

SHAPING THE DESTINY OF THE AIDS EPIDEMIC

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**Health.Right.Now! HIV Prevention Without
Barriers**

SPEECH

By: Michel Sidibé, Executive Director of UNAIDS

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Shaping the destiny of the AIDS epidemic

Honourable ministers, ladies and gentlemen, participants, and dear friends. It is an honour and a pleasure for me to be here in Germany. Honourable ministers, your presence today shows your longstanding commitment to the AIDS response. This country has been an important ally in helping us to shape the destiny of this epidemic.

We have to remember, we have been talking about HIV prevention in Germany for a very long time. Twenty-five years ago, world leaders found it very difficult to talk about certain issues—like the link between homophobic laws and HIV transmission. People at the greatest risk were hiding themselves, and could not have access to services because they were homosexual, because they injected drugs, or because they engaged in sex work.

But 25 years ago, Germany was talking about these difficult issues. You have been at the forefront, and have helped to change completely the nature of the response. In your country today, I believe we have almost reached zero new infections among people who inject drugs. And we are no longer talking about gay people hiding themselves, being criminalized and not having access to services.

I want to thank you, and to say that you have helped us to shape in some way our strategies against this epidemic. So it is fitting that we are in Germany today to launch this 2011 UNAIDS World AIDS Day Report—30 years after the first days of AIDS.

Difficult journey

Back then we faced a very difficult journey. It was difficult because this disease was characterized as a “gay plague.” People were scared of each other. There was no drug with which to treat people. AIDS was a death sentence.

It is important that we remember this. Many of those early activists lost their lives. But they inspired many others—like you—to stand up and fight the status quo, to bring about a social movement around issues of human rights. To fight against wrongdoing in our systems.

I am proud and happy to stand here with you. Because you have been there. Because you have mobilized yourselves. Because you have put people at the centre of our approach to

Zero new HIV infections. Zero discrimination. Zero AIDS-related deaths.

this epidemic. Because you have worked to generate social solidarity and cooperation between the different parts of the world.

Today we can say proudly that we have broken the conspiracy of silence that killed millions people over the course of this epidemic. More than that, we have generated a social movement. AIDS is the only disease I know of that could create the kind of energy that transforms a society.

AIDS as an opportunity

AIDS is no longer seen as only a problem. It has become an opportunity to change the world and make it better—to make it inclusive. It is a force for us to transform many fundamental issues in today's world.

Without HIV, we would never have seen the reduction of the prices of medicines that people need the most. Your country helped that happen. We were talking about US\$ 15,000 per person per year for antiretroviral treatment. But the reforms generated by HIV—opening the debate around TRIPS; pushing the global market to address issues of public good—have changed the landscape of health and development.

Without AIDS, I could never stand in front of African leaders to tell them it is unacceptable to put someone in jail for 14 years because of their sexual orientation. AIDS opens the world to social change.

I am so happy to see the minister from Kenya sitting here. Two years ago when I was in that country for the launch of a new national AIDS plan, I remember having a meeting with people who inject drugs, men who have sex with men and sex workers, but they had to hide themselves in the hotel in order to meet with me for fear of being treated as criminals.

Fifteen days ago I was in Nairobi again, and I am proud to say that they have changed the legislation. That country has even introduced what I consider one of the most revolutionary judicial innovations I have seen: the “HIV equity tribunal”—the first such programme in Africa, where people have access to justice if they are facing discrimination or criminalization because of HIV.

AIDS is an engine for change. It is helping us to publicly reposition the agenda of global health and social justice. But more than that, we are getting remarkable results. A few years ago, I remember working with the GTZ BACKUP Initiative when you introduced the multisectoral approach to taking AIDS out of isolation. We have been pursuing that approach and it has made all the difference in the AIDS response.

I remember in those days we had only three success stories in prevention: Senegal, Uganda and Thailand. People were telling us, “Prevention programmes will never work.” Today we have 56 countries—even more will be announced today—who have been able to halt and even to reverse the number of new infections. We are breaking the trajectory of this epidemic.

Ten years ago, we had less than 50,000 people on treatment in Africa. Today in that region we have more than 5 million on treatment.

We are completely transforming our relationship with integration—making sure that we do not talk only about AIDS, but about AIDS and maternal health, AIDS and child health, AIDS and tuberculosis. And today we are joining forces with the Red Ribbon-Pink Ribbon

partnership to make sure that women who are living with HIV will not die unnecessarily from cervical cancer because they are not being reached with those services.

I want to say finally that we are making such progress against this epidemic. Now is not the time to pull out. It is time to continue to invest in HIV. We need to show value for money and how to better use the funding available.

We need a debate on shared responsibility and to review the investments in countries in order to increase results in key areas. As an example, in Kenya, the national AIDS budget has been increased while using less external funding. In South Africa, more funds are now available for AIDS and the cost of drugs has been reduced by 50%.

It is also crucial to look at innovation as a force for change. When I visited Australia last year, I was impressed by the new technology developed to test people quickly—and particularly its low cost: US\$ 1. New technology will help us to further reduce costs.

We should also take into account that resources need to go first to those countries most in need. For example, G20 countries should not receive external funding to support their AIDS response and should be able to cover costs through their national budgets. This is shared responsibility. We also need to be creative in the ways we mobilize resources as long-term investment.

In the end, I am looking at Germany to help us with your power and commitment, and to be a strong advocate, especially for Eastern Europe. Germany can be the country to bring changes in this part of the world, where the epidemic is still raging.

Ultimately, this will enable us to achieve UNAIDS vision: zero new HIV infections, zero discrimination and zero AIDS-related deaths.

Thank you.

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