ASTMH Committee on Global Health
Official Subgroup of the American Society of Tropical Medicine & Hygiene

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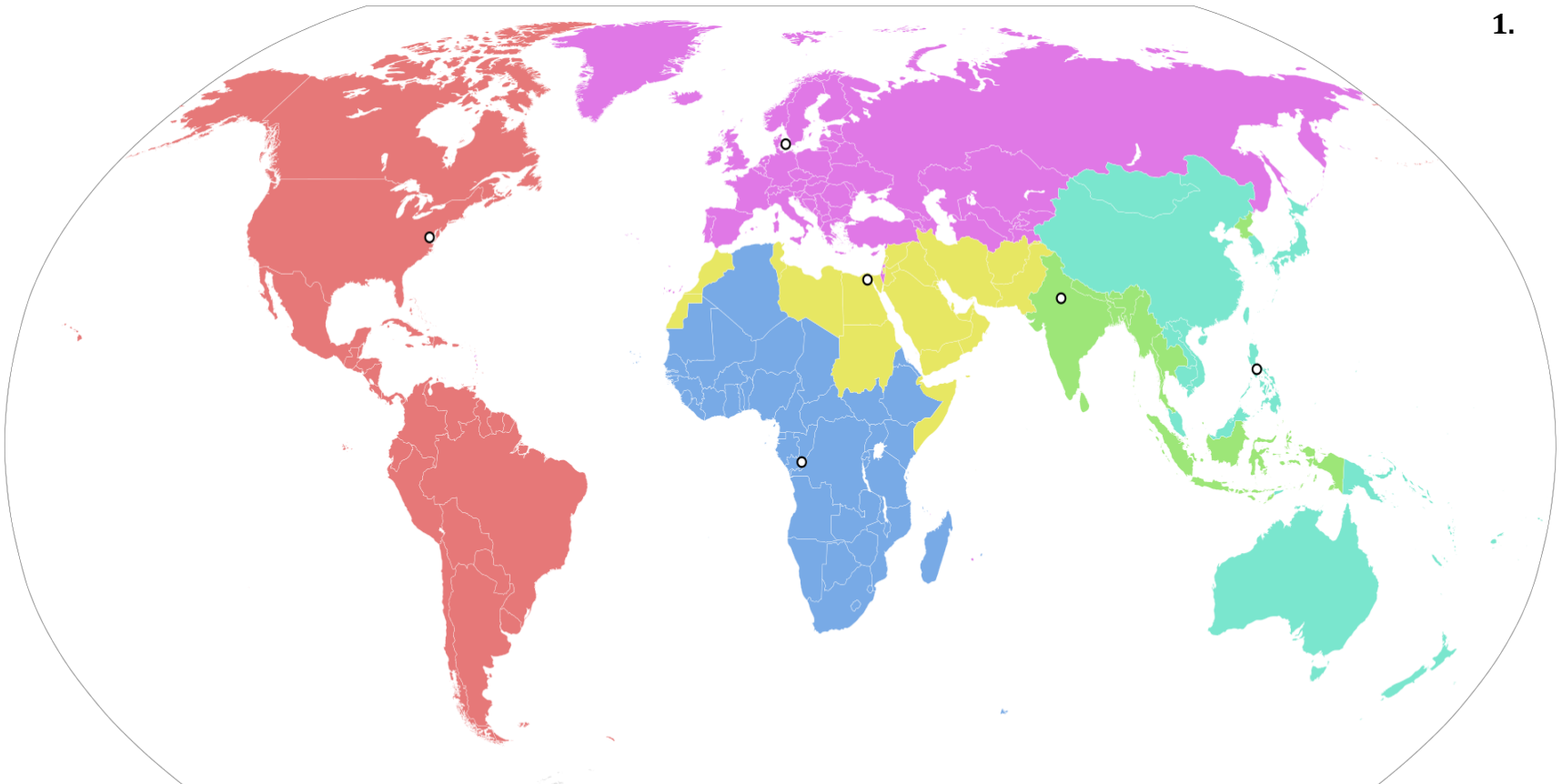
ACGH Newsletter

ASTMH Committee on Global Health



ACGH Regional Representatives - Updates

Region: European Region

Name: Muhammad Asaduzzaman, MBBS, MPH, MPhil

Title: PhD student

Organization: University of Oslo, Norway

As an ACGH Regional Representative what are your priorities and plans for ACGH members in your region?
As the ACGH Regional Representative in Europe, my priorities and plans are to develop a trailblazing ACGH community in the region with professionals, students, researchers, and enthusiasts in the field of tropical medicine and global health, to uphold the mission and values of the ASTMH individually and collectively, and to foster collaboration, knowledge sharing, research, education and innovation at the regional level and beyond.

Are there any recent research articles authored by someone in your region, or of significance to your region?
Recently, a group of tropical medicine and global health professionals, mostly from Europe, published an editorial that was a call for action for Leishmaniasis prevention in Syria in the *Travel Medicine and Infectious Disease* journal; I also contributed. Though Leishmaniasis has been highly endemic in rural Syria for several decades, the devastating conflict and mass displacements have led to a surge of cases even in the non-endemic areas and beyond borders. Syria is now the country with the highest Leishmaniasis prevalence in the WHO EMRO region, having the risk factors of poverty, malnutrition, conflict, forced displacement, climate change, and low resources for diagnosis and healthcare. The vast population movements resulting from the protracted conflict have also impacted neighbouring countries, particularly Lebanon, Turkey and Jordan as well as several European countries such as Germany, Belgium, France, Sweden, Spain, and Italy. Therefore, the editorial raised an international call for action for political will and donor support to restore the country's health system, particularly for the endemic tropical diseases, such as Leishmaniasis, through a One Health approach. In addition, we have proposed several practical recommendations to tackle this situation which includes capacity building (infrastructure, diagnostics, human resources), vector control, prevention, access to treatment and healthcare, surveillance system strengthening, and community engagement. You can find the full editorial here.

Region: Western Pacific Region

Name: Hidenori Takahashi, MD, PhD

Title: Quarantine officer, Infectious Disease Emergency Specialist (IDES) Program

Organization: Division of Infectious Disease Prevention and Control, Department of Infectious Disease Prevention and Control, Public Health Bureau, Ministry of Health, Labour and Welfare, Japan

Priorities and Plans for ACGH Members in the Region:
As the ACGH Regional Representative for the Western Pacific region, my priority is to promote scientific collaboration on the prevention and treatment of tropical infectious diseases and antimicrobial resistance (AMR). I aim to advance regional initiatives that foster inclusive and multilingual spaces which will enable cross-border knowledge exchange, especially through multilingual webinars and early career training. These efforts will support the development of future leaders in global health, ensuring inclusivity and accessibility for all.

Recent Research from the Western Pacific Region:
1. Pulmonary Paragonimiasis: A Pitfall in IgG4-Related Disease Diagnosis (published in the *American Journal of Tropical Medicine and Hygiene*)
This case report addresses the clinical challenges of distinguishing pulmonary paragonimiasis from IgG4-related lung disease. It highlights the importance of considering parasitic infections in the differential diagnosis, especially in endemic regions such as the Western Pacific, and underscores the value of serologic testing in confirming diagnoses. Available here.

2. Surveillance of Seasonal Influenza Viruses During the COVID-19 Pandemic in Tokyo, Japan (2018–2023): A Single-Center Study (published in *Influenza and Other Respiratory Viruses*)
This study examines the impact of the COVID-19 pandemic on the transmission dynamics of seasonal influenza in Japan. It shows how strict travel restrictions and non-pharmaceutical interventions nearly eliminated influenza activity, which resurged once these measures were lifted. This research, which contributed to my Ph.D., marked a key turning point in my commitment to addressing infectious disease challenges in the post-COVID era. You can find the full article here.

Region: Eastern Mediterranean Region

Name: Yosser Zina Abdelkrim, PhD

Title: Assistant Professor and Researcher

Organization: Institut Pasteur de Tunis

Priorities and plans for ACGH Members in My Region:
As the ACGH Regional Representative for the Eastern Mediterranean region, my priorities are to strengthen connections between researchers and public health professionals in the region, promote innovation in drug discovery and diagnostics for infectious diseases, and advocate for greater visibility and recognition of regional scientific contributions. In addition, I aim to support the translation and valorization of research findings, ensuring that scientific advances lead to practical applications and inform public health policies in the Eastern Mediterranean region.

As part of this effort to highlight impactful research, I would like to share a recent example from our region:
The study "The E6 gene polymorphism of Human papillomavirus 16 in relation to the risk of cervical cancer in Tunisian women", authored by Rahima Bel Haj Rhouma in 2023, analyzed genetic variations in the E6 gene of HPV16 and their association with cervical cancer risk among Tunisian women. Its findings provided critical evidence that directly informed national health authorities, leading to the official introduction of HPV vaccination in Tunisia in 2025 and influencing the selection of vaccines specifically targeting HPV variants 16 and 18. This case clearly illustrates how regional research can drive public health decisions and improve disease prevention strategies in Eastern Mediterranean region countries. The full article is available here.

Region: Americas Region

Name: Andres G. (Willy) Lescano, MS, MHS, PhD

Title: Associate Professor

Organization: Cayetano Heredia University

Andres G. (Willy) Lescano is a Peruvian researcher with a Ph.D. in International Health from the Johns Hopkins Bloomberg School of Public Health, USA. Since 2015 he has led Emerge, Cayetano University's Emerging Diseases and Climate Change Unit, and in 2020 his work expanded by creating and leading Clima, the Latin American Center of Excellence for Climate Change and Health. Dr. Lescano has studied emerging diseases in the Americas for nearly three decades. He is now focused on the impact of climate and anthropogenic change, with an important emphasis on the Amazon Basin.

Priorities and Plans for ACGH Members in the Region:
- Try to reactivate the ASTMH Latin America in Peru Annual Meeting
- Provide research capacity building opportunities for society members both online and also during the Annual Meeting
- Try to generate more interaction between ASTMH and Latin American tropical medicine and infectious diseases scientific societies.

Recent Research from the Americas Region:
Regarding my research we are studying how the suitability for dengue transmission has changed over time related to climate change in Latin America, and also trying to understand what environmental factors drive arbovirus transmission in South America. You can find a related article here.

Region: African Region

Name: Hoseah Miima Akala, PhD, FASTMH

Title: Principal Research Scientist/Director, Malaria Drug Resistance Program

Organization: Kenya Medical Research Institute/ Walter Reed Army Institute of Research - Africa

As an ACGH Regional Representative what are your priorities and plans for ACGH members in your region?
- to take advantage of the ASTMH membership drive for the LMIC. Global health professionals—especially those who have never joined—are encouraged to visit the following website and complete the following form. ACGH membership will grant access to the organization's opportunities and resources that connect career growth with improving health and achieving equity in health for all people worldwide.
- to strengthen and promote partnerships amongst global health workers and decrease access challenges. We have scheduled all-inclusive webinars with panelists from across Africa, to deliver content on diverse global health topics of expertise. The first webinar in this series took place in July 2025 and focused on recreating health systems' resilience for sustaining responsiveness to regional global health challenges.

Access is a major global health challenge stalling prompt response in Africa.
As countries transition toward strengthening healthcare systems, access is emerging as a major global health challenge. As global partnerships produce innovative interventions, their life-saving function is impeded by poor access. The proportion of health-care workers per population, commodity shortages, distance to healthcare facilities, access to reagents, supplies, and operational equipment for accurately monitoring vital signs and collecting samples all pose significant challenges. Access to updated protocols and creating partnerships to reach remote populations is key. For example, adoption of protocols that enabled health care and research teams in Uganda to isolate the suspected index case sample, and release the report declaring the presence of the 8th Ebola outbreak in Uganda presented a prototype scenario for mitigating access challenges. You can find a related article here.

Region: South-East Asia Region

Name: Farzana Zaman, MBBS, MPH

Title: Divisional Tuberculosis Expert, National Tuberculosis (TB) Control Program

Organization: Directorate General of Health Services (DGHS), Bangladesh

I am Dr. Farzana Zaman, currently serving as the ACGH Regional Representative for the South-East Asia Region. With a background in medical science (MBBS) and public health (MPH), I bring over twelve years of experience in global health, clinical research, and program implementation. I have had the opportunity to work with leading institutions like icddr,b (formerly known as the International Centre for Diarrhoeal Disease Research, Bangladesh) and contribute to international health programs in Libya. My professional journey has been rooted in evidence-based public health, disease surveillance, and collaboration with government bodies, NGOs, and international research institutions to improve health outcomes and promote equity.

As an ACGH Regional Representative what are your priorities and plans for ACGH members in your region?
As an ACGH Regional Representative, my foremost priority is to foster a vibrant, collaborative network of global health professionals across the South-East Asia region. I aim to strengthen engagement among members by promoting knowledge exchange, regional capacity building, and cross-border collaboration on pressing public health challenges. My plan includes organizing regional webinars, facilitating mentorship programs for early-career professionals, and promoting locally-led research initiatives that reflect the unique needs and contexts of our region. I will also work to amplify the voices of our members within the wider ACGH platform, ensuring their contributions and concerns are recognized globally. By building bridges between academic institutions, public health agencies, and community-based organizations, I hope to cultivate an inclusive, action-oriented environment that advances both health equity and sustainable development.

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ACGH Regional webinar

We are delighted that the ACGH has successfully hosted four webinars, each led by Regional Representatives, that have addressed current global health issues relevant to regions. Regional webinars are open to all members but scheduled at times most convenient for members in those regions. Three informative webinars have taken place in June and July:

1. Innovations in Drug Discovery; Diagnostics for Infectious Diseases: Eastern Mediterranean Regional experts in virology surveillance, artificial intelligence for drug discovery, and molecular diagnostics discussed novel regional approaches to improve diganostics and treatment for infectious diseases, with particular focus on infectious diseases relevant to the Eastern Mediterranean Region including leishmaniasis and viral infections.

2. Recreating Health Systems' Resilience for Sustaining Responsiveness to Regional Global Health Challenges in the Face of Restructured Funding: In this African Regional webinar, a panel of experts from five countries discussed recent outbreaks in Africa, the impact of recent changes on parasites and vectors that impact health, challenges around health systems financing, and strategies to catalyze innovations for health in Africa. The session had a lively question and answer session.

3. Multilayered Approaches to Antimicrobial Resistance: A Clinician's Perspective from the Western Pacific Region
Dr. Hidenori Takahashi discussed the increasing burden and cost of antimicrobial resistance both globally and in the Western Pacific Region. He discussed a variety of strategies including using hospital-based approaches to reduce antimicrobial resistance and building multinational partnerships to strengthen data sharing and best practices. The presentation was given in Japanese with English slides and subtitles to maximize reach.

4. Human health perspectives on contaminants and disease risks in a changing Arctic climate: The Arctic is undergoing rapid environmental change that directly affects human health, adding to existing challenges such as high contaminant exposure and rising chronic disease rates. Using a One Health approach - linking humans, animals, and the environment - this talk highlighted how climate change influences contaminant transport, persistence, and effects, while also increasing the risk of food-, water-, and vector-borne diseases. Wildlife infections with zoonotic potential further complicate community health. These combined stressors challenge the resilience of Arctic populations, underscoring the need for interdisciplinary research, improved monitoring, and adaptive strategies. Strengthening collaboration and building scientific evidence are essential to protect Arctic health and inform global responses to climate change.

Please watch for announcements about upcoming regional webinars from the South East Asian Region, and American Region in the next few months!

ACGH WhatsApp community

Purpose:
Created in January 2025 for ACGH members, this initiative leverages social media with intention to bring ACGH members together in one space and to accelerate the drive towards achieving the 4 goals of the ACGH. This is a forum for members to network and share professional information, news, opportunities of value, accessible 24/7 online and on their mobile devices.

Structure:
Our WhatsApp Community is composed of 10 subgroups. The "Announcements" group is where all members can receive announcements, with access restricted to administrators only. It currently contains the Community Guidelines and The ACGH Presidential Welcome address. By default all ACGH members belong to the "General Assembly" group after being added-in or opting-in from their emails via the shared link that was sent in an ACGH email. From there, everyone can read the description of the General Assembly and see the other 8 groups of choice that they can join.

Governance:
The President, Past-President, and President-Elect, 6 Regional Representatives are admins for the General Assembly group. The 3 Presidents are also administrators for the other 9 groups. Six groups represent the 6 regions according to the WHO global regional designations. The 6 Regional Representatives are also administrators in their respective regions along with the 3 Presidents. They are responsible for coordination and driving activity in their respective regional groups in line with their submitted and approved Annual Workplans, for example, the upcoming regional webinars.

Benefits:
1. Accessible platform for discussions and assessing needs of ACGH members with regular feedback
2. Useful forum for learning and information exchange
3. Consolidated site for mentorship and broadcasting global and diverse opportunities in education/research/career/business

Growth:
Currently contains 499 members out of the over 850 registered ACGH members globally. The community is still growing organically as the ACGH Executive committee focus on improving user experience and value creation. More user experience platform features are anticipated from Meta (WhatsApp) in the near future. The community is gradually growing and is still a work in progress. Useful ideas/suggestions for improvement are welcome. ACGH is always open to any questions/comments/concerns.

You can join the Whatsapp community here, or use the QR code below.

Join us for our upcoming ACGH online events this Fall

Wednesday, 22 October 9:00 am EST / 13:00 hrs GMT

Title: **Panel Discussion: Tips and Tricks for Effective Grant-Writing**

Please join us for a panel discussion focused on the #1 requested topic from our recent ACGH member survey! We will host three experienced grant writers and reviewers to share with us case studies, together with their tips, tricks, and best practices for grant-writing. Please register and submit questions in advance. We look forward to an engaging and interactive session!

Click here to register.

ACGH at the ASTMH Annual Meeting: Join us for ACGH-Specific Sessions in Toronto this November!

1. ACGH Scientific Symposium: Advancing mRNA technologies in the Global South – Opportunities, Challenges, and Pathways to Global Access + ACGH Business Meeting – Wednesday, November 12, 5:15 pm - 7 pm

This symposium aims to bring together scientists, policymakers, global health experts, and industry stakeholders to discuss key issues surrounding the state, adoption, manufacturing, and equitable distribution of mRNA technologies in the Global South. We will explore technology transfer, regulatory frameworks, financing mechanisms, and regional collaboration to help build sustainable mRNA production ecosystems.

2. ACGH Scientific Symposium: The melting frontier: climate change in the Arctic; global OneHealth implications - Wednesday, November 12, 3 pm - 4:45 pm

This symposium will focus on the interconnectedness of Arctic climate transformations, their impacts on local indigenous populations and animals and the resulting global health challenges. It will explore the link between arctic climate shift and global health through the lens of indigenous knowledge, infectious diseases (including resistant pathogens), gender perspectives and climate justice.

3. ACGH Interviewing Practice for Global Health Careers- Tuesday, November 11, 4:00 – 5:15 pm

Join us for a new session developed in response to our survey of the training and career development needs of ACGH members: training in how to interview well. After a short overview of interview best practices, we will pair ACGH trainees with more senior ACGH members for one-on-one 5-minute practice interview sessions, followed by personal feedback. Our aim is to rotate interviewers so that each trainee has a chance to practice short interviews with at least 3 interviewers. We will require trainees to sign up in advance to be sure that we have enough senior ACGH members to provide practice interviews.

Click here to register to be an interviewee (Space is limited! Please sign up early!)

Click here to volunteer to be a practice interviewer (Please consider giving an hour and a half of your time to support junior ACGH members! Volunteering is simple and won't require meetings or preparation.)

4. ACGH Networking and Lightning Presentations – Monday, November 10th 2025, 4:30 - 6:15pm.

Please join ACGH members for an early-evening social that brings together members of the subgroup, stimulates opportunities for networking, and gives trainees an opportunity to present their research in 3-minute presentations. These interesting short presentations will generate feedback and discussions that will throw more light on the research topics. These discussions will be interactive and in an ambient environment for members to network. Light snacks provided with one free drink for the first 50 ACGH members to arrive.

Advice for Junior Faculty, Junior Investigators, students, and first-time attendees at the Annual Meeting

Are you new to ASTMH and attending the Annual Meeting this November? We look forward to welcoming you to a warm, enthusiastic society filled with people who are deeply committed to their fields of research, clinical care, and teaching. Many of our members also view mentorship of junior colleagues as a key goal of their career and would love to get to know you. We hope you'll find an academic home here and want to offer a few tips for how you can get the most out of this lively and exciting meeting!

1. Spend time planning the events, talks, and people you'd like to meet.
ASTMH is a big meeting with multiple events happening at once. Take the time to read over the events, symposia, and abstract and poster titles before you arrive at the meeting, install the ASTMH meeting app and make sure it's working, and note the ones you plan to attend. You can add these to the personal schedule section of the app. Sometimes you may wish you could be in two places at once. It's perfectly fine to attend part of one session and then join part of another session if there are two different speakers you want to hear. If you have a colleague who you know will be at the meeting and who you haven't seen in a while, reach out to them ahead of time to try to find a coffee or lunch break during which you can meet. Some people even meet for early breakfast before the sessions start!

2. It's all about being there: take full advantage of the week.
Try to be fully present at the meeting. The ASTMH meeting only happens once per year, and there is more to do than is humanly possible, with activities from early morning to evening. Try to clear up your schedule and not to schedule virtual work meetings that week so that you can attend and actively engage in symposia, discussions, and events.
If possible, complete all your deadlines one week before. And prepare your talk or poster ahead of time. Take notes, ask questions, take pictures, and have fun! Attend theACGH sessions and other sessions for trainees. This is a great opportunity to meet peers in a more relaxed environment, plus probably some more senior ASTMH members who enjoy meeting and working with trainees!

3. Challenge yourself to reach out and take a few risks.
ASTMH is a big Society, but it has plenty of opportunities to connect with people. Before the meeting, identify one or two speakers whose work you admire. Plan to attend their sessions and go up to them afterwards to introduce yourself and ask a question. You never know what new collaboration you might build! It's also great practice to challenge yourself to ask one question at the microphone in one of the sessions.

4. Practice your oral or poster presentation out loud.
Know exactly what you want to say during your oral presentation, and make sure you can do it within your allowed time limit. You can record yourself using Zoom and go over the video to evaluate what to improve: content, pronunciation, flow, transitions, etc. Try to prepare a 30-second short sentence summarizing your main finding to engage people passing by your poster, and practice how you will guide people through understanding your poster in more detail in about 2 minutes so that you are comfortable talking about your findings and why they are important!

Also, prepare a short, 30-45 seconds "elevator speech" in which you can introduce yourself and say what you do and why it matters to you and to the population with which you work. We hope that these tips will be helpful! Feel free to share other tips in our ACGH WhatsApp Mentorship/Career chat group! (And send excellent photos of the Annual Meeting to be posted in the newsletter to Paul at paulniyonkuru01@gmail.com)

Register for the Annual Meeting today:
https://www.astmh.org/annual-meeting/registration

ASTMH at the World Health Organization (WHO) World Health Assembly, May 2025

ASTMH closely tracked and supported civil society engagement around the 78th World Health Assembly and partnered on two side events to the official proceedings. ASTMH joined civil society partners in celebrating the passage of the Pandemic Agreement and watched closely as resolutions passed on universal health coverage, antimicrobial resistance, climate and health, and a global strategy for women's, children's, and adolescent's health. The week was also largely consumed by intense negotiations around the WHO's budget, as a $90 million increase in assessed contributions was approved, but the organization continues to grapple with major funding gaps amid the withdrawal of the U.S., its largest contributor, and uncertain commitments to voluntary contributions. ASTMH co-hosted two events on the margins of the official proceedings: Health Without Borders – Integrated Primary Healthcare for All, and Securing the Future of Global Health – United Front for Sustainable Financing, which was chaired by ASTMH Past-President Dan Bausch, MD, MPH&TM, FASTMH.

- Jamie Bay Nishi, CEO ASTMH

The World Health Organization (WHO) World Health Assembly (WHA), held in Geneva, Switzerland, was packed with meetings and discussions about topics of global health relevance. These included:

Accelerating Action on Global Drowning Prevention with Kate Eardley of the Royal National Lifeboats Institute (RNLI); Ambasador Extraordinary and Plenipotentiary His Excellency Mr. Tareq Md Ariful Islam of the Permanent Mission of Bangladesh; Dr. "T." from Thailand; Etienne Krug of the WHO's Department of Social Determinants of Health; His Excellency Mr. Noel White Ambassador Extraordinary and Plenipotentiary of the Permanent Mission of Ireland to the UN, and others.

Advancing Universal Health Coverage in a Changing World: the Case for Gender-Responsive Health Systems, Co-Hosted by Universal Health Care 2030 (UHC2030)/the Civil Society Engagement Mechanism (CSEM); The Partnership for Maternal, Newborn, and Child Health (PMNCH); and Women Deliver.

Women in Global Health Leadership, held at WHO Headquarters with Rajat Khosla, Executive Director of the Partnership for Maternal, Newborn, and Child Health; Ms. Helen Clark, former Prime Minister of New Zealand; and Flavia Bustreo of Global Women Leaders Voices, presented its Spotlight on Women in Global Health Leadership -the first comprehensive qualitative and quantitative study that examines how many women have held top leadership positions in the WHO and its regional offices, Gavi, the Global Fund, and UNAIDS. They found that since 1947, only 4% of those posts have been held by women. Change can occur by building allies, tracking progress, and encouraging women to run for office.

Fight the Fakes; Securing Progress, Building Stronger Partnerships was a side event hosted by the Fight the Fakes Alliance . Mario Ottiglio, the current Secretariat of the Fight the Fakes Alliance, estimates that 1 million lives are lost per year globally due to substandard or falsfied (SF) medicines and medical products. The Alliance is eager to work with all who are interested in securing safe medicines.

Hussain Jafri, the CEO of the World Patients Alliance, notes that approximately 10% of medications are SF, but there is a lack of good validated information. This an even bigger problem in Africa. In countries where people buy medications on the streets or in open markets, or online, many patients have never heard of fake medicie- they think that if a medication is available, then that medicine must be good, but even licensed pharmacies sometimes do not know where their medications are coming from. Rutendo Kuwana, WHO Team Lead for Substandard and Falsified Medicines Incidents, Technical Assistance and Laboratory Services, also stated that 1 in 10 medical products is fake. That number is as high as 1 in 3 in some countries; and low- and middle-income countries are affected more than other countries (and this doesn't even count the cosmetic industry).

Toxic pediatric cough syrups led to 300 deaths in children in 2022 in The Gambia, Indonesia, and Uzbekistan due to contamination with diethylene glycol and ethylene glycol—industrial solvents used in place of the pharmaceutical-grade ingredients. Contaminated controlled substances are also a problem. In Europe and North America in 2024, there has been an increase in oxycodone contaminated with nitazenes (synthetic opioids), which are 10-20 times more powerful than other narcotics like fentanyl, but have no medicinal value.

Through the WHO Global Surveillance and Reporting System Member State Mechanism, established in 2012, one thousand reports of falsified medical products have been received, globally; however, if 1 in 10 products are fake, then there should be many more reports annually.

The Member State Mechanism needs improvement; it only meets once a year, and its funding is very fragile. One reason more reports are not received, is because of transparency; some countries are worried that if they report, the WHO will think that they don't have strong regulation, and that every report represents a failure of their system.

The WHO has invited the Member State Mechanism to write a report of their 10 years of progress. Independently and collectively we can strengthen the safety of medicines in all countries by encouraging our own countries to:
1. Teach patients about fake medicines.
2. Work with our governments for more accountability and regulation.
3. Encourage reports of any substandard or falsified medical products from all 6 WHO regions.
4. Join alliances.

Get involved! Your advocacy counts!

"Nobody can do this alone", Chris Colwell, Vice President of International Government and Regulatory Affairs for U.S. Pharmacopeia says. We can best tackle the problem of SF medicines with partnerships.

As WHO Director General Dr. Tedros has said "Every life lost to a substandard or falsified product is one too many."

Advocacy action
World AIDS Day

World AIDS Day is observed annually on **December 1st** to raise awareness about HIV/AIDS, show support for people living with HIV, and remember those who have died from HIV-related illness. Established in 1988, this global observance promotes unity in the fight against HIV and encourages access to prevention, treatment, and care services without discrimination. The day also highlights the ongoing need to combat stigma and discrimination associated with the virus and emphasizes the importance of human rights in achieving universal HIV care.

Key aspects of World AIDS Day:

Purpose:	**Support for people with HIV:**	**Focus on rights:**	**Combatting stigma:**	**Call to action:**
To unite people globally in the fight against HIV	To show support for individuals living with the virus and to remember those lost to AIDS-related illnesses	To emphasize that everyone should have access to necessary health services and that healthcare should be free from discrimination, regardless of HIV status.	To challenge the stigma and discrimination that undermine efforts to end the AIDS epidemic.	To remind governments and the public that HIV has not disappeared and that continued awareness, fundraising, and education are vital.