governments in augmenting funding for the interventions.

## **5. Utilisation of Artificial Intelligence (AI) and digital technologies:**

Technological advancements highlight an important role to be played by Artificial Intelligence (AI) and digital technologies in enhancing HIV response to accelerate prevention and treatment services, surveillance, and programme management. These technologies should be implemented with strong governance and privacy protections. I need to be clear that utilisation of these technologies are never intended to replace the human element in healthcare, but to enhance our response.

## **Reflecting on Our Journey**

South Africa has made remarkable progress:

- **96% of people living with HIV know their status.**
- **79% of those are on treatment.**
- **94% of those on treatment are virally suppressed.**

These achievements save lives, prevent transmission, and dismantle stigma. But they also reveal the remaining challenge: **1.1 million people who know their status are not yet on treatment.** We must find them, support them, and bring them into care.

## **A Comprehensive Response – HIV & TB**

Ending AIDS requires more than treating HIV alone. It means tackling the syndemics that threaten our progress.

- **TB/HIV co-infection remains the leading cause of death for people living with HIV. In February 25<sup>th</sup>, 2025, we launched the Close the Gap campaign to find 1.1 million clients who disengaged**

on treatment. I therefore call on all sectors involved in the campaign to ramp up our efforts to ensure clients are reengaged, start and stay on treatment. We also expanded TB preventive therapy, rolled out new rapid molecular diagnostics, and strengthened integrated service delivery to ensure no one is lost between TB and HIV programmes. We therefore need to intensify our **End TB campaign launched in March 2025** by ensuring that the 5 million tests are done for the TB missing clients.

All these efforts propels us to assume a more integrated approach to ensure that prevention is central to our discourse. For instance:

- **Sexually transmitted infections (STIs)** screening and treatment.
- **Cervical screening including** HPV vaccination, provision of comprehensive sexual and reproductive health services.
- **Viral Hepatitis management including prevention, screening and treatment to help with the** elimination of vertical transmission
- All these efforts will not be possible if we do not integrate and tackle the **Gender Based Violence and Femicides (GBVF)** as the collective.

This is the essence of our new approach: not vertical silos, but integrated, person-centred health.

## **Innovation and the Future**

The future of prevention and care is here. Long acting injectables like **Lenacapavir** will transform HIV prevention, particularly for adolescent girls, young women, and key populations. We are also exploring our efforts to ensure that there is **human enhance artificial intelligence**

which shall be instrumental to fostering capacity building and complement our health care workforce.

## **Closing**

Let us unite in purpose. Let us empower every person with tools, dignity, and opportunity. Let us redefine health, not as a set of vertical programmes, but as a shared journey toward wellness, inclusion, and justice. The future is not distant. We are building it now, for mothers, fathers, children, and generations to come. Together, we will end AIDS, eliminate its co-travellers, and write a new chapter of health equity in South Africa.

I thank you.